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FINAL INTERIM MEASURES REPORT FOR SOLID WASTE MANAGEMENT UNIT 17 (SWMU 17) PCB CAPACITOR BURIAL POLE YARD APPENDIX E THROUGH APPENDIX G PART 1 OF 2 NSA CRANE IN

2/29/2016

TETRA TECH

APPENDIX E

FIELD DOCUMENTATION

APPENDIX E-1

TETRA TECH FIELD LOGS AND PHOTOGRAPHS - PHASE 1

APPENDIX E-1.1

TETRA TECH FIELD LOG BOOKS - PHASE 1

TITLE

PROJECT NO.

BOOK NO.

Work continued from Page

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SIGNATURE

DATE

WITNESS

DATE

TITLE

PROJECT NO.

BOOK NO.

Swmu 17 April 8, 2013

Work continued from Page

1030: BRC on site

1100: KL onsite.

1115: Coords for Nodes 166 + 165 Switched. Made note on BRC logs.

1200: Node 168 South 5' in the rd Moved + updated coords to side of the Rd.

1230: One node not marked. JJ says it's 178. 4-C complete. Moved 174 + 175 out of creek and onto bank. 174 co-located with SB312

1330: All 4B Areas completed

1400: 175P127 is 26' upstream from wood line.

1430: 175B311 is approx 9.5' from center of ditch. BRC is doing a running log of centerline of NW ditch in 40' stretch around 5B311.

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DATE 4/8/13

WITNESS

DATE

TITLE Summit PROJECT NO.

BOOK NO.

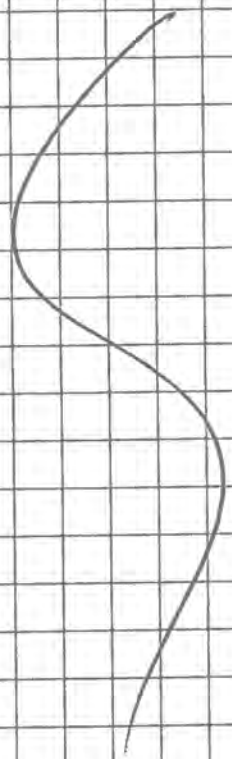
4/8/13

Work continued from Page 21

1500: Survey New Points: 1753 464, 462, 466, 469,

1600: Node 82 is in NW ditch. Move to 2ft South?

1715: Offsite



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Work continued to Page

SIGNATURE

WITNESS

DATE 4/8/13

DATE

TITLE Summit PROJECT NO.

BOOK NO.

4/9/13

Work continued from Page

0700: TT at trailer. Call Security to open gate 9.

0730: Call Tom J. to discuss yesterday.

0800: At site. Begin traverse to Nodes 180 + 181. Had to move 181 3' E to be located at confluence of ditch 8 + 9.

0900 Moved Node 82 3' South to top of Southern bank of NW ditch

0920: Moved Node 180 1.5' South to be directly east of SB#10

0925: Moved 133 5' west to be in line with 134.

0945: Called TJ to discuss Nodes 136 + 135. TJ advised to Place in ⊥ line starting at Location 1753194. About 13' Southwest of coords.

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WITNESS

DATE 4/9/13

DATE

TITLE Swmu 17 PROJECT NO.

BOOK NO.

4/9/13

Work continued from Page

1000: Move Location 121 - 117 about 1' east each to be on edge of access rd Locations originally plotted 4 1' in the rd.

200 - 1230: Lunch

300 - 1500 - Mark remaining Locations at Area 4A.

1500 - 1530: Mark 4 nodes near BLDG 2721.

1530: BRG OFF Site.

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DATE 4/9/13

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TITLE Swmu 17 PROJECT NO.

BOOK NO.

4/10/13

Work continued from Page

0730: KC at trailer getting supplies

0845: KC at Site to collect 1750130-1750132

1000 Samples Collected.

1015: Call security to get in Gate 9 area. LT Potter let me in.

1400: At trailer Sampling Complete. refusal at 21.5" at 458 refusal at 19" at 457.

1600: Depart NSA - Crane for fedex

2000: Arrive in Cincinnati.

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Work continued to Page

SIGNATURE

WITNESS

DATE 4/10/13

DATE

TITLE Summer 17 excavation - Phase I PROJECT NO. 1126 01573 BOOK NO.

April 16th 2013

Work continued from Page

AM: Cloudy some rain 60's
PM: Heavy rain 60's

0830: KL onsite for EQM intro & H+S meeting.

100: Site team: Craig Hoby EQM - Site Super
Tacey Kovach Sullivan - Site Safety
Brent Hardinger EQM foreign trucks
Barry Appleton EQM Operator
Leon Gibson EQM operator
Scott Boyer EQM operator

1130: Site walk.

1200-1230: Lunch

1230: Plan to remove concrete & metal footings from pole racks. T Brent unsure all dirt removed if recycling. Prefer to dispose on trucks. All footing removed and placed near hole. Mound a staging area tomorrow. Still waiting on

1530: Shipment of silt fence and heavy equipment.

1615: TI offsite

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Work continued to Page

SIGNATURE

WITNESS

DATE 4/16/13

DATE

TITLE Summer 17 Excavations Phase I PROJECT NO.

BOOK NO.

April 17th 2013

Work continued from Page

AM: Drizzle very wet 50's overcast
PM: Sunny low 70's

0649: TI onsite

0711: Site team onsite. Site safety meeting.

0800: Talk abt plan. Concerned abt water in excavation without backfill.

0830: Tim Sears onsite. He does not want to open excavation without backfill. He approved a location to store some backfill in gravel area south of B1DG 357.

0840: KL to T. Brent office for him to sign waste Manifests for backhoe.

0930: No backfill available today or tomorrow. Too wet to get backfill

0945: Lay down plastic sheeting in the 4A area to store Metal footings and Concrete.

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Work continued to Page

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WITNESS

DATE

DATE

TITLE Summer 17 Phase I PROJECT NO. BOOK NO.

April 17

Work continued from Page 27

1200-1225 Lunch

1430: All footings stored in laydown area.

1500: Tim Sears onsite and approves the take down of fence.

1530: Begin cutting metal mesh of fence.

1630: Offsite

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SIGNATURE [signature] DATE 4/16/13

WITNESS DATE

TITLE Summer 17 Phase I PROJECT NO. BOOK NO.

April 18 Thurs

Work continued from Page

AM: Sunny 60's
PM: Sunny 70's Storms night

0700: Onsite. H+S meeting: Severe weather today

0730: TI to Ledgen and con BIDG 357 to ask them to move sweeper truck in area EQM wants to use to store backfill.

0800: Sweeper truck moved.

0915: Porta pot delivered.

0845: Begin moving fence posts and laying them in dirty zone on poly sheeting.

1600: fence removed.

1640: Offsite. Mobilize back to Cincinnati.

Work continued to Page

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SIGNATURE [signature] DATE 4/18/13

WITNESS DATE

TITLE Summit Phase I

PROJECT NO.

BOOK NO

Monday

April 22

AM: Sunny 40's

PM: Sunny 70's

Work continued from Page

0625: KL at DRMO Scale house.

0830: 4 trucks arrive at DEMO. Belmar.

0900: Complete tare weights. return to site. Begin Loading NON TSCA from 4B-1. Photos:

1000: Truck 1 and 2 Overweight. Send back to Site. 7 trucks total

1215: All 7 trucks within weight and offsite.

1215-1245: Lunch.

1335: No more trucks today.

1500: Onsite talk to Craig & Photo site. Confirm 3' depth in 4B-1. TSCA trucks on Thursday. Backfill tomorrow.

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Work continued to Page

SIGNATURE

DATE 4/22/13

WITNESS

DATE

TITLE Summit Phase I

PROJECT NO.

BOOK NO.

Tuesday

April 23

Work continued from Page

AM: Cloudy cool 40's

PM: Sunny 60's

0640: KL onsite at DEMO.

0900: trucks arrive. 6 total.

0945: All trucks within weight and offsite. Collected scale tickets from Landfill for 6 of 7. One driver is MIA from yesterday.

1000: Onsite w/ Tom Brent. I expressed concern over how much gravel was being used as backfill from the 1.5' of clean in the area. Craig said he would Rework it with fill when it comes if he has to.

1030: Compaction tester onsite tomorrow.

1115: Back at DEMO. 7th truck from 1st Rd tare weight.

1135: first truck arrives bk.

1445: All 6 trucks from 2nd Rd complete.

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Work continued to Page

SIGNATURE

DATE 4/23/13

WITNESS

DATE

TITLE Summit Phase I

PROJECT NO.

BOOK NO.

Tuesday

ril 23

Work continued from Page 31

500: Onsite, A total of 27 backfill trucks ~~arrived~~ have been onsite. a large stockpile of backfill is staged South of BIDG 357 in the gravel parking lot. to date

640: offsite Backfill trucks total: 27
Landfill trucks total: 20

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Work continued to Page

SIGNATURE

WITNESS

DATE 4/23/13

DATE

TITLE Summit Phase I

PROJECT NO.

BOOK NO.

Wednesday

April 24, 2013

Work continued from Page

AM: Heavy rain 38c some ice
PM: Clear kc some clouds 35c

0645: KC at ORMO.

0700: 6 trucks get face weight.

1000: 5 trucks offsite with loads. The 6th truck will not be able to make it to the Landfill in time

1030: Water in excavation: Meeting b/w Kevin Casekamp (TT)
Tom Brent (KRM)
Jarrod Cornelious (Storm Water Mngr)
Solution: pump water out very slowly to head of ditch 2 drain through straw bales and silt fence to reduce sediment in water. EQM put liner on dirty edge and pushed clean soil against it to provide a barrier to the water and dirty soil.

1200-1220: Lunch

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SIGNATURE

WITNESS

DATE 4/24/13

DATE

Wednesday

TITLE SWMU 17 Phase I

PROJECT NO.

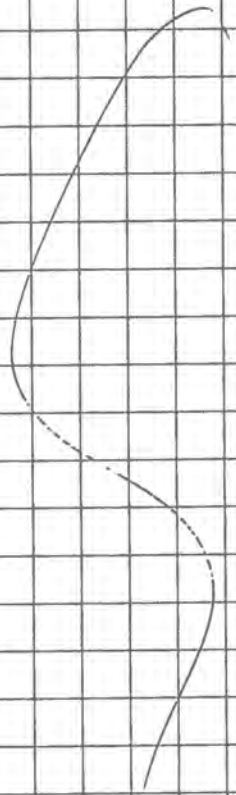
BOOK NO.

April 24, 2013

Work continued from Page 33

1330: Eam set up pump system. wet dry vac to garden hose through silt fence and straw bales.

1600: Almost complete. KC offsite.



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SIGNATURE

WITNESS

DATE 4/24/13

DATE

Thursday

TITLE SWMU 17 Phase I

PROJECT NO.

BOOK NO.

April 25, 2013

Work continued from Page

AM: Cold 20's clear

PM: Mild 40's clear

0645: KC at DRMO

0740: 6 trucks tare weight

0830: 3 trucks over weight back to site

0940: All 6 trucks in weight offsite

1030: first truck back for 2nd rd 3 hrs to make turn

1400: All 6 trucks make second run.

1545: offsite

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SIGNATURE

WITNESS

DATE 4/25/13

DATE

TITLE Summit 17 Phase I — PROJECT NO. — BOOK NO.

Friday

April 26

Work continued from Page

2645: HC at DRMO.

0700: 2 TSCA trucks face out

0800: 5 Non-TSCA trucks weighed out.

0830: 1 TSCA truck face out.

0840: 2. TSCA weigh out. Tom Brent onsite to sign tickets.

0915: 1 TSCA weigh out. First TSCA driver asked to make a second turn.

1000: 4 total Non TSCA trucks offsite.

1030: Craig At DRMO. He needs one more Non TSCA truck to complete the 4B area.

1045: Matt Talley will make a second run.

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SIGNATURE — DATE 4/26/13

WITNESS — DATE

TITLE Summit 17 Phase I — PROJECT NO. — BOOK NO.

Friday

April 26

Work continued from Page

1200: 2 more new TSCA trucks onsite (5) total.

1330: 5th TSCA trucks offsite.

1345: 6th TSCA truck face weight.

1400: 7th Non TSCA onsite.

1500: All trucks offsite. 13 total: 7 Non TSCA 6 TSCA today.

1600: At Summit 17 looking at 4B and plan next week.

1615: Mon trucks on Monday. Move trees in 4C and start digging. trucks on Tuesday.

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Work continued to Page

SIGNATURE — DATE 4/26/13

WITNESS — DATE

TITLE Scurry 17 Phase I PROJECT NO. Monday

BOOK NO.

April 29

Work continued from Page

AM: Clear cool 40's

1700: Leave Cincinnati PM: Sunny Low 70's

0820: Onsite.

1030: EAM has opened up Area 4C to 2.5 where Confirmation samples need to be collected

1400: Confirmation Sample 174C01C0002 is the wall b/w Nodes 172 + 173

1430: Confirmation sample 174C02C0002 was collected b/w nodes 173 + 174. Only 25' from 173 to middle of wall was sampled.

1500: Call b/w KC, Tom B. Ralph B. abt Samp 175D132 0012' result 9.7 ppm ABT 130' b/w 175D132 + next marked location 175D125. Take a sample equidistant from the two points. 65' downstream from 175D132. New Location 175D33.

1530: Samples collected

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WITNESS

DATE 4/29/13

DATE

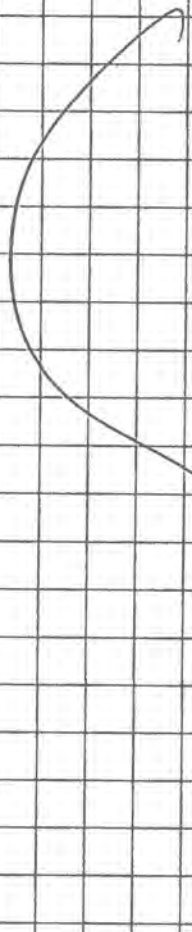
TITLE Scurry Phase I PROJECT NO. Monday

BOOK NO.

April 29

Work continued from Page

1700: Leave trailer for FedEx.



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WITNESS

DATE 4/29/13

DATE

TITLE Scmv 17 Phase I

PROJECT NO.

BOOK NO.

Tuesday

April 30, 2013

Work continued from Page

AM: Clear cool 40's
PM: Clear Sunny 80's

0645: KC at DRMO.

0730: Craig at DRMO to tell us trucks running Gate Eff 0830

0900: 2 truces at DRMO.

1030: 2 truces offsite.

1100: 6 more trucks on the way - Craig Hisby.

1300: First two trucks bk for 2nd turn.

1400: Two trucks offsite.

1500: No more truces today. Only 4 trucks today.

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WITNESS

DATE 4/30/13

DATE

TITLE Scmv 17 Phase I

PROJECT NO.

BOOK NO.

Wednesday

May 1, 2013

Work continued from Page

AM Clear mid 50's
PM Clear Hot 89°F

0645: At DRMO

0715: 4 trucks tare weight.

0820: 4 trucks offsite.

0930: One addition truck tare weight EQm backfilled part of Mound at ditch to two to avoid erosion if it rains.

1030: 5th truck offsite

1200: All 4 trucks back and offsite.

1400: 10 Tri Axle truck in for tare. 2 trucks of gravel delivered for the 4B Area.

1530: 12 trucks total today.

1645: offsite

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WITNESS

DATE 5/1/13

DATE

TITLE Sumo 17 Phase I PROJECT NO. BOOK NO. Thursday

May 2 2013

Work continued from Page

AM: Clear 50's
PM: Sunny 80's

0640: At ORMO

0815: All five trucks offsite.

1030-1100: All five trucks back for tare weights

1215: All five trucks offsite.

1730 Call Cisa at Test America for results Nothing yet Hopefully by the end of the day.

1930: 4 trucks complete a second run. 14 total today 80 total

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WITNESS

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42

TITLE Sumo 17 Phase I PROJECT NO. BOOK NO. Friday

May 3 2013

Work continued from Page

AM: Cloudy rain 50s
PM: PCloudy some rain 70's

0640: At ORMO.

0700: Take weights on 5 trucks.

0710: At site. Mark 2 additional feet On wall that was horblu nodes 172 & 173.

0830: All 5 trucks offsite.

1000: Extra 2' from conformation wall excavated Sample 174C03 C0002 Collected 2' west of Nodes 172 & 173.

1100: Sample collected from 175D134 32.5 downstream from 175D133 and 32.5 upstream from 175D125.

1400: 5 more trucks in and out 2 Rolloff dumpsters with Concrete posts from 43 out. Trucks 91+92.

1545: Offsite to fedEx

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WITNESS

DATE 5/3/13

DATE

43

TITLE Summit Phase I

PROJECT NO.

BOOK NO.

monday

May 6, 2013

Work continued from Page

AM- Rain 50's

PM Cool some rain 50's

0400: KC departs Cincinnati.

0830: ICL onsite. Tom Brent at DRMO Only truck so far. May be a short week due to rain over weekend and forecast.

1030: 5 trucks offsite.

1100: No backfill available for at least a couple days. Call tomorrow to check status. May suspend operations for the week if no backfill is available

1445: Stockpile of 4A-8 dirt gone 10 total trucks offsite today.

1515: Back onsite. Check excavation area. No rock tomorrow.

1630: offsite.

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WITNESS

DATE

TITLE Summit Phase I

PROJECT NO.

BOOK NO.

wednesday

May 8th 2013

Work continued from Page

0630: At DEMO. Should get 2 trucks then more later in the day

0830: First two trucks onsite Load Non TSCA from 4A-8.

1100: 2 trucks offsite.

1300: 2 trucks back. Will load out in 4A-9 TSCA. Backstock of 4A-8 Non-TSCA is staged on 4A- area. Expecting rain tomorrow and will service back to Non TSCA when we can't haul TSCA while its raining.

1400: Ralph, Tom B. Mc Hunk Summit. Mark Shultz & Jim Riggins onsite - we are doing a good job. Show them ditch & Samples.

1630: offsite.

S

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DATE

WITNESS

DATE

TITLE Swmu 17 Phase I

PROJECT NO.

BOOK NO.

May 9, 2013

Work continued from Page

AM: Clear CO's

PM:

0700: At DEMO. Loading TSCA from 4A-9.

0900: 3 trucks offsite to TSCA Landfill

1000: T. Brear onsite to talk to Craig. NO Stockpiles of TSCA.

1300: 2 trucks back. Load the rest of 4A-8. Only 2 trucks remain of 4A-8 soil.

1500: 5 total trucks offsite today. 4C area restored: Seeded and Straw mats for whole area

1630: Bedrock at 3-3.5' in 4A-8 off parking lot where ditch channel ends.

1645: Delivery of gravel for road to TSCA areas near NW ditch. laid rubber sheet for rd. Offsite

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DATE 5/9/13

DATE

TITLE Swmu 17 Phase I

PROJECT NO.

BOOK NO.

May 10, 2013

Work continued from Page

0700: At DEMO. 3 trucks onsite first two trucks to get The rest of Non-TSCA area 4A-8. 3rd to get TSCA from 4A-9.

1030: 2 Trucks back. Load with TSCA from 4A-9.

1230: Secure Site for weekend

1400: Depart Crane

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SIGNATURE

WITNESS

DATE 5/10/13

DATE

TITLE Swmu 17 Phase I

PROJECT NO.

BOOK NO.

Monday May 13, 2013

Work continued from Page

AM: Clear 50's

PM: Clear 70's

0800: TI onsite at DRMO. New Trucking Co. US. Supplying 4 trucks Beelman has 3.

1045: 6 Total TSCA trucks offsite from 4A-9.

1130: At site. Strong Odor and gray Material on bottom of 4' excavation on 4A-9. Photo 1054.

1230: Tom Brent, Craig Hoby, Tim Sears, me meet about what to do. Tom decides to have me collect a Composite Sample from the floor. Then backfill the area with a black mat b/w the clean fill and the floor where I collected the Composite.

1330: Tom to DRMO for Second Rd KC to collect Composite.

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DATE 5/13/13

DATE

TITLE Swmu 17 Phase I

PROJECT NO.

BOOK NO.

Work continued from Page

1400: Composite number 17 4A 9 04 C0404 collected from 4A-9 floor.

1430: KL back at DRMO. Tom B. has to leave for family reasons. KL to sign TSCA Manifests. DRMO to stay open Til 4 today.

1600: 13 trucks total today b/w 4A-9 & 4A-7 TSCA.

1730: Cooler packed offsite to fedex.

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WITNESS

DATE 5/13/13

DATE

TITLE SWMU 17 Phase I

PROJECT NO.

BOOK NO.

sday May 14, 2013

Work continued from Page

AM: Clear 50's
PM: Clear 70's.

0630: At site to go over plan. Load 6-8 loads left of 4A-7 Then start on 4A-6.

0800: 4 trucks from 4A-7 off base. US Bulk

0830: 3 Beelman trucks on site

1145: 3 Beelman trucks off base

1200: 4A-7 excavated down to bedrock At 7' in most areas give or take an inch.

1300: 4 US Bulk trucks back.

1500: All US Bulk trucks offsite 11 Total Today from 4A-7.

1530: All of 4A-7 excavated. Begin track/roll in backfill in 9" lifts

1700: Move excavator to 4A-6 for tomorrow Offsite.

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SIGNATURE

WITNESS

DATE 5/14/13

DATE

TITLE SWMU 17 Phase I

PROJECT NO.

BOOK NO.

Wed May 15, 2013

Work continued from Page

AM: Clear 50's
PM: P.Cloudy 80's

0640: AT DRMO.

0700: 5 Trucks at DRMO 4 U.S. / 1 Beelman Missing 2 Beelman.

0714: 2 Beelman on base.

0840: All 7 trucks offsite.

0900: On site Excavation from node 84 to 86 up to 84 and 97. Most of depths to bed rock around 3.5-4'. This is shallower than the expected 5'.

1000 I Flagged the drainage feature on the southern side of the NW ditch to be excavated This is by sight due to no excavation nodes defining the boundary.

1245: 4 trucks back.

1330: All 7 trucks back

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WITNESS

DATE 5/15/13

DATE

TITLE Summit Phase I PROJECT NO. BOOK NO.

Work continued from Page

500: All 7 trucks offsite.

1515: Tom B. tkc on site. Tom concerned about rain in the open excavation. asked EQM to get impervious tarp lined with straw bales and sand bags. He wants all backside of ISCA soil heavy covered.

1900: EQM offsite.

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SIGNATURE

WITNESS

DATE 5/15/13

DATE

TITLE Summit Phase I PROJECT NO. BOOK NO.

Thursday May 16 2013

Work continued from Page

AM: Clear mid 60's

PM: Thunderstorm 90's

0630: At Summit 17 Photo Straw bales and Stockpile cover.

0700: At Demo. 7 trucks in.

0915: All 7 trucks offsite.

0930: Tom Johnston, Tom Brent, Ralph Basinski, on site walk over entire project.

1000: Photo / measure bedrock depths in 4A-6.

Node 85 - 3'0

Node 85-86 (between) 3.0

Node 84 - 3'

Node 87 - 3'2"

Node 88 - 4'8"

Node 89 - 5'1"

Node 90 - 7'6"

B/w Nodes 90-91 - 9.0'

Node 91 - 9'9"

1130: Heavy rain & lighting shut down operations.

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SIGNATURE

WITNESS

DATE

DATE

TITLE Phase I PROJECT NO.

BOOK NO.

Work continued from Page

1200: No Second rd of trucks today.

1300 - 1430: Phase II meeting

1430: TJ + Kc measure out points in NW ditch near 17513311. TJ has measurements

1630: offsite

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SIGNATURE

WITNESS

DATE 5/16/13

DATE

TITLE Phase I PROJECT NO.

BOOK NO.

Friday May 17 2013

Work continued from Page AM Clear cool

PM

0645: At DRMO.

0700: 6 trucks here. Missing one beelman.

0900: All 6 offsite. Still 1 Beelman missing

1030: 1 Beelman onsite

1130: TJ truck offsite.

1430: 11 trucks total for the day. Begin backfilling 4A-6 by using loader and dumping into hole near Node 91. Excavator used clean bucket to tamp down backfill. Placed backfill from Node 91 to 88 to the surface and ran out of backfill.

1500: Demob. site for week.

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SIGNATURE

WITNESS

DATE 5/17/13

DATE

TITLE Phase I

PROJECT NO.

BOOK NO.

Monday May 20, 2013

Work continued from Page

AM Cloudy 60's
PM P Cloudy 70's

0700: 1 truck stuck at gate. Computers are down.

0900: 2 trucks offsite. 1 more weighed.

1000: 2 more offsite. Craig thinks they got put on a different job.

1445: 7 total trucks today. Rain likely today. backfill open excavation in 1A-6. No more backfill left. Secure site for rainstorm tomorrow.

1630: Offsite

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SIGNATURE

WITNESS

DATE 5/20/13

DATE

TITLE Phase I

PROJECT NO.

BOOK NO.

Tuesday May 21, 2013

Work continued from Page

AM Heavy rain Tstorms 70's
PM

0700: At site. Heavy rain / lighting. 7 trucks at gate parking lot. Hold them up. we will run trucks when lighting stops.

0800: first trucks in for fare weight. Rain / lighting stops

1030: All seven trucks loaded and off base. A couple will try to get 2nd load.

1100: Prepare dig for more trucks this afternoon.

1200: phone call w/ Tom J. abt NW dig locations will try to start in couple days.

1335: trucks back for 2nd rd.

: trucks off base. Total of trucks today.

1630: Site prepared for rain overnight

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Work continued to Page

SIGNATURE

WITNESS

DATE 5/21/13

DATE

TITLE Phase I

PROJECT NO.

BOOK NO.

Wed. May 22 2013

Work continued from Page

AM: Mcd to Lt rain 60's
PM: cloudy

0630: At site. About .25" of rain last night. Check on backfill today

0900: 7 trucks offsite.

0915: KL + Tom B. on site. Go over plan. Hope to get backfill tomorrow to keep digging.

1000 Tracey and I measure bedrock in b/w Nodes 91 + 92 about 15' from the gravel parking Lot. About 10' 1" to bedrock.

1200 - 1515 6 more trucks offsite Mack from Beelman came in under 63,000 lbs. Barry from EQM had him go get more soil. Back at 79,000 lbs.

1535: all trucks off site. Total of 13.

Work continued to Page

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SIGNATURE

WITNESS

DATE 5/22/13

DATE

TITLE

PROJECT NO.

BOOK NO.

Work continued from Page

1600: On site. Water in excavation where NW ditch would be. Concerned abt water ponding with no channel. Sent Tom B. an email.

1700: Off base

Work continued to Page

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SIGNATURE

WITNESS

DATE 5/

DATE 12

TITLE Phase I

PROJECT NO.

BOOK NO.

Thursday May 23, 2013

Work continued from Page

AM (Cloudy Li rain 60's
PM (Cloudy 70's

0640: At Summit 17. H+S meeting Talk w/ Craig abt NW restoration. Tom will meet with them later.

0700: 6 trucks in for tare weight. 1 Beelman couldn't OFF load yesterday

0855: 6 trucks offsite. At Summit walk NW ditch locations. Move 4A1 for 2' west.

1030: 1 truck from Beelman onsite.

1130: 1 offsite.

1230: First round arrives back.

1450: Total of 12 trucks offsite.

1530: 4A-6 almost complete. Move to 4A- tomorrow for TSCA.

1640: 0 ffsite

Work continued to Page

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SIGNATURE

DATE 5/23/13

WITNESS

DATE

60

TITLE Phase I

PROJECT NO.

BOOK NO.

Friday May 24, 2013

Work continued from Page

AM: Sunny 70's
PM: Lt rain

0655: At DRMO.

0845: 6 trucks offsite. from 4A-4 + 4A-6.

0930: KC called to site by Craig of EQM. They hit a transite (asbestos) pipe (12") coming from 4A-5 into 4A-4 at 5.5' bgs. Tom B, Jarrod Crenshaw (asbestos safety), Tim Sears, Maven (asbestos contractors) have meeting abt what to do with pipe.

- EQM - will expose the pipe for the entire length of the pipe thru the excavation (64'~) to the edge of the top of the NW ditch. Brent will break pipe into 6' or 8' sections and place on clean gravel for Maven. They will also replace pipe with pipe provided by Tim Sears.

Maven - They will wrap the sections of pipe and manifest them.

Work continued to Page

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DATE 5/24/13

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DATE

61

TITLE

PROJECT NO.

BOOK NO.

Work continued from Page 61

They will also collect any fragments from the hole in bags.
EQM will get a roll off dumpster and send all pipe waste as TSCA to Heritage. Most likey a Change order. This work will be prefirmed on Tuesday morning.

1400: Only 1 truck back. 7 total for today.

1415: Tom B wants them to backfill 4A-4 so water doesn't collect in excavation.

1500: Offsite

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Work continued to Page

SIGNATURE

WITNESS

DATE 5/24/13

DATE

TITLE

PROJECT NO.

BOOK NO.

~~Monday~~ Tuesday May 28, 2013

Work continued from Page

AM: Cloudy 60's

PM:

0900: At DEMO: No TSCA. Rain water filled excavation after backfill was removed. Getting a Vac truck.

1100: Only 3 trucks of Non TSCA offsite in 4A-5. EQM pumping water from 4A-4 into two 1000 gal Poly tanks. They will sample water and dispose of it offsite

1430: Only 2 trucks back and offsite

1500: Begin sampling 460 - refusal at 3.8'
461 - refusal at 2.0'
462 - refusal at 3.6'

1700: Offsite

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Work continued to Page

SIGNATURE

WITNESS

DATE 5/28/13

DATE

TITLE Phase I PROJECT NO.

BOOK NO.

Wednesday May 29, 2013

Work continued from Page

AM
PM

0630: At Summit. 4A-4 still has ~500 gal in the hole. Cont. pumping.

0700: 3 Beelman trucks onsite. Load from 4A-5 near 4A-7.

1445: 7 total Beelman trucks offsite with soil from 4A-5.

1530: Plan to run TSCA from 4A-4 and remove pipe.

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Work continued to Page

SIGNATURE

WITNESS

DATE 5/27/13

DATE

TITLE Phase I PROJECT NO.

BOOK NO.

Thursday May 30th 2013

Work continued from Page

0630: At IDRMO. Maxim onsite.

0745: 3 Beelman off base with TSCA from 4A-4. Maxim completed removing and wrapping pipe. Only 21' feet of transite pipe and another ~26' of 24" corrugated metal pipe. The transite emptied into the metal pipe.

1230: Transite pipe into first truck manifest # 237

1240: TSCA debris roll off offsite. Estimated truck / box weight at 40,000 lbs Ticket # 236

1500: 6 total Beelman offsite. All TSCA in 4A-4 done.

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Work continued to Page

SIGNATURE

WITNESS

DATE 5/30/13

DATE

TITLE Phase I

PROJECT NO.

BOOK NO.

Friday May 31, 2013

Work continued from Page

Am- T Storms heavy rain.
Pm T Storms

0630: At DRMO: Heavy rain approaching

0750: 1st rd of trucks offsite (3).

1000: Secure site for weekend. Heavy rain and t Storms shut down site.

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Work continued to Page

SIGNATURE

WITNESS

DATE 5/31/13

DATE

TITLE Phase I

PROJECT NO.

BOOK NO.

Monday June 3 2013

Work continued from Page

Am Cloudy 60's
Pm Clear 70's

0500: depart Cincinnati.

0845: arrive at scales. 3 Young + 2 Beelman running. Young has tri axle. Legal weight is 68,000 lbs.

1000: Pumping water from drain that was plugged for transite pipe.

1030: first rd. of trucks was #A-2.

1230: Second rd. is #A-3/ #A-2

1435: Total 12 trucks today. #A-2 is complete. More garbage in #A-3 wire / concrete.

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Work continued to Page

SIGNATURE

WITNESS

DATE 6/3/13

DATE

TITLE Phase I

PROJECT NO.

BOOK NO.

Tuesday June 4

Work continued from Page

AM Clear cool 50's
PM Sunny 70's

0630 at scales.

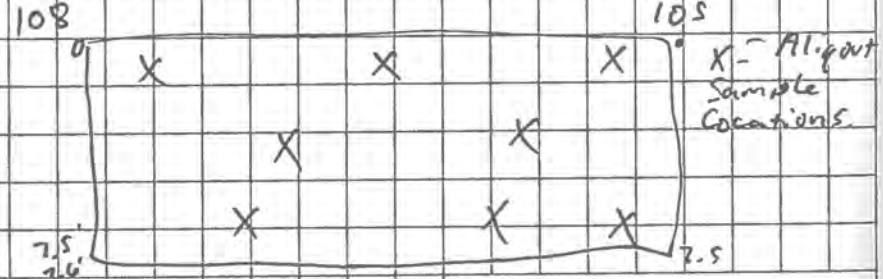
0700: 6 trucks in. 3 Reelman 3 young.

0945: 6 trucks offsite. Begin digging 4A-10 for TI to take sample this afternoon.

1000 Start digging 4A-10. Should be ready for a confirmation sample after 2nd Rd.

1300: All KEL +2 6 trucks offsite for 2nd Rd

1330: EQM Decons - backfill bucket w/ team to collect Composite sample 4 wall is only 7.5' BGS. Sample ID is 17 4A10 05C 0008.



Work continued to Page

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SIGNATURE

WITNESS

DATE 6/4/13

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68

TITLE

PROJECT NO.

BOOK NO.

Work continued from Page

1400: Collected 8 locations to get good coverage of entire wall.

1530: 3 offsite for second rd. 15 total trucks offsite today

1630: EQM Begins to excavate 4A-1 while weather is nice

1700: Offsite with sample for fedEX

Work continued to Page

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SIGNATURE

WITNESS

DATE 6/4/13

DATE

69

TITLE Phase I

PROJECT NO.

BOOK NO.

Wed June 5, 2013

Work continued from Page

AM: P cloudy 60's
PM: P cloudy 70's

0630: At site. 1st rd will be all 4A-1. Begin excavating 4D.

0815: 6 trucks offsite. 1 Beelman remaining for TSCA load in 4D.

0900: 2 Grounding wires hit in 4D. Tim Sears alerts Steve Reddick. Fiber-optic warning tape hit at 20".

1100: 2nd rd. Starts w/ 5 trucks

1115: 1 Beelman offsite with 4D soil. only need one more truck for 5 tons of 4D soil.

1230: 2nd Rd ends with 5 trucks offsite.

1330: Eqm Fix PVC Cover to fire alarm line. Tim Brings Concrete to plug old drain line.

1400: Eqm begins to backfill 4D.

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DATE 6/5/13

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TITLE

PROJECT NO.

BOOK NO.

Work continued from Page

1545: Backfill of 4D complete.

1600: 15 non-TSCA trucks and 2 TSCA today.

1630: Storm water PVC pipe uncovered in 4A-5. Tom and Tim informed. Tom would like to cut it off at ground level and let it drain on surface

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Work continued to Page

SIGNATURE

WITNESS

DATE 6/5/13

DATE

TITLE Phase I

PROJECT NO.

BOOK NO.

Thursday June 6 2013

Work continued from Page

0630: At DRMO. 7 trucks in for tare.

0700: Craig at Demo.

0830: 7 trucks out. Call Tom J abi Sample results. All samples Clean Wants to talk to Tom B. abi Stepping in.

0930: Meet with T Brent abi Samples. Tim S. Wants them to take out culvert under the rd.

1000: 2nd rd done 14 trucks offsite.

1510: 14 total trucks for the day.

Work continued to Page

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SIGNATURE

WITNESS

DATE 6/6/13

DATE

TITLE Phase I

PROJECT NO.

BOOK NO.

Friday June 7 2017

Work continued from Page

0700: At DRMO. Tom B. at scales to.

0830: 7 trucks out for 1st rd.

0830: Marking samples in NW ditch.

0845: 2 additional dump trucks added

0945: 9 trucks total.

1005: 2nd rd. Starts

1130: 7 2nd rd. trucks offsite.

1245: 2 additional trucks offsite.

1555: 6 more offsite. 24 trucks total.

1430: All Soil excavated and stored on Poly. Prep decon area. Depart site.

Work continued to Page

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SIGNATURE

WITNESS

DATE 6/7/17

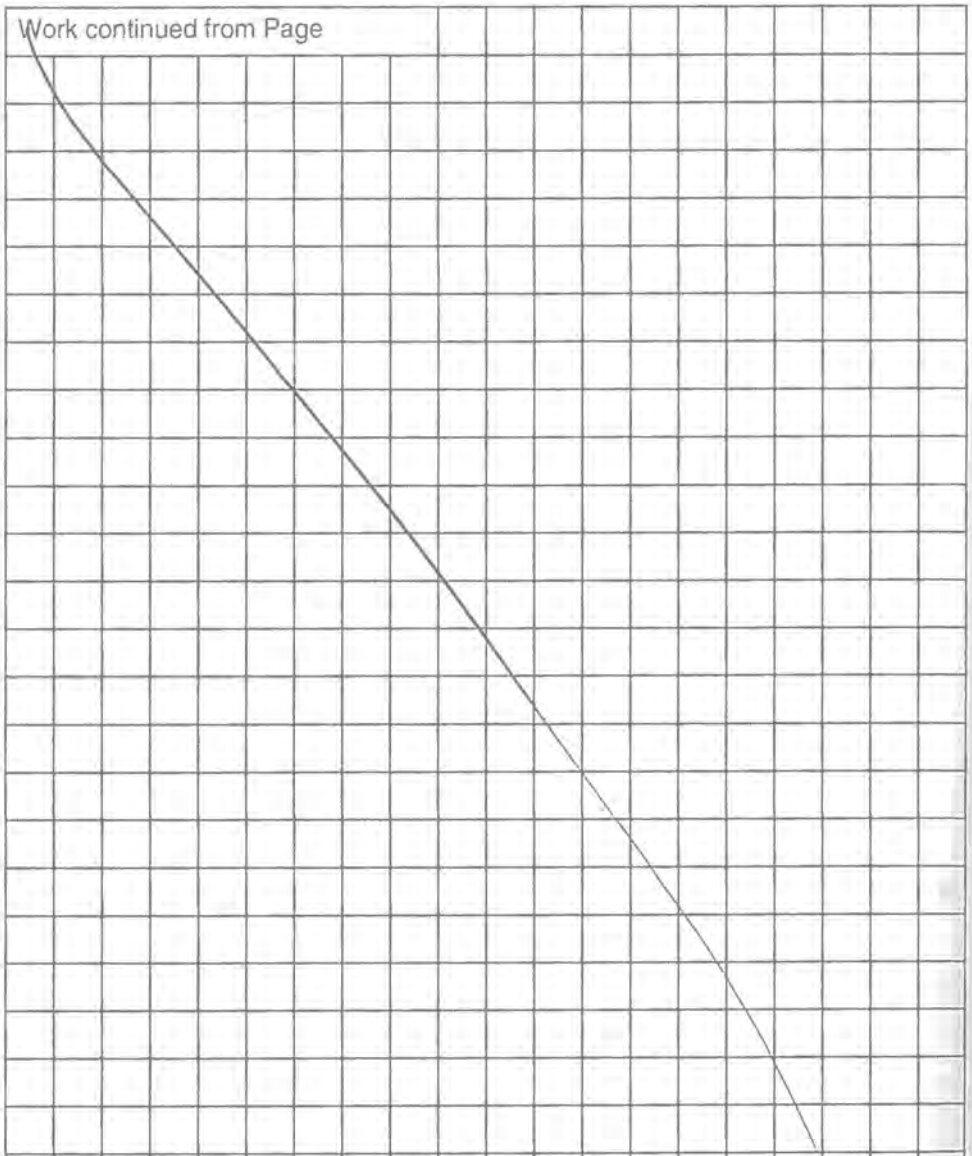
DATE

TITLE

PROJECT NO.

BOOK NO.

Work continued from Page



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Work continued to Page

SIGNATURE

DATE

WITNESS

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TITLE

PROJECT NO.

BOOK NO.

Sample Point mark outs

Work continued from Page

475: 16' from 461, and 28' from 253.

474: 4' up the slope from 475, 30' from 253, and 14.6' from 460

473: 19' from 460, 25.5' from 461, 9.5' from 475

472: 21.3' from 460, 25' from 461, 10.4 from 474

476: Large tree where it should be moving Location upstream in touch. 8' from 464, 10.4' from 311, 20.0' from 252.

478: 11.8' from 471, 4.8' from 477, 13.0' from 469

477: 12.8' from 471, 4.8' from 478, 16.0' from 469

479: 20.9' from 469, 14.3' from 466, 13.3' from 468

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Work continued to Page

SIGNATURE

DATE 6/7/17

WITNESS

DATE

TITLE Phase I PROJECT NO.

BOOK NO.

Monday June 10, 2013 Am: Heavy rain pm: Sunny 80's

Work continued from Page

0700: At DRMO. Sunday Mob.

0735: 1 truck in for tare. weight at 75,000 must go back to take weight off. we will get a second truck.

1000: 2 trucks offsite. All waste offsite.

1030: Sample all locations in NW ditch

1615: Leave for FedEx. Eam completed hauling waste, brought back fill in, began compacting 4A-5 / 4A-3 / 4A-2. Sample support areas. Sketch on pg 78

Work continued to Page

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SIGNATURE

WITNESS

DATE 6/10/13

DATE

TITLE Phase I PROJECT NO.

BOOK NO.

Tuesday June 11 2013

Work continued from Page

0640: Onsite. backfill / gravel coming in.

0800: replace parking lot in 4B area.

1200: Complete backfilling excavations within compaction standards (90-95%) i.m Sears approved.

1900: replace road with compacted gravel.

1530: waiting for gravel rip rap.

1615: Ec offsite.

1645: gravel delivered. Laser level used to measure pipe daylight on NW ditch. Begin placing rip rap and erosion blanket.

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SIGNATURE

WITNESS

DATE 6/10/13

DATE

TITLE Phase I

PROJECT NO.

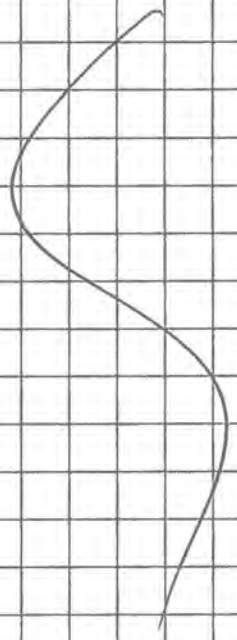
BOOK NO.

Wed. June 12 2013

Work continued from Page

0800: KC onsite. FQM finished all activities Yesterday. Site Clean UP/ equipment pickup today.

1200: KC to submit all Phase I field activities complete until Mod can be signed R-pipe and water tanks.



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SIGNATURE

WITNESS

DATE June 12

DATE

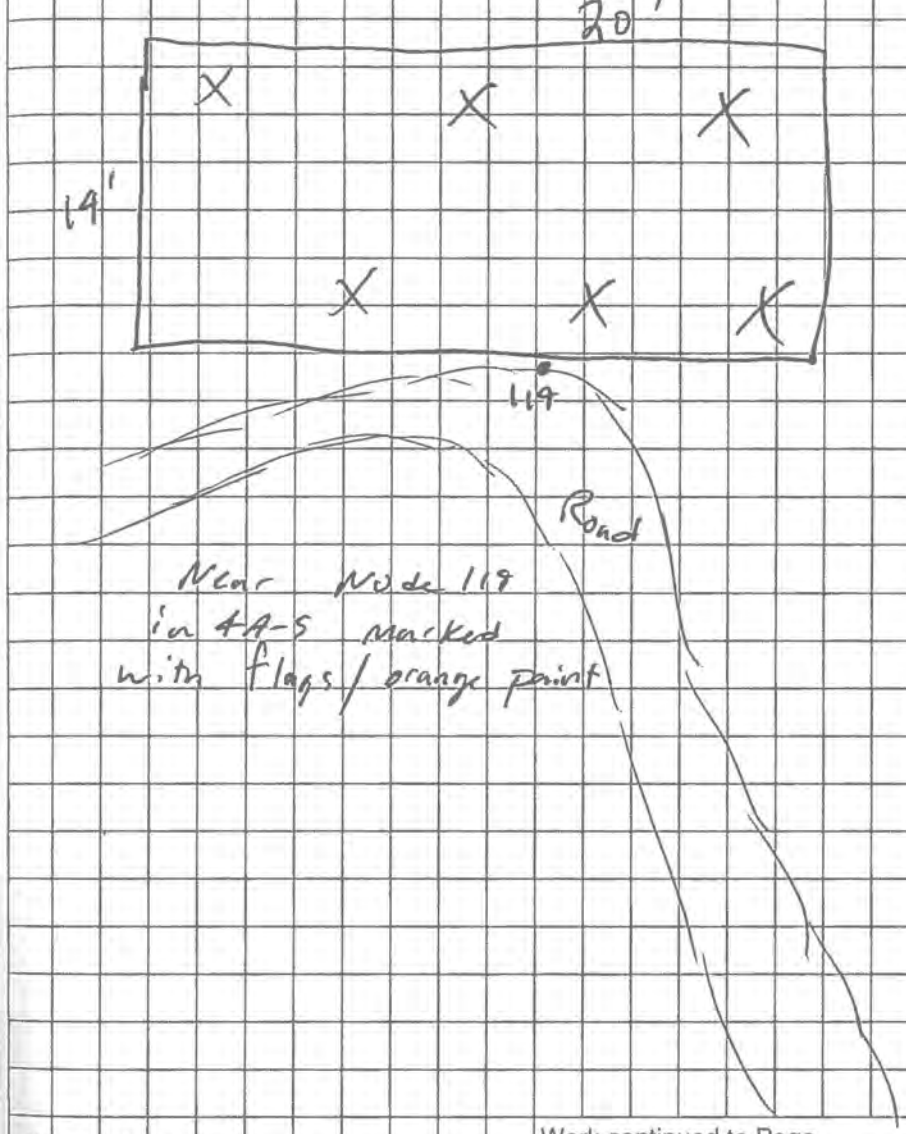
TITLE Phase I

PROJECT NO.

BOOK NO.

Work continued from Page

SA Sample #1 in 4A-S



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SIGNATURE

WITNESS

DATE June 10

DATE

APPENDIX E-1.2

TETRA TECH SAMPLE LOG SHEETS - PHASE 1

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): K-Sup

SAMPLER (S): ___ Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG01573**

YEAR **2013**

LOCATION: 17SB 460

FIGURE #: 1

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 460 0002	HA	0-2	5/28/13	@1600	NA	G		1	x	NA		Top soil/ lt brn silty clay.
17SB 4600204	↓	2-4	↓	1610	↓	↓		↓	X	↓		reddish brown sandy clay sandstone frags

COMMENTS:
Refusal at 4.0'.

COC No(s).:

Laboratory: Test America, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG01573**

YEAR **2013**

LOCATION: 17SB 4&1

FIGURE #: 1

SAMPLE NO	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 4610002	HA	0-2	5/28	1430	NA	G		1	x	NA		Top soil/ lt brn silty clay. Sandstone
17SB												

COMMENTS

Refusal at 1.8'.

COC No(s).:

Laboratory: Test America, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG01573**

YEAR **2013**

LOCATION: 17SB 4&2

FIGURE #: 1

SAMPLE NO	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 4620002	HA	0-2	5/28	1700	NA	G		1	x	NA		Top soil/ lt brn silty clay
17SB 4620204		2-4	↓	1715	↓	↓		↓	x	↓		LT BRN sand clay sandstone frags

COMMENTS

Refusal at 4.0'

COC No(s).:

Laboratory: Test America, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER **112IG01573**

YEAR **2013**

LOCATION: 17SB 463

FIGURE #: 1

SAMPLE NO	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 4630002	HA	0-2	5/29	0915	NA	G		1	x	NA		Top soil/ lt brn silty clay w/ sand & stone
~~17SB~~												

COMMENTS

Refusal at 1.8' 2 attempts.

COC No(s).:

Laboratory: Test America, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): K-S

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG01573**

YEAR **2013**

LOCATION: 17SB 4649

FIGURE #: 1

SAMPLE NO	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 4649 0002	HA	0-2	5/29	1000	NA	G		1	x	NA		Top soil/ lt brn silty clay
17SB 4649 0204	↓	2-4	5/29	1010	↓	G		1	x	↓		wet Brn Sandy Clay Sandstone frags

COMMENTS
Refusal at 4.0'

COC No(s).:

Laboratory: Test America, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): ___ Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER **112IG01573**

YEAR **2013**

LOCATION: 17SB 465

FIGURE #: 1

SAMPLE NO	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 465S0002	HA	0-2	5/29	1100	NA	G		1	x	NA		Top soil/ lt brn silty clay
17SB 465S0204	↓	2-4	5/29	1110	↓	↓		↓	↓	↓		BRN sandy clay w/ sandstone frags

COMMENTS
Refusal at 3.7'

COC No(s).:

Laboratory: Test America, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): [signature]

SAMPLER (S): ___ Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG01573**

YEAR **2013**

LOCATION: 17SB 466

FIGURE #: 1

SAMPLE NO	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 4660002	HA	0-2	5/29	1140	NA	G		1	x	NA		Top soil/ lt brn silty clay. w/ S.S. Grags
17SB												

COMMENTS
Refusal at 1.6'

COC No(s).:

Laboratory: Test America, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG01573**

YEAR **2013**

LOCATION: 17SB 467

FIGURE #: 1

SAMPLE NO	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 4670002	HA	0-2	5/29	1300	NA	G		1	x	NA		Top soil/ ll brn silty clay
17SB 4670204	↓	2-4	↓	1310	↓	↓		↓	↓	↓		RRV silty sandy clay Sandstone fra.
17SB4670405	↓	4-5	↓	1320	↓	↓		↓	↓	↓		" " " "

COMMENTS
Refusal at 4.8'

COC No(s).:

Laboratory: Test America, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG01573**

YEAR: **2013**

LOCATION: 17SB 468

FIGURE #: 1

SAMPLE NO	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 4680002	HA	0-2	5/29	1400	NA	G		1	x	NA		Top soil/ ll brn silty clay
17SB 4680204	↓	2-4	↓	1415	↓	↓		↓	X			C+ Brn Sandy clay Sandstone frags

COMMENTS
Refusal at 3.4'

COC No(s).:

Laboratory: Test America, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER **112IG01573**

YEAR **2013**

LOCATION: 17SB 469

FIGURE #: 1

SAMPLE NO	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 469 0002	HA	0-2	5/30	1100	NA	G		1	x	NA		Top soil/ lt brn silty clay
17SB 469 0204	↓	2-4	↓	1115	↓	↓		↓	↓	↓		BRN Silty Clay moist
17SB 469 0405	↓	4-5	↓	1130	↓	↓		↓	↓	↓		BRN Sandy Clay wet Sandstone frags

COMMENTS
Refusal at 4.7'.

COC No(s).:

Laboratory: Test America, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG01573**

YEAR: **2013**

LOCATION: 17SB 470

FIGURE #: 1

SAMPLE NO	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 4700002	HA	0-2	5/30	1300	NA	G		1	x	NA		Top soil/ lt brn silty clay Sandstone
17SB												

COMMENTS

Refusal at 1.9'.

COC No(s).:

Laboratory: Test America, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): Kevin Losekamp

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG01573**

YEAR **2013**

LOCATION: 17SB 471

FIGURE #: 1

SAMPLE NO	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 471 0002	HA	0-2	5/30	1500	NA	G		1	x	NA		Top soil/ lt brn silty clay
17SB 471 0204	↓	2-4	↓	1510	↓	G		1	x	↓		lt Brn Silty Sandy Clay Sandstone frags

COMMENTS
Refusal at 3.4'.

COC No(s).:

Laboratory: Test America, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[X] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): ___ Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG05219**

YEAR: **2013**

LOCATION: 17SB 472

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS		PID READING	SHIPPED	SOIL DESCRIPTION
17SS 4720002	HA	0-2	6/10	1030	NA	G		1		NA		Lt brn top soil.
17SB4720203	HA		6/10	1045	NA	G		1		NA		Sandstone frag silty clay

COMMENTS:
Refusal at 2.8'

COC No(s).:

Laboratory: GEL Laboratories, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[X] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): ___ Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROJECT NUMBER: **112IG05219**

YEAR: **2013**

LOCATION: 17SB 473

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)OW (H)IGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS		PID READING	SHIPPED	SOIL DESCRIPTION
17SS 4730002	HA	0-2	3/10	1110	NA	G		1	:	NA		Lt brn top soil. Some Sandstone
	HA		6/10		NA	G		1	:	NA		

COMMENTS:
Refusal at 1.6'

COC No(s).:

Laboratory: GEL Laboratories, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[X] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROJECT NUMBER: **112IG05219**

YEAR: **2013**

LOCATION: 17SB 474

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)OW (H)IGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	[illegible]	PID READING	SHIPPED	SOIL DESCRIPTION
17SS4740002	HA	0-2	3/10	1200	NA	G		1	:	NA		Lt brn top soil.
17S13474020A	HA	2-4	6/10	1215	NA	G		1	:	NA		weathered S.S. silty clay

COMMENTS:
Refusal at 3.2'

COC No(s).:

Laboratory: GEL Laboratories, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): ___ Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROJECT NUMBER: **112IG05219**

YEAR: **2013**

LOCATION: 17SB 475

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)OW (H)igh	GRAB (G) COMPOSITE		TOTAL NUMBER OF CONTAINERS	[illegible]	PID READING	SHIPPED	SOIL DESCRIPTION
17SS475 0002	HA	0-2	6/10	1230	NA	G		1		NA		Lt brn top soil. S.S. at 1.9'
	HA		6/10		NA	G		1		NA		

COMMENTS:
Refusal at 1.9'

COC No(s).:

Laboratory: GEL Laboratories, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[X] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): ___ Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROJECT NUMBER: **112IG05219**

YEAR: **2013**

LOCATION: 17SB 476

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)OW (M)ED	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	VOC	PID READING	SHIPPED	SOIL DESCRIPTION
17SS476 0002	HA	0-2	6/10	1515	NA	G		1		NA		Lt brn top soil. weathered S.S.
	HA		6/10		NA	G		1		NA		

COMMENTS:
Refusal at 1.7

COC No(s).:

Laboratory: GEL Laboratories, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): ___ Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG05219**

YEAR **2013**

LOCATION: 17SB 477

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE	TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 4770002	HA	0-2	6/10	1345	NA	G	1	x	NA		Lt brn top soil. S.S. at 1.0'
	HA		6/10		NA	G	1	x	NA		

COMMENTS:
Refusal at 1.1'.

COC No(s).:

Laboratory: GEL Laboratories, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[X] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): ___ Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG05219**

YEAR **2013**

LOCATION: 17SB 478

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
17SS 4780002	HA	0-2	6/10	1410	NA	G			x	NA		Lt brn top soil.
17SB4780204	HA	2-4	6/10	1420	NA	G			x	NA		Silty Clay
17SB4780409	↓	4-5	↓	1430	L	↓			x	↓		weathered S.S.

COMMENTS:
Refusal at 4.8'

COC No(s).:

Laboratory: GEL Laboratories, LLC

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL [ ] SEDIMENT

[X] SUBSURFACE SOIL [ ] LAGOON / POND

[ ] OTHER _____

SIGNATURE(S): K- Sy

SAMPLER: (S): Kevin Losekamp

PROJECT NAME: NSA Cra

PROTECT NUMBER: 112IG052

YEAR 2013

LOCATION: 17SB 479

FIGURE:

SAMPLE NO.	MATRIX	DATE	TIME	CONTAINER TYPE	(L)OW (H)IGH	(G) GRAB (C) COMPOSITE	TOTAL NUMBER OF CONTAINERS	FIELD FILTERED	LAB FILTERED	SHIPPED	SOIL DESCRIPTION
17SS 4790002	A	0-2	6/10 1500					X	N		Lt brn to soil.
17S134790203	A	2-3	6/10 1515					X	N		S.S. frags

COMMENTS:

Refusal at 2.8

COC No(s):

Laboratory: TEL Laboratories, LLC

Tetra Tech

SOIL & SEDIMENT SAMPLE LOG SHEET

Page___ of ___

Project Site Name: SWMU 17
Project No.: 112IG05219

[] Surface Soil
[] Subsurface Soil
[] Sediment
[X] Other: Conformation
[] QA Sample Type:

Sample ID No.: 174C01C0002
Sample Location: 17C01
Sampled By: KL
C.O.C. No.:

Type of Sample:
[X] Low Concentration
[] High Concentration

GRAB SAMPLE DATA:

Date: 4/29/13	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Time: 1400	0-2.5	BRN	Silty Sandy Clay
Method: Plastic trowel			
Monitor Reading (ppm): NA			

COMPOSITE SAMPLE DATA:

Date: 4/29/13	Time	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
	1400	0-.25	BRN	Silty Sandy Clay
Method: Plastic trowel	1401	2.25-2.5	↓	↓
	1402	0-.25		
Monitor Readings (Range in ppm): NA	1403	2.25-2.5		
	1404	0-.25	↓	↓

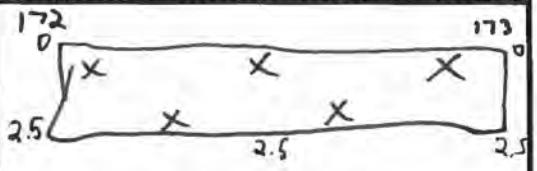
SAMPLE COLLECTION INFORMATION:

Analysis	Container Requirements	Collected	Other
PCBs	1 4oz	x	

OBSERVATIONS / NOTES:

Sample in between nodes 172+173

MAP:



Circle if Applicable:

MS/MSD | Duplicate ID No.:

Signature(s):

K-S

Tetra Tech

SOIL & SEDIMENT SAMPLE LOG SHEET

Page___ of ___

Project Site Name: SWMU 17
Project No.: 112IG05219

Sample ID No.: 174C02C0002
Sample Location: 17 C02
Sampled By: KL
C.O.C. No.:

[] Surface Soil
[] Subsurface Soil
[] Sediment
[] Other: Conformation
[] QA Sample Type:

Type of Sample:
[X] Low Concentration
[] High Concentration

GRAB SAMPLE DATA:

Date:	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Time:			
Method: Plastic trowel			
Monitor Reading (ppm): NA			

COMPOSITE SAMPLE DATA:

Date: 4/29/13	Time	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
	1430	0-.25	BRN	Silty Sandy Clay
Method: Plastic trowel	1431	2.25-2.5	↓	
	1432	0-.25		
Monitor Readings	1433	2.25-2.5		
(Range in ppm):	1434	0-.25	↓	

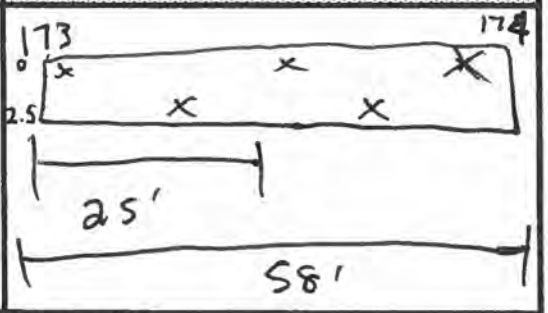
SAMPLE COLLECTION INFORMATION:

Analysis	Container Requirements	Collected	Other
PCBs	1 4oz	x	

OBSERVATIONS / NOTES:

Sample between nodes 173 + 174 only first 25' from 173 to 174 was sampled according to fig 3-5.

MAP:



Circle if Applicable:

MS/MSD

Duplicate ID No.:

Signature(s):

Tetra Tech

SOIL & SEDIMENT SAMPLE LOG SHEET

Page___ of ___

Project Site Name: NSA Crane SWMU 17
Project No.: 112IG05219

Sample ID No.: 174C03C0002
Sample Location: 4C03C
Sampled By: KL
C.O.C. No.:

[] Surface Soil
[] Subsurface Soil
[] Sediment
[X] Other: Conformation
[] QA Sample Type:

Type of Sample:
[] Low Concentration
[] High Concentration

GRAB SAMPLE DATA:

Date: 5/3/13	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Time: 0930	0-2.5	BRN	Silty Clay Some Sand
Method: Plastic trowel			
Monitor Reading (ppm NA			

COMPOSITE SAMPLE DATA:

Date:	Time	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Method:				
Monitor Readings (Range in ppm):				

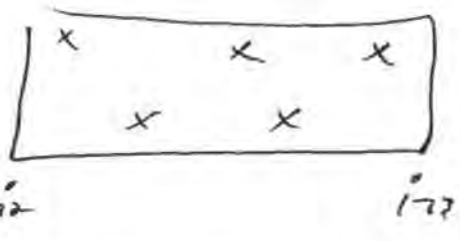
SAMPLE COLLECTION INFORMATION:

Analysis	Container Requirements	Collected	Other
PCBs	1 4 oz		

OBSERVATIONS / NOTES:

2' west of Node 172-173.
1st sample was 1.7 PPM

MAP:



Circle if Applicable:

MS/MSD	Duplicate ID No.:

Signature(s):

Tetra Tech

SOIL & SEDIMENT SAMPLE LOG SHEET

Page___ of ___

Project Site Name: NSA Crane SWMU 17
Project No.: 112IG05219

Sample ID No.: 174A904C0404
Sample Location: 04C
Sampled By: KL
C.O.C. No.:

[] Surface Soil
[] Subsurface Soil
[] Sediment
[] Other:
[] QA Sample Type:

Type of Sample:
[] Low Concentration
[] High Concentration

GRAB SAMPLE DATA:

Date: 5/13/13 Time: 1600 Method: HA Monitor Reading (ppm NA	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
	4'-4.3'	gray	silty clay

COMPOSITE SAMPLE DATA:

Date:	Time	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Method:				
Monitor Readings (Range in ppm):				

SAMPLE COLLECTION INFORMATION:

Analysis	Container Requirements	Collected	Other
PCBs	1 4 oz		

OBSERVATIONS / NOTES:

Collected from bottom of 4A-9 area at 4' with HA. Tom B. wanted to collect sample due to strong odor and discoloration

MAP:

Circle if Applicable:

MS/MSD	Duplicate ID No.:

Signature(s):

Tetra Tech

SOIL & SEDIMENT SAMPLE LOG SHEET

Page___ of ___

Project Site Name: NSA Crane SWMU 17
Project No.: 112IG05219

Sample ID No.: 174A100SC0008
Sample Location: 05C
Sampled By: KL
C.O.C. No.:

- [ ] Surface Soil
- [ ] Subsurface Soil
- [ ] Sediment
- [x] Other: Confirmation
- [ ] QA Sample Type:

Type of Sample:
- [ ] Low Concentration
- [ ] High Concentration

GRAB SAMPLE DATA:

Date: 6/4/13	Depth Interval	Color	Description (Sand, Silty, Clay, Moisture, etc.)
Time: 1400	0-8	BRN/gray	Silty Clay/Some Sand
Method: Bucket			
Monitor Reading (ppm NA			

COMPOSITE SAMPLE DATA:

Date:	Time	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Method:				
Monitor Readings (Range in ppm):				

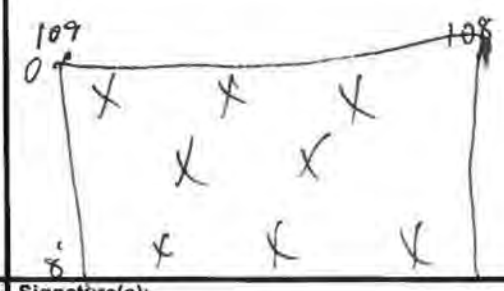
SAMPLE COLLECTION INFORMATION:

Analysis	Container Requirements	Collected	Other
PCBs	1 4 oz		

OBSERVATIONS / NOTES:

Sample collected with clean bucket B/C excavation too deep to enter.

MAP:



Circle if Applicable:

MS/MSD	Duplicate ID No.:

Signature(s):

Tetra Tech

SOIL & SEDIMENT SAMPLE LOG SHEET

Page___ of ___

Project Site Name: SWMU 17
Project No.: 112IG05219

[] Surface Soil
[] Subsurface Soil
[] Sediment
[X] Other: Conformation
[] QA Sample Type:

Sample ID No.: 17SA01C0006
Sample Location: SA01
Sampled By: KL
C.O.C. No.:

Type of Sample:
[] Low Concentration
[] High Concentration

GRAB SAMPLE DATA:

Date: 6/10/13	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Time: 1400	0-6"	BRN	silty clay
Method: P. hammer			
Monitor Reading (ppm):			

COMPOSITE SAMPLE DATA:

Date:	Time	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Method:				
Monitor Readings (Range in ppm):				

SAMPLE COLLECTION INFORMATION:

Analysis	Container Requirements	Collected	Other
PCBs	1 4oz	✓	

OBSERVATIONS / NOTES:

Support area Sample.
20' x 14' in AA-5

MAP:

Circle if Applicable:

MS/MSD	Duplicate ID No.:

Signature(s):

Tetra Tech

SOIL & SEDIMENT SAMPLE LOG SHEET

Page___ of ___

Project Site Name: SWMU 17
Project No.: 112IG05219

Sample ID No.: 175A02C0006
Sample Location: SA-02
Sampled By: KL
C.O.C. No.:

[] Surface Soil
[] Subsurface Soil
[] Sediment
[X] Other: Confirmation
[] QA Sample Type:

Type of Sample:
[] Low Concentration
[] High Concentration

GRAB SAMPLE DATA:

Date: 6/10/13	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Time: 1430	0-6"	BRN	Silty Clay
Method: Plastic trowel			
Monitor Reading (ppm):			

COMPOSITE SAMPLE DATA:

Date:	Time	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Method:				
Monitor Readings (Range in ppm):				

SAMPLE COLLECTION INFORMATION:

Analysis	Container Requirements	Collected	Other
PCBs	✓	✓	

OBSERVATIONS / NOTES:

Support area near 4D.

MAP:

Circle if Applicable:

MS/MSD	Duplicate ID No.:

Signature(s):

Tetra Tech

SOIL & SEDIMENT SAMPLE LOG SHEET

Page ___ of ___

Project Site Name: SWMU 17
Project No.: 112IG05219

Sample ID No.: 17SD133001a
Sample Location: 17SB133
Sampled By: KL
C.O.C. No.:

[ ] Surface Soil
[ ] Subsurface Soil
[X] Sediment
[ ] Other:
[ ] QA Sample Type:

Type of Sample:
[X] Low Concentration
[ ] High Concentration

GRAB SAMPLE DATA:

Date: 9/29/13	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Time: 1500	0-12"	BRN	Sand
Method: Plastic trowel			
Monitor Reading (ppm): NA			

COMPOSITE SAMPLE DATA:

Date:	Time	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Method:				
Monitor Readings (Range in ppm):				

SAMPLE COLLECTION INFORMATION:

Analysis	Container Requirements	Collected	Other
PCBs	1 4oz	x	

OBSERVATIONS / NOTES:

Location 65' downstream from 17SD132 and 65' upstream from 17SD125

MAP:

Circle if Applicable:

MS/MSD	Duplicate ID No.:
—	—

Signature(s):

Tetra Tech

SOIL & SEDIMENT SAMPLE LOG SHEET

Page___ of ___

Project Site Name: NSA Crane SWMU 17
Project No.: 112IG05219

Sample ID No.: 175D134 0012
Sample Location: SD134
Sampled By: KL
C.O.C. No.:

[] Surface Soil
[] Subsurface Soil
[X] Sediment
[] Other:
[] QA Sample Type:

Type of Sample:
[] Low Concentration
[] High Concentration

GRAB SAMPLE DATA:

Date: 5/3/13	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Time: 1000	0-1	Brn	Sand
Method: Plastic trowel			
Monitor Reading (ppm NA			

COMPOSITE SAMPLE DATA:

Date:	Time	Depth Interval	Color	Description (Sand, Silt, Clay, Moisture, etc.)
Method:				
Monitor Readings (Range in ppm):				

SAMPLE COLLECTION INFORMATION:

Analysis	Container Requirements	Collected	Other
PCBs	1 4 oz		

OBSERVATIONS / NOTES:

32.5' downstream from SD133

MAP:

Circle if Applicable:

MS/MSD	Duplicate ID No.:

Signature(s):

APPENDIX E-1.3

PHOTOGRAPHS - PHASE 1

PHOTOGRAPHS AND PHOTOGRAPH LOG

Photograph	Date Taken	Description
Photo 971	4/18/2013	View: south. All footings staged in the 4A area with double black liner beneath them.
Photo 983	4/22/2013	View: south. 4B-1 western end excavated to bedrock at 3'.
Photo 990	4/23/2013	View: east. Backfill in place on western end of 4B-1 with black liner in place.
Photo 995	4/24/2013	View: south. Backfill stockpile with cover in gravel parking lot south of Building 357.
Photo 997	4/24/2013	View: north. Silt fence through northwest ditch.
Photo 999	4/24/2013	View: east. Erosion control (silt fence and straw bales) east of 4B area and at the head of the culvert leading to Ditch 2.
Photo 1011	4/26/2013	View: south. Eastern end of area 4B showing bedrock in TSCA area to be about 30'' in area where drainage channel was forming in the middle of 4B.
Photo 1012	4/26/2013	View: down. Excavation depth conformation in 4B-50 at 4 feet to bedrock.
Photo 1015	4/26/2013	View: north. Area 4B-3 down to 4' on bedrock.
Photo 1022	5/1/2013	View: north. Area 4C overview of open excavation completed to 2.5'.
Photo 1027	5/2/2013	View: east. Area 4B completely restored with gravel and grass seed.
Photo 1031	5/3/2013	View: northwest. Removed two more feet of soil from the wall in Area 4C between nodes 172 and 173 because the conformation sample was above 1 ppm.
Photo 1032	5/3/2013	View: west. Area 4A-8 open excavation in progress. Bedrock encountered at 2.5-3.0' in western portion of area. Down 6 feet in gravel parking lot area.
Photo 1039	5/7/2013	View: westward from node 130 showing non TSCA 4A-8 and TSCA area 4A-9 excavation limits painted on the ground.
Photo 1041	5/8/2013	View: west. Actively excavating Area 4A-8 near node 130 and 4A-9.
Photo 1043	5/8/2013	View: south. Backfill pile replenished.
Photo 1049	5/10/2013	View: north. Area 4C completely restored with gravel and straw mats.
Photo 1051	5/10/2013	View: down. Excavation in progress in area 4A-9 near the access road.
Photo 1056	5/13/2013	View: northwest. Road cut along line from node 130 to 129 in area 4A-9.
Photo 1059	5/13/2013	View: west. Safety fence put for site closure everyday along access road with open excavation.
Photo 1062	5/13/2013	View: down. Area 4A-7 excavated down to bedrock. Bedrock ranged from 6.9 to 7.1' bgs.

Photo 1069	5/14/2013	View: west. Operator compacting backfill with rolling machine in 4A-7 at 7’ bgs.
Photo 1075	5/15/2013	View: east. Open 4A-6 excavation with bedrock at 3 feet.
Photo 1097	5/22/2013	View: west. Area 4A-6 with backfill tracked in. Black tarp is acting as a barrier between backfill and contaminated soil.
Photo 1108	5/23/2013	View: northwest. Roll off dumpster full of TSCA debris from excavations.
Photo 1110	5/24/2013	View: down. Transite pipe uncovered in excavation 4A-4 at 5.5’.
Photo 1115	5/28/2013	View: down. Excavation 4A-5 down to 4 feet along the road.
Photo 1122	5/30/2013	View: down. Label used for the 3 foot sections of Transite pipe.
Photo 1124	5/30/2013	View: down. 3’ sections of Transite pipe wrapped and labeled by asbestos contractors for disposal.
Photo 1138	6/3/2013	View: south. Transition from 4A-2 to 4A-3. 4A-2 is 4’ and 4A-3 is 8’.
Photo 1142	6/5/2013	View: southwest. 4A-1 excavated down to bedrock sloping towards the NW ditch. Average depth ranged about 3 feet.
Photo 1145	6/5/2013	View: west. Begin hand digging around utilities in area 4D.
Photo 1146	6/5/2013	View: down. Concrete culvert leading from Building 2721. Culvert was scraped clean and left in place.
Photo 1147	6/5/2013	View: down. Warning tape for fiber optic line at the base of the 2 foot excavation in area 4D.
Photo 1158	6/5/2013	View: west. Area 4D backfilled completely.
Photo 1171	6/7/2013	View: west. 4A-5 excavation from access road.
Photo 1177	6/10/2013	View: south. Area 4A-5 backfill compacted by drum roller.
Photo 1178	6/10/2013	View: south. Compaction engineer testing compaction of backfill in 4A-5. Compaction tests passed.
Photo 1180	6/11/2013	View: south. Overview of the 4A area after backfill is complete.
Photo 1181	6/11/2013	View: west. Overview of the NW ditch slope and backfill.
Photo 1188	6/11/2013	View: south. Access road replaced with road based gravel.
Photo 1190	6/11/2013	View: east. Rip rap placement and compaction with excavator in NW ditch.
Photo 1194	6/11/2013	View: west. Slope of NW ditch restored with erosion control blankets, rip rap, and grass seed.

Photo 971	**4/18/2013**	**View: south. All footings staged in the 4A area with double black liner beneath them.**

Photo 983	**4/22/2013**	**View: south. 4B-1 western end excavated to bedrock at 3’.**

Photo 990	**4/23/2013**	**View: east. Backfill in place on western end of 4B-1 with black liner in place.**

Photo 995	**4/24/2013**	**View: south. Backfill stockpile with cover in gravel parking lot south of Building 357.**

Photo 997	**4/24/2013**	**View: north. Silt fence through northwest ditch.**

Photo 999	**4/24/2013**	**View: east. Erosion control (silt fence and straw bales) east of 4B area and at the head of the culvert leading to Ditch 2.**

Photo 1011	**4/26/2013**	**View: south. Eastern end of area 4B showing bedrock in TSCA area to be about 30'' in area where drainage channel was forming in the middle of 4B.**

Photo 1012	**4/26/2013**	**View: down. Excavation depth conformation in 4B-50 at 4 feet to bedrock.**

Photo 1015	**4/26/2013**	**View: north. Area 4B-3 down to 4’ on bedrock.**

Photo 1022	**5/1/2013**	**View: north. Area 4C overview of open excavation completed to 2.5’.**

Photo 1027	**5/2/2013**	**View: east. Area 4B completely restored with gravel and grass seed.**

Photo 1031	**5/3/2013**	**View: northwest. Removed two more feet of soil from the wall in Area 4C between nodes 172 and 173 because the conformation sample was above 1 ppm.**

Photo 1032	**5/3/2013**	**View: west. Area 4A-8 open excavation in progress. Bedrock encountered at 2.5-3.0' in western portion of area. Down 6 feet in gravel parking lot area.**

Photo 1039	**5/7/2013**	**View: westward from node 130 showing non TSCA 4A-8 and TSCA area 4A-9 excavation limits painted on the ground.**

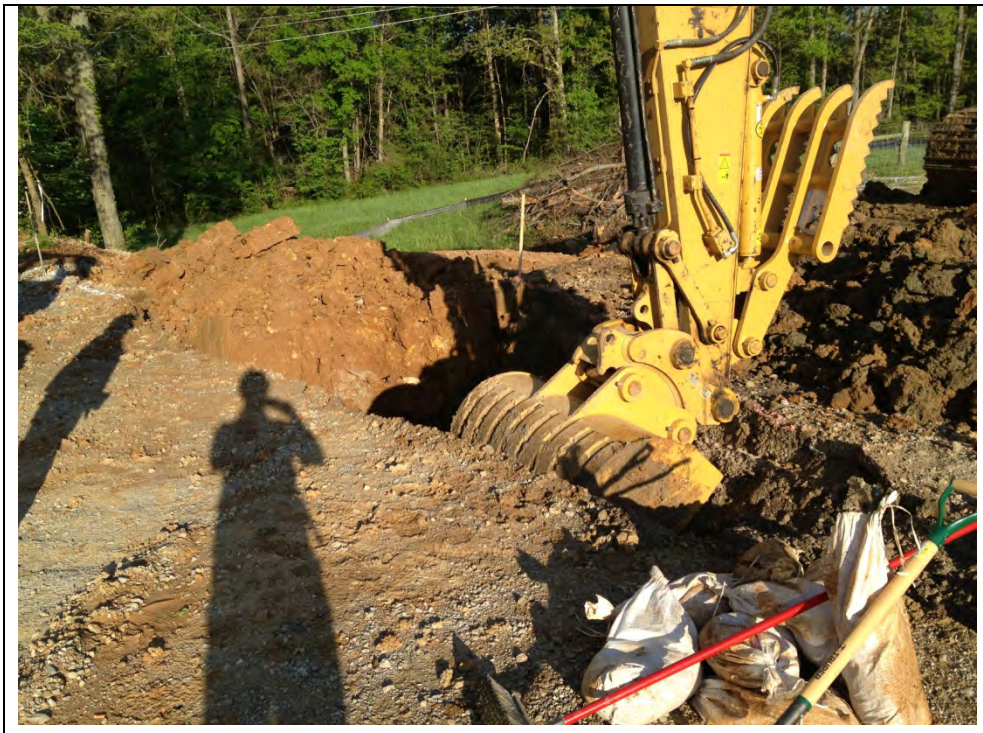


Photo 1041	5/8/2013	View: west. Actively excavating Area 4A-8 near node 130 and 4A-9.

Photo 1043	5/8/2013	View: south. Backfill pile replenished.

Photo 1049	**5/10/2013**	**View: north. Area 4C completely restored with gravel and straw mats.**

Photo 1051	**5/10/2013**	**View: down. Excavation in progress in area 4A-9 near the access road.**

Photo 1054	**5/13/2013**	**View: west. Are 4A-9 excavated to 4'. Gray material with strong odor shown along backfill wall. Gray material was composited and sent to lab (174A904C0404). Sample contained no detectable PCBs.**

Photo 1059	**5/13/2013**	**View: west. Safety fence put for site closure everyday along access road with open excavation.**

Photo 1062	**5/13/2013**	**View: down. Area 4A-7 excavated down to bedrock. Bedrock ranged from 6.9 to 7.1' bgs.**

Photo 1069	**5/14/2013**	**View: west. Operator compacting backfill with rolling machine in 4A-7 at 7' bgs.**

Photo 1075	**5/15/2013**	**View: east. Open 4A-6 excavation with bedrock at 3 feet.**

Photo 1097	**5/22/2013**	**View: west. Area 4A-6 with backfill tracked in. Black tarp is acting as a barrier between backfill and contaminated soil.**

Photo 1108	**5/23/2013**	**View: northwest. Roll off dumpster full of TSCA debris from excavations.**

Photo 1110	**5/24/2013**	**View: down. Transite pipe uncovered in excavation 4A-4 at 5.5’.**

Photo 1115	**5/28/2013**	**View: down. Excavation 4A-5 down to 4 feet along the road.**

Photo 1122	**5/30/2013**	**View: down. Label used for the 3 foot sections of Transite pipe.**

Photo 1124	**5/30/2013**	**View: down. 3’ sections of Transite pipe wrapped and labeled by asbestos contractors for disposal.**

Photo 1138	**6/3/2013**	**View: south. Transition from 4A-2 to 4A-3. 4A-2 is 4’ and 4A-3 is 8’.**

Photo 1142	**6/5/2013**	**View: southwest. 4A-1 excavated down to bedrock sloping towards the NW ditch. Average depth ranged about 3 feet.**

Photo 1145	**6/5/2013**	**View: west. Begin hand digging around utilities in area 4D.**

Photo 1146	**6/5/2013**	**View: down. Concrete culvert leading from Building 2721. Culvert was scraped clean and left in place.**

Photo 1147	**6/5/2013**	**View: down. Warning tape for fiber optic line at the base of the 2 foot excavation in area 4D.**

Photo 1158	**6/5/2013**	**View: west. Area 4D backfilled completely.**

Photo 1171	**6/7/2013**	**View: west. 4A-5 excavation from access road.**

Photo 1177	**6/10/2013**	**View: south. Area 4A-5 backfill compacted by drum roller.**

Photo 1178	**6/10/2013**	**View: south. Compaction engineer testing compaction of backfill in 4A-5. Compaction tests passed.**

Photo 1180	**6/11/2013**	**View: south. Overview of the 4A area after backfill is complete.**

Photo 1181	**6/11/2013**	**View: west. Overview of the NW ditch slope and backfill.**

Photo 1188	**6/11/2013**	**View: south. Access road replaced with road based gravel.**

Photo 1190	**6/11/2013**	**View: east. Rip rap placement and compaction with excavator in NW ditch.**

Photo 1194	**6/11/2013**	**View: west. Slope of NW ditch restored with erosion control blankets, rip rap, and grass seed.**

APPENDIX E-2

TETRA TECH FIELD LOGS AND PHOTOGRAPHS - PHASE 2

APPENDIX E-2.1

TETRA TECH FIELD LOG BOOKS - PHASE 2

INCH

1

2

3

4

5

6

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SWMU 17 Phase II

Mon June 16th

0700 K. GoseKamp departs for NSA Crane.

1030: Arrive at NSA Crane. Meet w/ Tom Brent.

1100 At Scwmu 17. Meet w/
VRITK - Ron Madden - Site Supervisor
Rick Yetman - operator
John - Labor
Chipper - Labor
Ryan Lane - Kemron. QC.

1300 walk Site.

1500 Begin Silt fence installation in Ditch 3.

1545 1 Load of Stone delivered in the Gate 9 area.

1630 Offsite.

Tues June 17th

0700 on site.

0800: Begin bringing Sandbags over to Soil Staging area.

1100: Silt fence installation - continues on Ditch 3.

1330 Pad construction begins in Gate 9 area (NAV - FSCA)

1600 Offsite.

Wed Jun 18th

0800 Onsite.

0900 Cardano Atc reps walk entire site before EPA walk through tomorrow. Notice to put in more silt fence in Grate 9 area near support area.

1200 Lunch

1300 Tom Brent onsite. Discuss revising workplan and URHK resubmittal. Walkover site and inspect soil pads.

1606 Offsite.

Thursday June 19th

0700: on site

0900: EPA Peter and Jene P with Tom Brent for site walkover.

1300 Lunch

1400 at Sumus with Pete, Jene and Tom.

1500 EPA offsite

1606 KC offsite.

Mon June 23

0945 KC onsite

1000: No materials delivered yet.

1100: Tom/Brent advises ~~KL~~ demos until they are ready to excavate.

1200 offsite.

Wed June 25

0930: onsite

1000: Preping Ditch 8B for excavations

1300 Begin Excavations in Ditch 8.

1330 ask for a Plastic tarp in Loading area.

1545 area to wood line excavated. average depth of 2.1' Approx 150'

1600 Restoration initated in Ditch 8 Head.

1700 offsite.

Thursday June 26

0800 onsite. Excavations underway in woods at Ditch 8.

0900 Have PW (Scott) come look at guide wires on the side of Ditch 8 near excavations. Scott advises we are good.

1000 Coconut Mats in place at Ditch 8A. seeded and staked down to slope.

1300 Begin Ditch 8B Excavations

1600 Average depth of 8B is 6 inches

1700 offsite.

Friday June 27

0700 onsite

0800 Ditch 8B excavations complete.

0830 Ditch 8A restoration complete. JF NLW / Caldano added a log check dam to ditch 8A.

1000 Ditch 8B restoration started.

1030 Tom B / KL inspect Soil staging pad. Numerous soil falling to side. VRHK will add a log berm to each side.

1500 Pad fixed.

1600 8B restoration complete.

1610 KL offsite.

Monday June 30

0630 KL on base meet w/ Tom Brent.

0700 At Scalehouse.

1030 4 trucks offsite with Ditch & soil at 44.36 tons. 1 3 ton truck of stumps.

1200 Excavations in NW Ditch initiated.

1315 IDEM Rule 5 inspection.
- Logs in ditches for bridges may be a problem with The Corps.

1500 IDEM Rule 5 Inspection Complete

1700 offsite.

Tuesday July 1

0700 KL onsite.

0900 Ryan Lane (Site QC) contends the contract does not state the floodplain excavations have to be dug to bedrock.

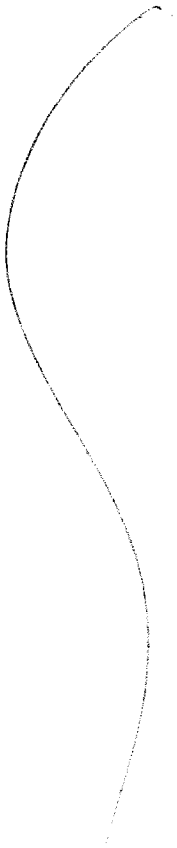
0900 Conference Call Meeting w/ K. Loscamp, Tom Johnston, Ralph Basinski, and Tom Brent.
- They are to dig to bedrock. There will be extra payment for excavations averaging over 3.0' in the NW ditch.

1300 - Site Meeting about NW ditch excavations. Tom B, Tim S., K Loscamp, Ryan L, Ron M on site.
- All parties agree to dig to bedrock

1330 Rick with VE/K Surveys Current NW Ditch Excavations.

1400: Begin digging to bedrock in NW ditch Floodplains.

1700 Offsite.



Wed July 2

0700 Onsite. Cont digging to bedrock in NW ditch.

1000 depths of NW excavations trending from 3.2 upstream to 6.0 downstream. Average depth approx. 4.75 so far.

1600 floodplain and NW ditch Excavations complete.

Thursday July 3

0700 onsite

0745 Dean haul trucks to bring topsoil to NW ditch excavations.

1000 Laying Erosion fabric / blankets on slopes in NW ditch.

1200 Place rock in downstream end of NW ditch

1600 Downstream side of NW Ditch Complete. Still need to finish NW floodplain excavations.

1610 Offsite

Monday July 7

0630 onsite at Scale house.

1000: 10 trucks offsite.

1100: One truck back for start of second round.

1240 Second round complete.

1530: A total of 25 trucks offsite with 409.80 tons of Ditch 8 + NW ditch Soil

1600: Cover remaining soil (100-150 tons) for heavy rain expected.

1700: Offsite.

Tuesday July 8

0730 onsite with Mark Mengel at trailer gathering supplies for 3F sampling.

0800: VRHK Meeting: No work until afternoon meeting due to heavy rain this morning.

1130 VRHK Meeting: Still unsafe to drive on haul road. Work suspended until tomorrow morning.

Wednesday July 9

0700 onsite with Mark Mengel.

0800 at Saamu 17 areas O and P. Crane utilities onsite to mark sewer, fiber, and phone lines.

1002 Tim Sears gives OK to start digging. will have to hand clear around utilities in Non-ISCA areas.

1100: VRHK KEH washing rocks with a mobile rock washing unit on ATV. They scrub and wash rocks over excavation area.

1110 KC to help Mark Mengel.

1300 Stump grinding in Segment 1 and 2 of Ditch 3.

1700 offsite.

Thursday July 10

0700 onsite.

0730 Begin Hand digging west of Node 73A to locate utilities. Called Ron Ennis with Naufac to locate/ensure sewer line is not Compromised.

0900 No sewer line located. Begin digging in TSCA Sediment area of O and P

1045 Down 2' Near Node 73 in channel. Down approx. 3' Near Node 73A.

1400 An oily black substance uncovered in ditch 3 excavations in 3O + 3P areas. Strong odor at 2' in channel. Substance appears to be deposited along bedding plane in bedrock.

1430 Tom Brent advises to take all material in the area to TSCA pile. A sample collected 175D3552229 on 3 day turn to determine PCB Content of Material.

1500 a trench perpendicular to the ditch will be dug Friday to determine width of material.

1630 offsite

Friday July 11

0700 on site

0730 URHK digging trench ⊥ to ditch.

0800 Approx 1 foot of black material present outside of ditch. Bedrock bench in 3D prohibiting flow outside of 1 foot. All black material removed to TSCA pad.

0900 Tom Brent wants to remove additional area up to daylight of Ditch 3 pipe. Area is 6' x 5' wide x 2.5' deep.

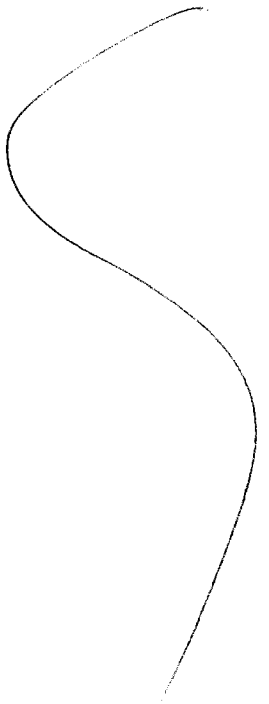
1000 Some black Material will be left in place in rock due to lack of ability to remove bedrock.

1100 All three utility lines uncovered. Tom B. wants to leave soil under lines to support.

1200 URHK removes all soil under lines.

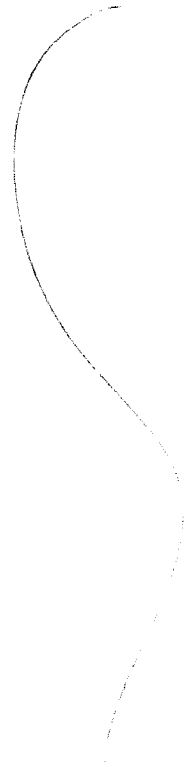
1400 3D and 3P floodplain excavation complete. 3D average depth = 1.5'. 3P average depth 3.5. 5.0' in 3P near node 76.

1600 URHK will work Saturday on restoring 3D + 3P areas.



Monday July 14

0700 Contact Paul Baril on site conditions. Heavy rain with No onsite work.



Tuesday July 15th

0700 Heavy rain. No dirt work in the morning.

0800 VRHK cuts stumps in remaining excavation area and fix erosion fabric in NW Ditch.

1200 Tom B. wants to submit a FTMR for confirmation sampling near daylight of pipe.

1500 Begin excavating Ditch 3 Non-ISCA down stream of 30+32.

1515 Track dump gate left open with sediment spilling on haul road for 250'.

1530 Use Spray paint to highlight Spilled Sediment.

1700 VRHK uses Skid Steer to remove all impacted soil. hydraulic line leak over log bridge.

1800 Log bridge removed.

1800 Approx. 12 cu yards of material removed for spillage.

Wed July 16

0710 At visitor center w/ Tom Ridey.

0730: At Tom Brent Office. Discuss Swmu 21 OWS and Swmu 17 spill incident.

0810 onsite at Swmu 17. URHK digging non-TSCA sediment in Segment 6. Also setting up a dam downstream of 30+3P flood plain excavation in Ditch 3.

0840 Another spill of Ditch 3 sediment on haul road and Gate 4 staging area. TRT to mark spillage with green spray paint.

0900 URHK Takes bobcat and scrapes haul road. Excavator removes some of the road in attempt to make it level.

1000: Tom Brent onsite. Concered about Spillage and dam effectiveness.

1100: Almost completed excavation in Non-TSCA Stream. Begin restoration downstream of 30+31. Tom Brent Offsite.

1200 Lunch for URHK

1300 URHK wants to powerwash logs in TSCA Stream Segment & build a ditch to pipe around water from Ditch 3 in PVC.

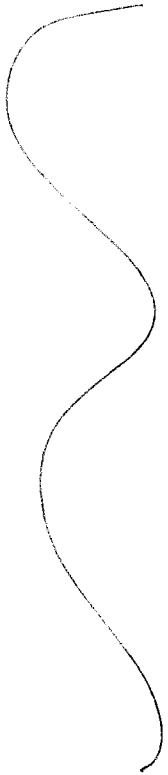
1315 Tom Brent advises not to do either. all cuttings from logs will go into TSCA Segment and removed.

1440 URHK begins to setup pipe around with pump to ditch outside haul road.

1500 K Lockamp departs site

1105 WRHK finishes TSCA logs removal. Logs cut into 20" lengths and placed on TSCA Pad for disposal. WRHK closing up site

1705 offsite



Thur 8/17

07:00 on site

07:15 onsite with Contractor. Work this morning continue TSCA excavation in ditch & restoration work

07:45 Tom Brent - Office.

08:00 TSCA excavation, pumping & dikes working in stream

09:00 Restoration work begins

10:50 Finished TSCA excavation. Begin decon excavator & Dumps 02 & 04

12:00 Lunch

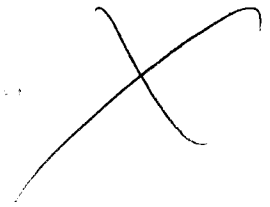
13:10 Tom Brent & Guest on site. VRHK is using B. dump trucks to transport PCB sediment to storage pad. This includes dump which opened the tail gate on Tuesday & Wednesday. Brent was notified.

15:00 Excavating in area 3N. Stream restoration to old log stream crossing in TSCA area.

16:00 Small Deere excavator working Non-TSCA storage pad is stuck. Bring down Large excavator to help.
Last Truck (02) of day Overloaded with wet material. Spill out right side & back of bed at Gate 7 staging area. Material cleanup.

16:35 Large Excavator assisting the removal of Small Deere Excavator

17:05 off-site



Fri 7/18

06:50 - arrive

07:25 Talk to Elliott & Ron of VRHK about spill yesterday, Both said they had not been told. VRHK called meeting with staff to discuss spill and to stop more.

08:30 Elliott, Ron, Ryan, & myself ~~met~~ met with Tom Brent to talk over spill.

09:00 VRHK pumping water from stream, grading for restoration, in 30 area

09:30 Tom Brent & myself to Summit 21

11:15 Excavatin in 3M area

13:00 Topsoil stockpiled near Gate 9 area

14:10 Excavation on non-TSCA material in floodplain 3J to 0.5' deep

16:30 Stop excavation for day. Continue to restore stream bed. Surface seeded completed in area 30

16:45 VRHK said work on Saturday will be excavation Non-TSCA in 3J, and restoration in upstream areas. Monday set for off-site disposal

17:15 off site

Monday July 27

0600 onsite

0635 Meet with Tom Brent to get Non-TSCA Manifests.

0810 First round complete, 7 total trucks. Young only sent 7 instead of the requested 10.

0930 1 Young truck broke down.

1000 Start of Second round.

1210 1 more truck out for the second Rd.

1300 Small coal bed observed near SC in Piton 3.

1310 Bedrock at Nodes 66 + 67 is at surface with 0" removed

1400 One truck back for a third Rd.

1435 3rd round complete

1435 A total of 266.02 tons Shipped of Non-TSCA in 14 trucks

1530 Meet with Tom. Get Manifests Signed for tomorrow. 7 trucks at the Scales at 7am.

1710 Offsite

Tuesday July 22

0630 Onsite at scales

0700 7 trucks of NON-TSCA offsite

0730 Large rocks (12'x6'x4') in 3J Oxbow area being cleaned.

1000 Tom Brent onsite. Concerned about Dust.

1200 14 total trucks offsite.

1230 Log check dam installed in Ditch 3 Near Node C4.

1500 A total of 20 trucks and 320.88 tons

1600 Excavation in 3K initiated. Depth Near Node C7 was on 2' but depth to rock near C6' in middle of wall.

1730 Offsite

Wednesday July 23

0640 Onsite at scales

0745 Heavy rain. Last truck offsite A total of 83.64 tons of NON-TSCA offsite.

1000 Call work for the day due to heavy rain and Lightning

Thursday July 24

0630 onsite. Dust No longer a problem with rains over last two days.

0830 Excavations in 3K & 3J completed Small area ~ 100 sq ft only excavated 6" due to Shallow Bedrock.

0930 3K Near Node 70 is 3.5 feet.

1045 Ditch 3 Segment 5 complete.

1200 initiated 3I excavations in Utility Corridor.

1400 Rev Madden informs TT, that we will ship TSCA material on 4 trucks.

1500 Area 3I almost complete.

1630 offsite

Friday July 25

0640 Onsite meet with Tom Brent for TSCA Manifests.

0730 At Scales two truck through.

0900 two more trucks through.

1010 4 trucks offsite. Total of 90.77 tons of TSCA

1100 Restoration of 3J & 3K complete.

1200 Excavation of 3I complete.

1215 Excavation of 3H initiated.

1500 Ditch 3 Sediment removed to 3I.

1600 offsite.

Monday July 28

0630 Onsite for Non TSCA Manifests

0815 5 trucks through Scales.

0900 onsite. Digging Ditch 3 Segment 3.

1010 Back at Scales.

1215 10 trucks offsite.

1315 Meeting about 3F. with Tom Brent, Elliott A, Ron Madden. 1 foot of entire 3F area will be removed from creek. TT will mark it out

1500 3 truck offsite. 13 total

1600 Digging in Segment 2.

1710 Offsite.

Tuesday July 29

0630 Onsite

0700 at scales waiting for TSCA trucks.

0800: Still no trucks. Call Paul B. Trucks having trouble at Gate.

0850 3 TSCA trucks through gate.

1030 3 TSCA trucks offsite.

1100 Call Tom Johnston. FTMR approved. will begin sampling today

1300 Tom Brent Onsite. Not happy with how far excavation ahead of restoration. RHK also dug a trench within Ditch 3 to Channel water. They are not allowed to do this and will have to dam and pipe around.

1515. Tom Brent notifys KL about a Tractic truck overturned in Ditch 3.

1523 KL onsite. VRHK has a chain hooked up to dump truck and turns it over. Only a small amount of oil / fuel (less than pint) Leaked out of truck. Oil Spill pads and an earthen berm erected downstream of accident. The earthen berm soil will be removed to NonTSCA pad b/c it was brought in a contaminated truck (3cuyds). Material removed where oil impacted Sediment / rock (4 cuyds).

1740 At trailer packing sample for FedEx.

1805 Depart Trailer.

Wednesday July 30

0630 Onsite at Toms office for Manifests.

0700 At Scale house w/ Tom Riley. Shipping TSCA and non-TSCA.

0715 Call Tom Brent to come to the scales.

0800 Tom at scales.

0940 1st round complete 8 non 5 TSCA.

1000 KL + TR onsite. Restoration of Ditch 3 Segment 3 and 2 ongoing.

1145 Round 2 Complete. 8 non TSCA trucks.

1255 Round 3 start 5 TSCA trucks

1430 Round 3 complete. Paul Bunnell asks us to stay late.

1540 No Truck. Depart Scales.

1710 Offsite.

Thursday July 31

0700 onsite setting up sample equipment.

1000 3F East complete.

1010 Tom Brent onsite. Decided to take 3 feet off 3F bank, Lay Plastic, Then restore until he get Lab results.

1030 Sand from under TSCA Pad being loaded

1045 TSCA Pad footprint is 40x40' with wooden Stakes

1130 Both A rows in 3Ox3F area have Odor

1530 Sampling Complete

1630 Preping samples in trailer.

1700 Offsite.

Friday August 1

0700 onsite. Mark out 3F area w/ Kamson.

1000 Rd 1 Complete. Call to have a tree consultation in 3F stepout area. will wait til Monday.

1200 Rd 2 complete. Measure 3F rows with Tom Riely.

1300 Non-TSCA Pad is 97' long x 27' wide.

1400 backfill delivered on trucks.

1600 Offsite.

Monday Aug 4

0800 onsite. Tent onsite for trees. No but habitat.

1000 restoration complete past original 3' area.

1200 3D-4 radius average of 2' depth.

1400 Set up pump around near Gate 9.

1445 5 trucks for tomorrow. Meet with Tom B for manifests

1600 Cover pile.

1700 offsite.

Tuesday Aug 5

0630 onsite. Meet with Tom B about Carb results in 3' area.

0700 Hot scales for 1st rd.

0840 5 trucks offsite.

1000 Mark out 3' Step Out Boundaries with Spray Paint

1200 2nd rd complete

1300 Meet with project team for VRHK: Paul B, Ricky, Ron M. about 3' Dig to marked boundary and line with Plastic and backfill

1300 3rd Rd complete

1600 Meet Tom Brent.

1700 offsite.

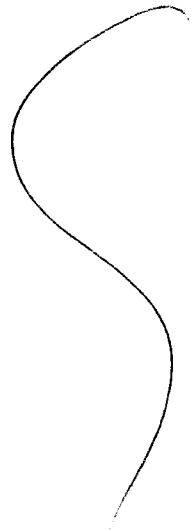
Wednesday Aug 6

0630 At 3245 with Tom Brent

0700 training Eve to replace me at scales.

0900 Leave scales for Sunny 21 Meeting

1130 Depart NSA Crane



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8-12-14

Mobilized from PGH to Bloomington, IN.

8-13-14

0600 - Left hotel & arrived at Crane field trailer @ 0640. Met w/ T. Brent & picked up signed waste manifests.

0655 - Arrived at ORMO Scale House. Ryan Lane w/ Kemron & 8 trucks already on site. Began weighing trucks & discussed my planned sampling activities w/ Ryan.

0850 - Finished weighing in first round of trucks, and returned to field trailer. Again, spoke w/ T. Brent. Began prepping for soil sample collection in Area 3Q. Spoke w/ T. Johnston on the phone & he requested that I sample the TSCA pad. Pad to be divided into 4 equal quadrants w/ a composite sample collected from each quadrant to a depth of 6" bgs. Each composite sample to be comprised of 5 aliquots laid out in a ⁘ pattern.

0935 - Drove by TSCA Pad & took a look at Area 3Q.

Rite in the Rain

0955 - Back at DRMO Scales.

1010 - First truck arrived for weigh out.

1040 - Last truck through scales. Enroute to Area 3a.

1105 - Began laying out rows of samples. Most previous sample holes were visible so used them to measure off the 6.5' for proposed sample kept same line from previous samples.

1215 - Began sample collection. G4/G5, H4/H5, . . . L4/L5. Left the pin flags in place for potential GPS.

1320 - Back at scales. T. Brent on sight.

1340 - Trucks begin arriving.

1425 - Last truck through the scales.

1500 - Crew field trailer. Mixing samples for composite samples.

4A: G/H/I - 4
4B: J/K/L - 4
5A: G/H/I - 5
5B: J/K/L - 5

Only enough sample jars to ship the four composite samples. 4A & 4B marked for PCB analysis. 5A/5B marked to be held at lab. Individual aliquots will be shipped tomorrow when additional jars

Rite in the Rain.

arrive from lab.

1630 - Returned to Area 3a to measure boring depths. All samples were collected & refused.

G4 - 22"	I4 - 13"	K4 - 12"
G5 - 14"	I5 - 17"	K5 - 18"
H4 - 10"	J4 - 14"	L4 - 21"
H5 - 18"	J5 - 12"	L5 - 13"

1650 - Enroute to Fed Ex in Bloomington.

1735 - At Fed Ex dropping off samples.

1745 - Hotel

8-14-14

0600 - Left hotel & arrived at Crane field trailer at 0640. Met w/ T. Brent to get signed waste manifests.

0700 - Arrived at DRMO scale house. Trucks already in que. Finished 0800.
last truck at ~~0730~~.

0830 - At Survu 17 TSCA pad laying out quadrants & sample locations.

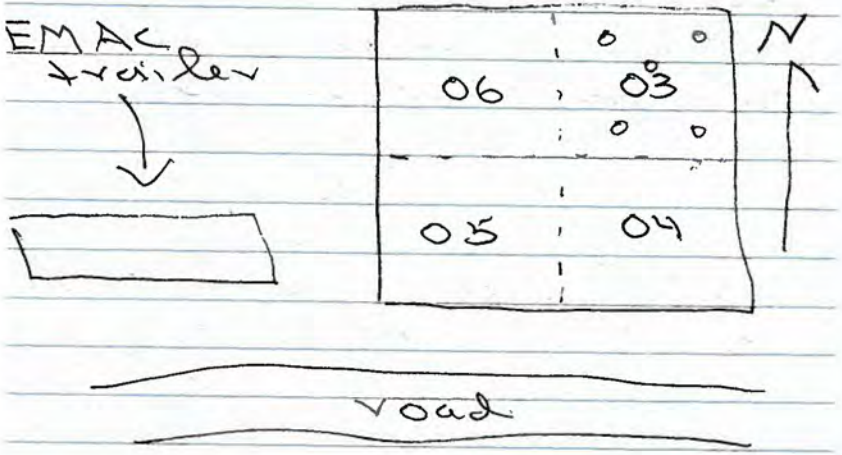
0850 - Back at scale house to weigh in/out one truck which had a flat tire in the morning.

0915 - At field trailer prepping for sample

Rite in the Rain

collection.

0935 - Called T. Johnston re: sample nomenclature.
17SA03C0006 NE Quad
17SA04C0006 SE "
17SA05C0006 SW "
17SA06C0006 SE "



0950 - Scale house. First truck arrived @ 1005. Last full truck leaves at 1145.

1230 - At field trailer. No bobHeware on site yet. Called Lisa @ TestAmerica who said jars were shipped & based on tracking # are to arrive tomorrow morning.

1250 - Spoke w/ T. Brent regarding area at SWMU 17 where not hitting bedrock at same depth as other areas. Just below 2nd main culvert. Would like a sample collected. He will investigate as I need to get back to scale house.

1315 - At scale house. First truck arrives at ~1320.

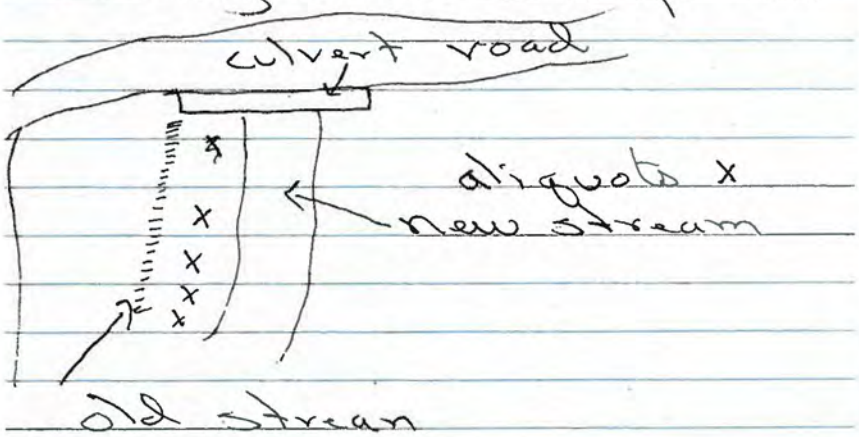
1340 - T. Brent at scale

Rite in the Rain

house. Requests a composite sample to be collected in area previously discussed.

1430 - Last truck weighed out. Enroute trailer to prep for sample collection

1550 - In area to collect sample. Comprised of 4 very wet samples.



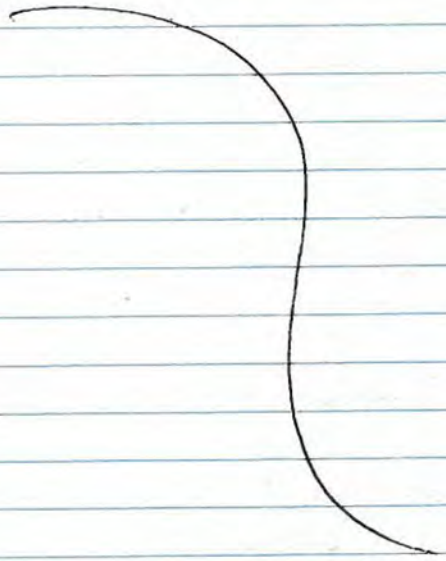
Samples collected ~30' from culvert.

1615 - At field trailer processing samples for shipping & completing COCs.

1730 - Exit Crane

1810 - Fed Ex

1820 - Hotel



Rite in the Rain

8-15-14

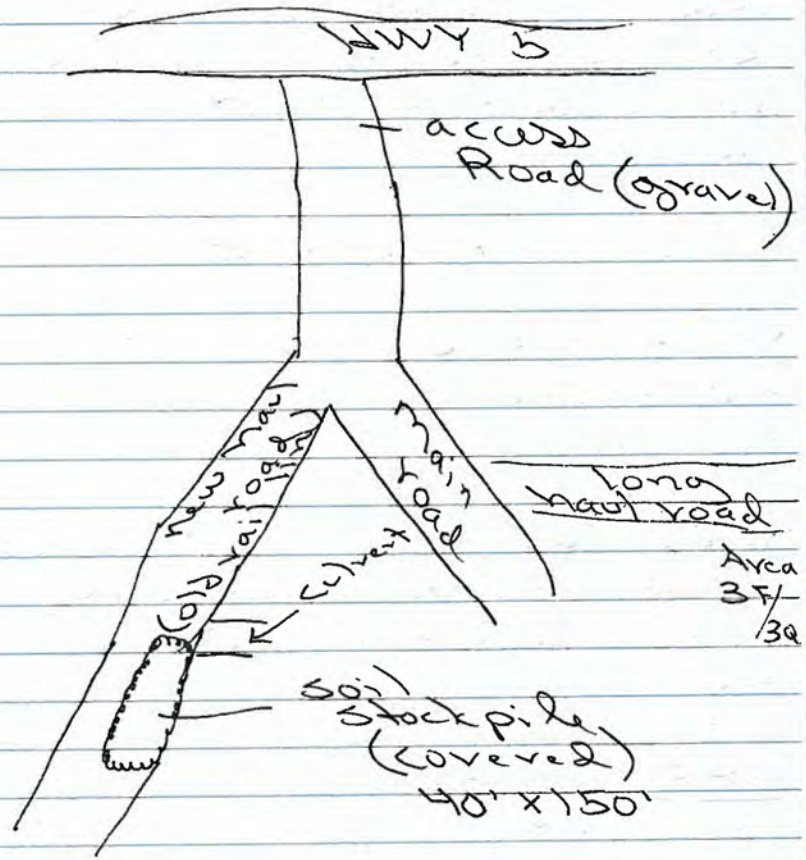
0600 - Left hotel & arrived at Crane field trailer @ 0640. Met w/ T. Brand & picked up signed waste manifests.

0655 - Arrived at scale house. Trucks on site. Last truck weighs out at ~0800.

0815 - At field trailer cleaning old soil samples from fridge. Dumped them on excavation pile at sump 17.

0830 - Completed a quick drive around w/ Paul to view lay down areas & haul roads.

Only other lay down area was as shown below.



Rite in the Rain

1000 - Back at scales. Truck #11 was at scale. He had come by ~910 & was tare weighted by DRMO personnel. He was full & I weighed him out @ 1000. Other trucks began arriving ~ 10:10. Last truck out @ ~1100.

1110 - Met w/ T. Brent & he agreed to weigh the 3rd round of trucks.

1130 - Conducted a quick recon of the culvert area located just below B-2721.

1145 - Demobilizing back to PGH.

9-2-14

0600 - Left hotel.

0645 - Arrived @ Crane. Spoke briefly w/ Tom B. & made copies of signed waste manifest.

0700 - Arrived at DRMO Scale House. No trucks on site. Waited about an hour - still no trucks.

0820 - Arrived at VBHK site trailer. Spoke w/ Ron who indicated no trucks running today due to heavy rains last night. Discussed excavation of soil around the concrete culvert near B-2721.

0915 - At Sumu 17 talking w/ Rick regarding

Rain on the Rain

planned excavation areas. They will be excavating Area 3Q? & stockpiling on-site at Non-TSCA pad.

Plan to dig concrete culvert on 9-4-14, which would give area time to dry out.

9-3-14

0600 - Left hotel.

0640 - At Crane trailer. Met w/ Tom B. & made copies of signed manifest.

0700 - Arrived at Ormo scale House.

0710 - First truck arrives for tare weight.

0810 - Last truck through scales. Went down to Summit to check on activities.

1000 - Back at scale house.

1010 - First truck returns for tare weight.

1115 - Last loaded truck through scales.

Rite in the Rain

R. Madden stopped by Scale House & said Tim Sears wants culvert area excavated today. TSCA roll-off box on site.

1200 - At Crane trailer gathering sampling equipment & supplies.

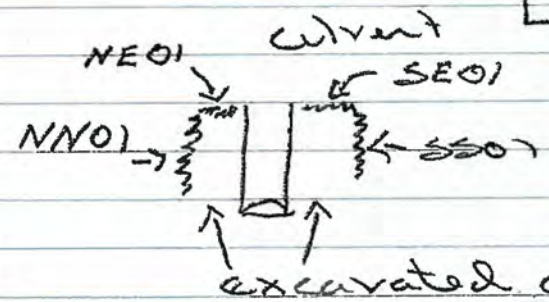
1300 - Back at Scale House.

1310 - First truck arrives.

1455 - Last truck weighs through scale hours.

1505 - At culvert area at B-2721 collecting soil samples from excavation area.

2721



Exposed 6-ft (2) 3-ft sections removed.
- All samples were 6-pt composites.

Collected a sample (SD-138) just below newly exposed culvert. material appeared to be saturated w/ PCBs. Strong odor, dark gray/black in color, & oily.

Collected a sediment sample approx 35' from end of culvert (SD136). Sample collected beneath of fiber netting used for erosion control from center

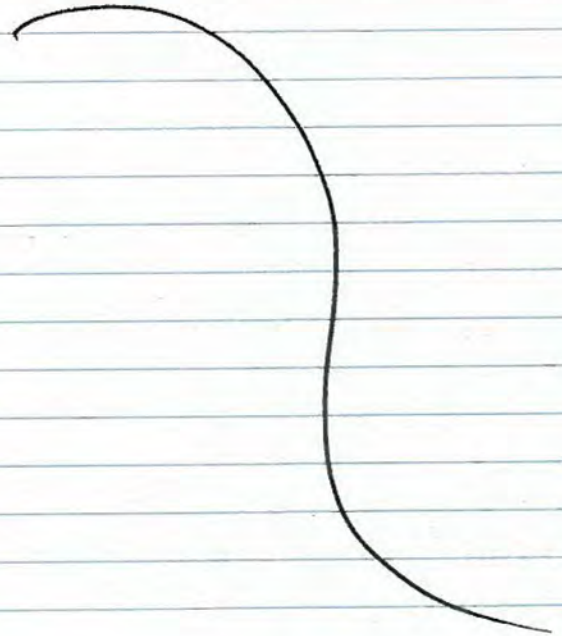
of swale (stream). Location is in utility corridor in line w/ utility pole stabilizer wire. PVC w/ sample ID placed on stream bank.

Collected a sediment sample ~96 feet downstream of the rock pile position just before entering the woods. ~~SD-137~~ PVC marker left on bank. Sample collected from sediment pile.

Changed to (SD-137)

1720 - Back at crane trailer. Dropping off samples.

1745 - Exited crane.



Rite in the Rain

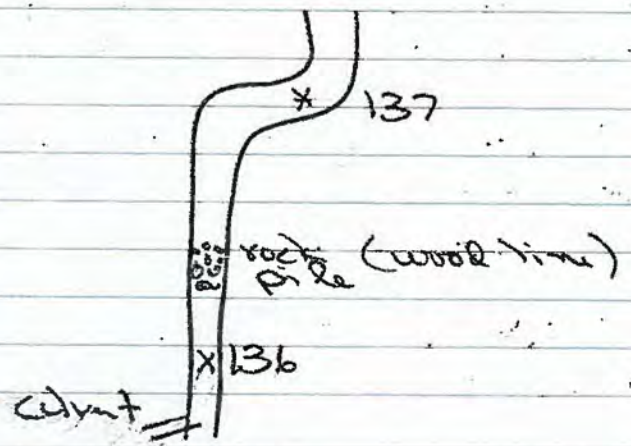
9-4-14

830 - Left hotel

0910 - Crane, field trailer - Completing field notes.

0945 - B2721 measuring sample collection locates.

SD136
35' downstream from end of new culvert
SD137
98' from bottom & rocky drop off just as it enters the woods.



1120 - Spoke w/ Rick from VHRK. They plan to run 6 trucks tomorrow (3 rds each). Also removing roll-off w/ the TSCA material. Reminded him to remind Ron that Haz Waste manifest was needed.

1215 - At field trailer processing samples.

1300 - Spoke w/ Tom J. Send samples to Anala, Co. Do not send step out samples collected around culvert.

1500 - Enroute to Summit to throw out old samples or waste pile.

1600 - Trailer. met L. Cole & Nina & Tom B.

Rite in the Rain

1645 - Collecting sample from capacitor in trailer.

1745 - Exited Crane.

1820 - Fed Ex

Water Samples 9/10/14 QS

Downstream

Sample 127 = 139

Culvert

Sample 128 = 140

9-5-14

0600 - Left hotel.

0655 - At the scale house.

1200 - Last truck through the scale house (Rd 1).

Tom B. to weigh second round of trucks.

Demobilizing back to PGH.

Rite in the Rain

9-8-14

0600 - Left hotel

0635 - Crane field trailer. Stopped to see Tom B. Copies of manifests.

0705 - At scale house.

0935 - At Sumu 17. Measuring Non-TSCA spoil pile.

1015 - Back at scale house.

1300 - Last truck through the scales. All soil has been excavated & removed

1330 - met w/ Tom B.

1400 - Purchasing items & baggies @ NEX.

1425 - Exit Crane.

9-9-14

0830 - Left hotel.

0905 - Crane trailer. Called Tom J. to confirm sediment sample locations previously collected. He requested another sample be collected further downstream.
- Gathering sampling equip/supplies.

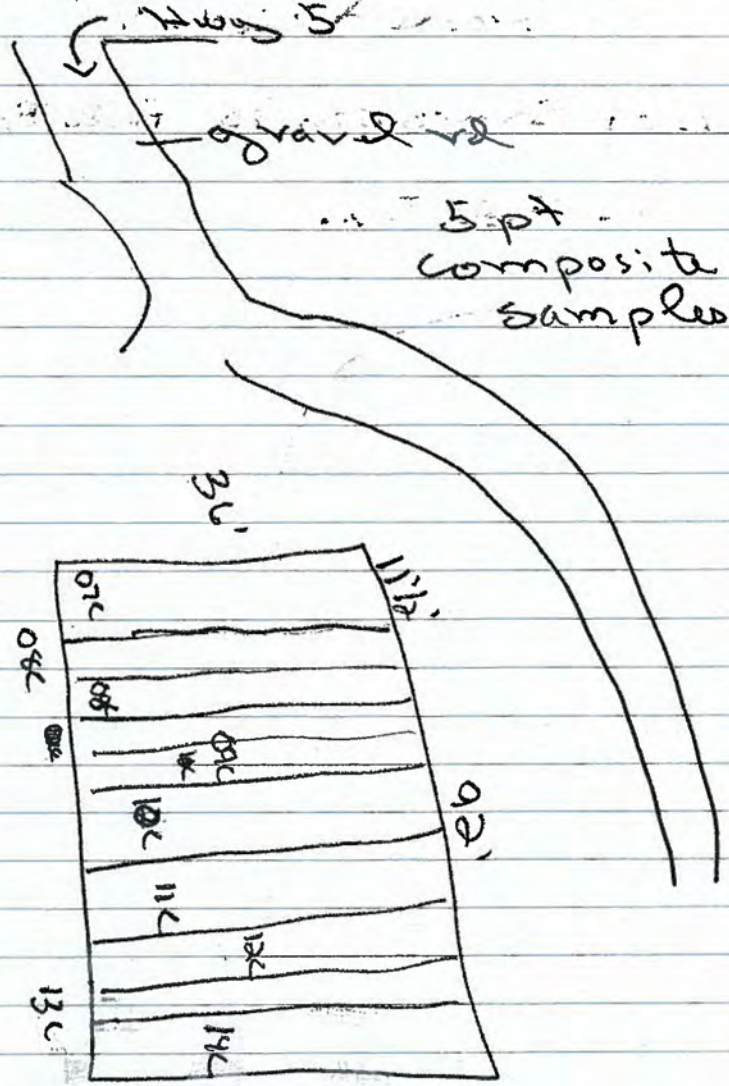
0935 - Sumu 17/B-2721 Conf call w/ Tom J/ Ralph B. Describing site conditions & taking photos. Sed trap

1340 - Trailer, getting supplies.

1430 - Back at B-2721 checking on sed. trap.

Rite in the Rain

1505 - At Summa w/ Non-Tsect. pad collecting samples.



1635 - Completed sampling. Stopped at B2721.

1700 - Crane trailer.

1730 - Enroute to Fed Ex.

1810 - Fed Ex.

Rite in the Rain

9-10-14

0800 - Left hotel

0848 - At B2721 Checking sediment trap & taking photos. Water is being held back.

0915 - Crane trailer: Phone message from Tom J. requesting specific photos.

0930 - Back at B2721 culvert taking photos.

0950 - Call from Ralph & Tom J. regarding site.

1020 - Back at trailer completing Labels/COCs/ air bill.

1100 - Call from RB

requesting water samples from u/in culvert & down stream (Total & Dissolved).

1130 - Collecting water samples.

1205 - Crane trailer. Samples prepped for shipping.

1300 - Exited Crane

1335 - Fueling vehicle

1345 - Fed Ex & then demobilizing back to PGH.

End of Notes for Summ 17

Rite in the Rain

APPENDIX E-2.2

TETRA TECH SAMPLE LOG SHEETS - PHASE 2

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG05219**

YEAR **2014**

LOCATION:

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH (ft)	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
1730NWW01G0026	HA		7/31	0800	NA	G		1	x	NA		Lt brn silty sandy clay Slight odor
1730NWW02G0024	HA		7/31	0815	NA	G		1	x	NA		Lt brn silty sandy clay No odor
173	HA		7/31		NA	G						
1730NWW01C0025	HA	0-25	7/31	1500	NA	C		1	X	NA		This sample sent to the lab and is a composite of all grabs above

COMMENTS:

Refusal at described depth for each grab location

COC No(s).:

2409

Laboratory: Test America

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG05219**

YEAR **2014**

LOCATION:

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
1730NWW B1G00014	HA		7/31	0830	NA	G		1	x	NA		Lt brn silty sandy clay No odor
1730NWWB2G00013	HA		7/31	0900	NA	G		1	x	NA		Lt brn silty sandy clay "
173	HA		7/31		NA	G						
1730NWW02L00014	HA		7/31	1505	NA	C		1	X			This sample sent to the lab and is a composite of all grabs above

COMMENTS:

Refusal at described depth for each grab location

COC No(s).:

2409

Laboratory: Test America

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): K-Sp

SAMPLER (S): ___ Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG05219**

YEAR **2014**

LOCATION:

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
1730NWW01G0015	HA	0-15	7/31	0915	NA	G		1	x	NA		Lt brn silty sandy clay No odor
1730NWW02G0014	HA	0-14	7/31	0930	NA	G		1	x	NA		Lt brn silty sandy clay "
173	HA		7/31		NA	G						
1730NWW03C0015	HA		7/31	1510		C						This sample sent to the lab and is a composite of all grabs above

COMMENTS:

Refusal at described depth for each grab location

COC No(s).:

2409

Laboratory: Test America

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): Kevin Losekamp

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG05219**

YEAR **2014**

LOCATION:

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
173PNEWA1G0018	HA	0-18	7/31	0945	NA	G		1	x	NA		Lt brn silty sandy clay No odor
173 PNEWA2G0024	HA	0-24	7/31	1000	NA	G		1	x	NA		Lt brn silty sandy clay Slight odor at 20"-24"
173	HA		7/31		NA	G						
173PNEWO1C0021	HA		7/31	1515	NA	C		1	X	NA		This sample sent to the lab and is a composite of all grabs above

COMMENTS:

Refusal at described depth for each grab location

COC No(s).:

2409

Laboratory: Test America

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG05219**

YEAR **2014**

LOCATION:

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
173PNEWB1G0030	HA	0-30	7/31	1015	NA	G		1	x	NA		Lt brn silty sandy clay
173PNEWB2G0013	HA	0-13	7/31	1025	NA	G		1	x	NA		Lt brn silty sandy clay
173	HA		7/31		NA	G						
173PNEW02C0020	HA	20"	7/31	1520	NA	C		1	X	NA		This sample sent to the lab and is a composite of all grabs above

COMMENTS:

Refusal at described depth for each grab location

COC No(s).:

2409

Laboratory: Test America

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG05219**

YEAR **2014**

LOCATION:

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
173PNEWC1G0036	HA	0-36	7/31	1045	NA	G		1	x	NA		Lt brn silty sandy clay
173 PNEW02G0007	HA	0-7	7/31	1100	NA	G		1	x	NA		Lt brn silty sandy clay Massive root refusal. 3 Attempts
173	HA		7/31		NA	G						
173PNEW03C0021	HA	0-21	7/31	1525	NA	C		1	X	NA		This sample sent to the lab and is a composite of all grabs above

COMMENTS:

Refusal at described depth for each grab location

COC No(s).:

2409

Laboratory: Test America

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): K-Sp

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG05219**

YEAR **2014**

LOCATION:

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
173 FEWH1600 12	HA	0-12	7/29	1200	NA	G		1	x	NA		Lt brn silty sandy clay
173 FEWH2 60024	HA	0-24	7/29	1230	NA	G		1	x	NA		Lt brn silty sandy clay
173 FEW H 360036	HA	0-36	7/29	1300	NA	G		1	x	NA		DK Brn Silty Sandy Clay
173FEW08C0024	HA	0-24	7/29		NA	C		1	X	NA		This sample sent to the lab and is a composite of all grabs above

COMMENTS:

Refusal at described depth for each grab location

COC No(s).:

2409

Laboratory: Test America

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG05219**

YEAR **2014**

LOCATION:

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
173FEWJ1G0012	HA	0-12	7/31	1300	NA	G		1	x	NA		Lt brn silty sandy clay
173FEWI2G0040	HA	0-40	7/31	1310	NA	G		1	x	NA		Lt brn silty sandy clay
173FEWI3G0016	HA	0-16	7/31	1320	NA	G		1	K	NA		SAA
173FEW19C0023	HA	0-23	7/31	1530	NA	C		1	X	NA		This sample sent to the lab and is a composite of all grabs above
19												

COMMENTS:

Refusal at described depth for each grab location

COC No(s).:

2409

Laboratory: Test America

MULTIPLE SAMPLE LOG SHEET

Tetra Tech, Inc.

[x] SURFACE SOIL
[] SUBSURFACE SOIL
[ ] OTHER _____

[ ] SEDIMENT
[ ] LAGOON / POND

SIGNATURE(S): _____

SAMPLER (S): Kevin Losekamp

PROJECT NAME: **NSA Crane**

PROTECT NUMBER: **112IG05219**

YEAR **2014**

LOCATION:

FIGURE #:

SAMPLE NO.	SAMPLE METHOD	DEPTH	DATE	TIME	CONCENTRATION (L)LOW (H)HIGH	(G) GRAB (C) COMPOSITE		TOTAL NUMBER OF CONTAINERS	PCBs	PID READING	SHIPPED	SOIL DESCRIPTION
173 FEWT1G00018	HA	0-18	7/31	1330	NA	G		1	x	NA		Lt brn silty sandy clay
173 FEWS2G00032	HA	0-32	7/31	1340	NA	G		1	x	NA		Lt brn silty sandy clay
173 FEWS3G00036	HA	0-36	7/31	1350	NA	G		1	X	NA		DK Brn Sandy Clay
173 FEW10C0029	HA	0-29	7/31	1535	NA	C		1	X	NA		This sample sent to the lab and is a composite of all grabs above

COMMENTS:

Refusal at described depth for each grab location

COC No(s).:

2409

Laboratory: Test America

APPENDIX E-2.3

EROSION CONTROL INSPECTION

ON-SITE EVALUATION FOR EROSION AND SEDIMENT CONTROL

Date: 6/30/14 County: Martin

Project Name: **Crance SWMU 17 Phase 2** **INR10H923**

Present at Site: Sue Bock (IDEM) Kevin Allison – Martin Cty SWCD; Jared Cornelius- NAVFAC, Thomas Brent – NAVFAC, Kevin Losekamp - Tetra

TYPE OF EVALUATION: ☒ **Initial** ☐ **Routine** ☐ **Follow-up** ☐ **Complaint**

This evaluation is intended to assess the level of compliance with 327 IAC 15-5 (Rule 5). It is also intended to identify areas where additional measures may be required to control erosion and sedimentation. All practices recommended in this report should be evaluated as to their feasibility by a qualified individual, with structural practices designed by a qualified engineer.
All erosion and sediment control measures shall meet the design criteria, standards, and specifications outlined in the "Indiana Storm Water Quality Manual" or similar guidance documents.

Current Site Information: This project involves the removal of pcb contaminated soil from several banks, stream bottoms, and floodplain of unnamed tributaries to Boggs Creek, and a portion of Boggs Creek.

The day of the inspection was hot and dry with no reportable precipitation occurring in the preceding 72 hours.

The Following Items Have Been Evaluated and Assigned a Designation of:
S = Satisfactory M = Marginal U = Unsatisfactory NA = Not Applicable

Construction Site Management for Erosion and Sediment Control

S	M	U	NA	
☐	☐	☐	☒	**(1)** Disturbed areas have been adequately protected through seeding or other appropriate erosion and sediment control measures.
☒	☐	☐	☐	**(2)** Appropriate perimeter sediment control measures have been implemented.
☐	☐	☐	☒	**(3)** Conveyance channels have been stabilized or protected with appropriate sediment control measures.
☒	☐	☐	☐	**(4)** Erosion & sediment control measures are installed properly.
☐	☐	☐	☒	**(5)** Storm drain inlets have been adequately protected.
☐	☐	☐	☒	**(6)** Outlets have been adequately stabilized.
☒	☐	☐	☐	**(7)** Existing erosion & sediment control measures are being maintained.
☒	☐	☐	☐	**(8)** Public & private roadways are being kept clear of accumulated sediment or tracked soil.
☐	☐	☐	☒	**(9)** Erosion & sediment control measures have been installed and maintained on individual building sites.

Status of Sediment Retention On-Site

☐ Site conditions present a high potential for off-site sedimentation.
Describe:

☐ There is evidence of off-site sedimentation.
Describe:

☒ **Please Refer to the Comments Section of this Report**

Compiled By: Sue Bock

Definitions

Satisfactory: The item is currently in compliance with the Rule
Marginal: A concern has been identified; corrective action is strongly recommended to remain in compliance
Unsatisfactory: A violation has been identified and the site is not in compliance; corrective action is required
Not Applicable: Does not apply at this stage of construction.

ON-SITE EVALUATION FOR EROSION AND SEDIMENT CONTROL
COMMENTS

Project Name: SWMU 17 Phase 2
Date: 6/30/14

This report was provided to: Jared Cornelius – NAVFAC, Kevin Allison – SWCD, Teresa Harder – Martin SWCD, Randy Braun, David Carr -IDEM

Questions or comments concerning this report should be directed to:
Sue Bock Storm Water Specialist
Wetlands & Storm Water Section, Office of Water Quality
Indiana Department of Environmental Management
100 N. Senate Ave MC 65-42 N1255
Indianapolis, IN 46204
317-233-1135 fax 317-234-4145

This project is being conducted in a series of small stream reaches. Soil removal and restoration had just finished in Ditch 8 A&B. The access haul road was slated to be seeded and mulched this week. On-site discussions included the use of crimping the mulch after application.

Two soil stockpiles areas have been created one for non-TSCA soil and another for TSCA soil. The TSCA soil will be covered every night to prevent contact with storm water.

Ditch 3 areas O&P have erosion and sediment control measures in place, removal had not begun in this area.

Boggs Creek had been cleared of vegetation. Erosion and sediment control measures have not been installed in all areas; work had not begun in this area.

During the inspection the NW Ditch was under excavation.

Measures have been installed so that in the event of a rain storm, visqueen sheeting is to be placed over excavated areas determined to have pcb concentrations.

- ☐ Install an appropriate sediment control practice between construction areas and lower lying areas:
- ☐ Replace/Repair silt fence and/or straw bale barriers:
- ☐ Entrench silt fence (6-8 in.) and/or straw bale barriers (4 –6 in.) and stake straw bales:
- ☐ Remove accumulated sediment from: ☐ sediment traps/basins, ☐ behind silt fence/straw bales, ☐ around storm drain inlet protection devices, ☐ streets and gutters (Do not flush with water):
- ☐ Temporary seed, fertilize, and/or mulch:
- ☐ Permanent seed, fertilize, and mulch areas that are at final grade:
- ☐ Protect storm drain inlets: ☐ curb inlets, ☐ drop inlets:
- ☐ Reshape and stabilize side slopes of: ☐ sediment traps/basins, ☐ detention/retention basins:
- ☐ Install/Maintain construction entrance(s) :
- ☐ Reshape and stabilize conveyance channels:
- ☐ Place greater emphasis on erosion and sediment control on building sites; contractors, subcontractors, material vendors, and others should be made aware of erosion and sediment control requirements. Appropriate perimeter sediment controls (e.g. silt fence) and stable construction entrances shall be utilized on all sites. Sediment tracked into the street shall be removed (do not flush with water) at the end of each workday.

☐ Other Requirements:

APPENDIX E-2.4

TETRA TECH PHOTOGRAPHS - INTERIM MEASURES PHASE 2

PHOTOGRAPHS AND PHOTOGRAPH LOG

Note: Photographs are presented in numerical order for easy searching rather than chronologically.

Photograph	Date Taken	Description
Ditch 3 Pano_1	3/14/2013	**View northeastward from Highway HR-052 with upstream Ditch 3 Segment 2.**
Ditch 3 Pano_2	3/14/2013	**View westward from Highway HR-052 looking toward the downstream area of Ditch 3 from Highway HR-052.**
1	**8/14/2014**	**Sampling pattern for collection of four aliquots combined to form composite sample 173AWFA1C0006**
2	**8/14/2014**	**View upstream in Ditch 3 toward location of composite sample 173AWFA1C0006**
5	**7/16/2014**	**View: northward across Ditch 3 at 17SW/SD110 and 5 foot upstream of the upstream TSCA sediment area. Shows dense vegetation.**
23	**7/17/2014**	**View southwestward toward IM Phase 2 TSCA Support Pad (Support Area 2).**
37	**7/18/2014**	**View south-southeastward from north of Ditch 3 looking upstream and showing typical restoration of haul roads and Ditch 3 stream segments.**
949	4/8/2014	**View from Excavation Node 191, approximately 150 downstream of the top of the Northwest Ditch.**
1339	9/10/2014	**View: Southeastward. Shows close-up of check dam within Ditch 3 where Ditch 3 enters the woods.**
1431	**9/10/2014**	**View northwestward showing restored culvert and areas 3O and 3P.**
1432	**Date 9/10/2014**	**View: Westward showing restored culvert, areas 3O and 3P, and felled vegetation north of the culvert.**
1440	9/10/2014	**View southeastward. Shows location of check dam within Ditch 3 where Ditch 3 enters the woods.**
1573	**3/28/2012**	**View northward toward oxbow in Ditch 3, Segment 5.**
1577	**3/28/2012**	**View upstream in Ditch 3, at boundary between Segments 5 and 6. Shows parts of Excavation Areas 3M and 3N.**
1614	**3/28/2012**	**View upstream in Ditch 3, from a point near the upstream end of Ditch 3 Segment 2.**
1717	**11/25/2014**	**View of non-TSCA Support Area (Support Area 1) approximately 1.5 months after restoration. Shows degree of post-IM Phase 2 revegetation typical of restored areas.**

2321	**7/11/2014**	**View showing upper end of the original 3O/3P excavation area after excavating a swath of soil/sediment on each side of the Ditch 3 centerline.**
2324	**7/10/2014**	**View of black sludge that collected within Ditch 3near the upstream boundaries of Excavation Areas 3O and 3P.**
2325	**7/11/2014**	**View showing discolored soil and sediment found near black sludge.**
2330	**7/11/2014**	**View of trench installed across Ditch 3 to determine extent of black sludge.**
2334	**7/11/2014**	**View northwestward from Area 3P side of excavation at top of Ditch 3 looking toward Area 3O.**
2424	**8/4/2014**	**View of broken end of 2-feet diameter concrete culvert pipe.**
2425	**8/4/2014**	**View upstream, inside original 2-foot diameter culvert pipe.**
DSC02464	**10/7/2014**	**View upstream within Ditch 3 showing sediment trap at end of new 6-feet long culvert pipe.**
DSC02467	**10/7/2014**	**View of a pool in Ditch 3 approximately 380 feet downstream from the culvert, which is approximately 10 feet upstream from Ditch 13 and where post-IKM Phase 2 sample 17SD1370006 was collected.**
6320	**4/3/2014**	**View northward showing downstream end of culvert under road in Gate 9 area that had washed out.**
Post IM Ph_2_Cell_1	**9/3/2014**	**View upstream in Ditch 3. Appearance of excavation after removing two, 3-foot long sections of concrete culvert pipe upstream of the original 3O/3P boundary.**
Post IM Ph_2_Cell_2	**9/3/2014**	**View showing texture/appearance of dark-colored sediment collected from directly underneath culvert pipe.**

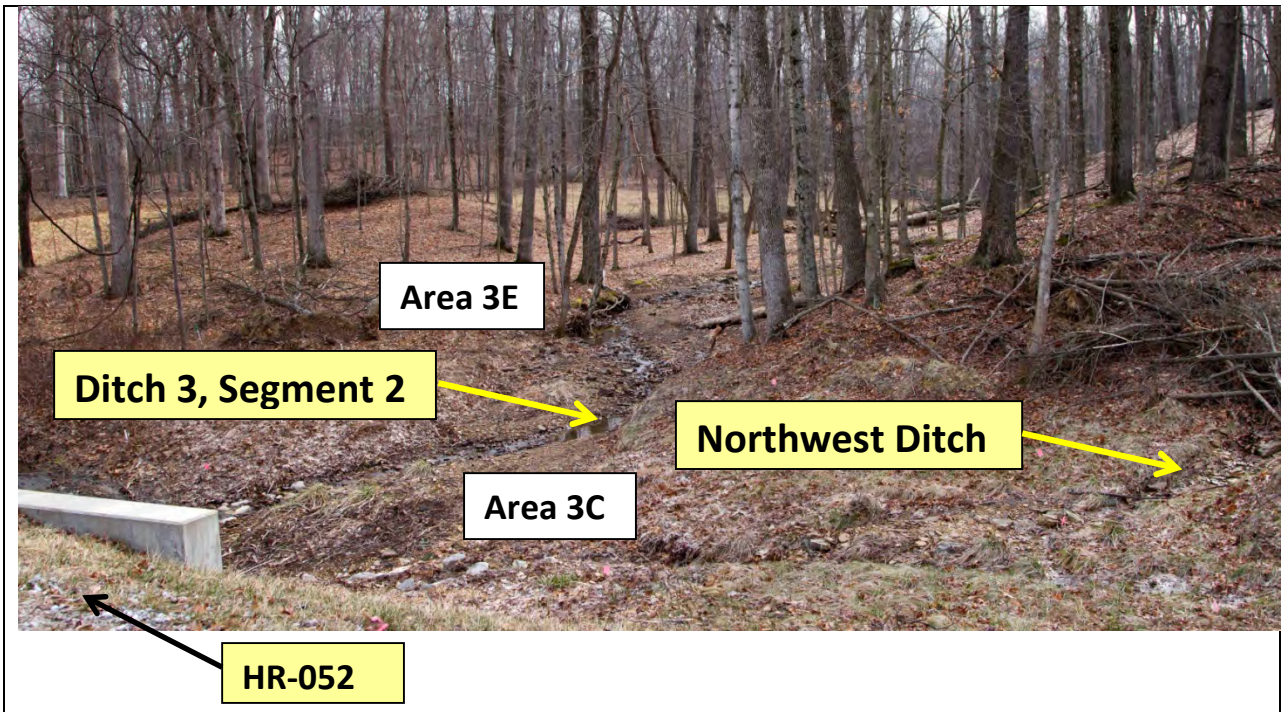


Photo Ditch 3 Pano_1	3/14/2013	View: Northeastward from Highway HR-052 with upstream Ditch 3 Segment 2 receding into center of photograph and toward the upper right corner.

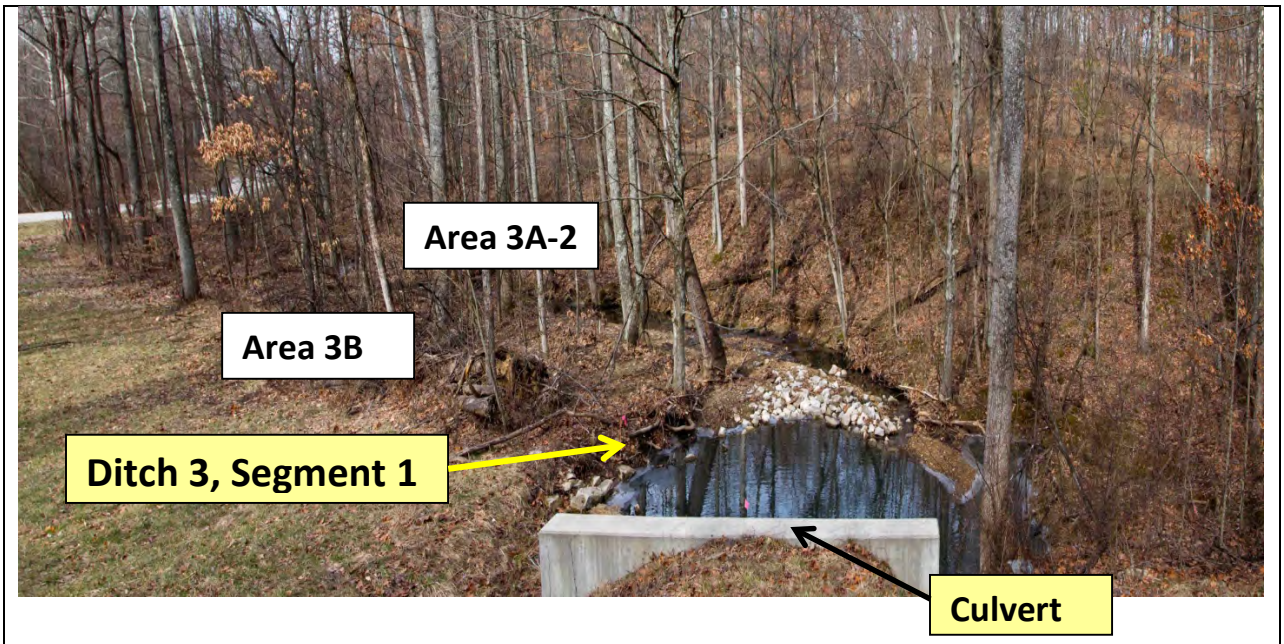


Photo Ditch 3 Pano_2	3/14/2013	View: Westward from Highway HR-052 looking toward the downstream area of Ditch 3 from Highway HR-052.

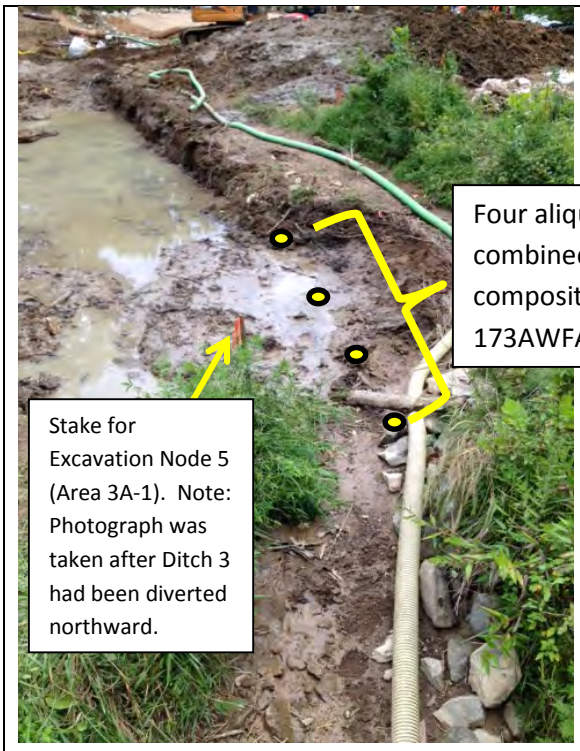


Photo 1	**8/14/2014**	**View: Downward to Show Sampling Pattern for Collection of Four Aliquots Combined to Form Composite Sample 173AWFA1C0006.**

Photo 2	**8/14/2014**	**View: Upstream in Ditch 3 Toward Location of Composite Sample 173AWFA1C0006.**

Photo 5	**7/16/2014**	**View: Northward across Ditch 3 at 17SW/SD110 and 5 foot upstream of the upstream TSCA sediment area. Shows dense vegetation.**

Photo 23	**7/17/2014**	**View: Southwestward toward IM Phase 2 TSCA Support Pad (Support Area 2).**

Photo 37	**7/18/2014**	**View: South-southeastward from north of Ditch 3 looking upstream and showing typical restoration of haul roads and Ditch 3 stream segments.**

Photo 949	**4/8/2014**	**View: from Excavation Node 191, approximately 150 downstream of the top of the Northwest Ditch.**

Photo 1339	Date 9/10/2014	View: Southeastward. Shows close-up of check dam within Ditch 3 where Ditch 3 enters the woods.

Photo 1440	Date 9/10/2014	View: Southeastward. Shows location of check dam within Ditch 3 where Ditch 3 enters the woods.

Photo 1431	Date 9/10/2014	View: Northwestward showing restored culvert and areas 3O and 3P.

Photo 1432	Date 9/10/2014	View: Westward showing restored culvert, areas 3O and 3P, and felled vegetation north of the culvert.

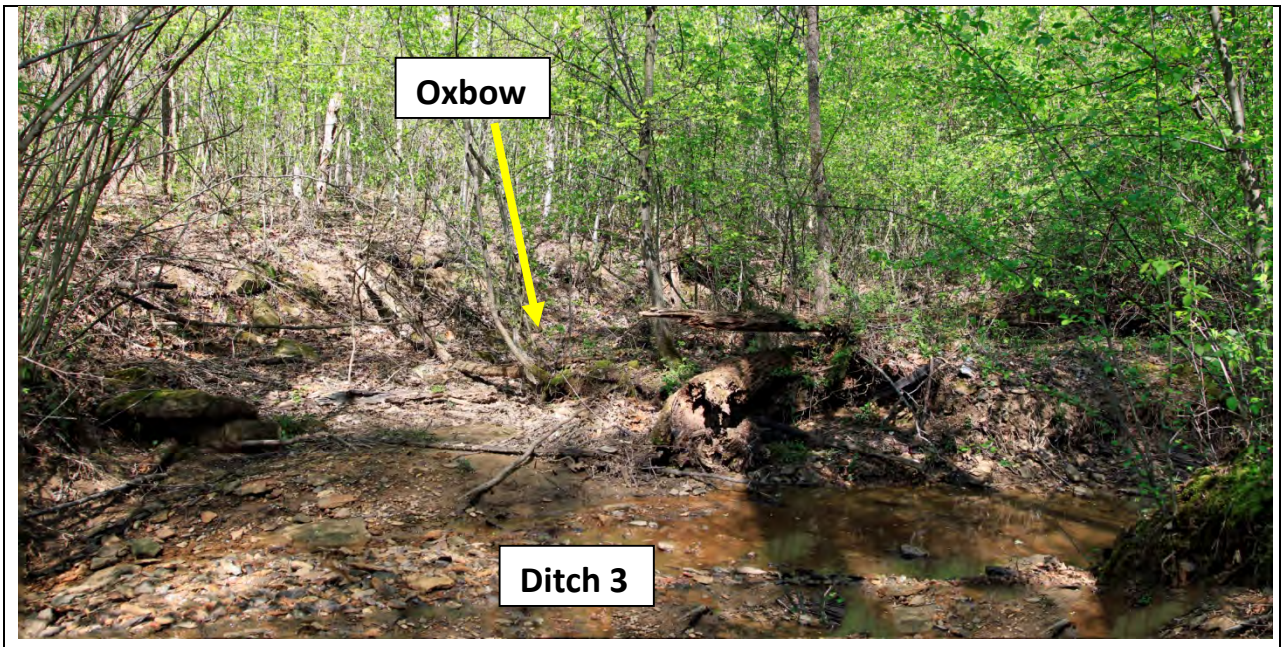


Photo 1573	**3/28/2012**	**View: Northward toward oxbow in Ditch 3, Segment 5.**

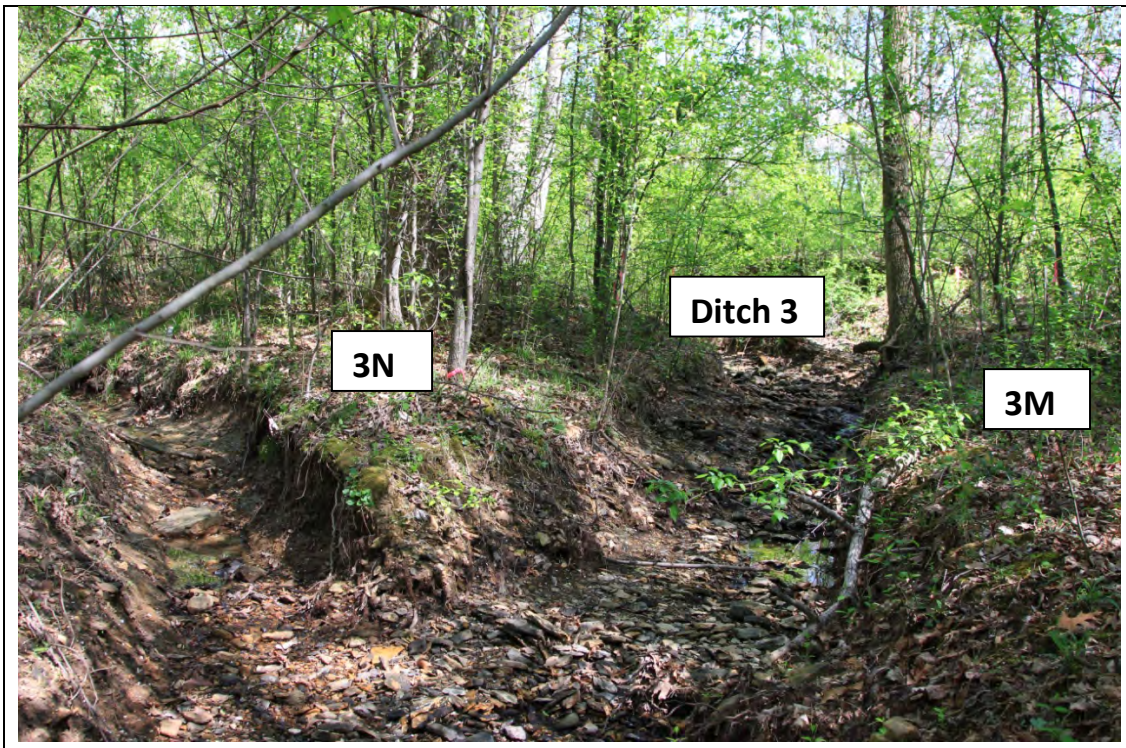


Photo 1577	**3/28/2012**	**View: Upstream in Ditch 3, at boundary between Segments 5 and 6. Excavation Area 3M is to the right and Area 3N is directly ahead.**

Photo 1614	**3/28/2012**	**View: Upstream in Ditch 3, from a point near the upstream end of Ditch 3 Segment 2.**

Photo 1717	**Date 11/25/2014**	**View of non-TSCA Support Area (Support Area 1) approximately 1.5 months after restoration. Shows degree of post-IM Phase 2 revegetation typical of restored areas.**

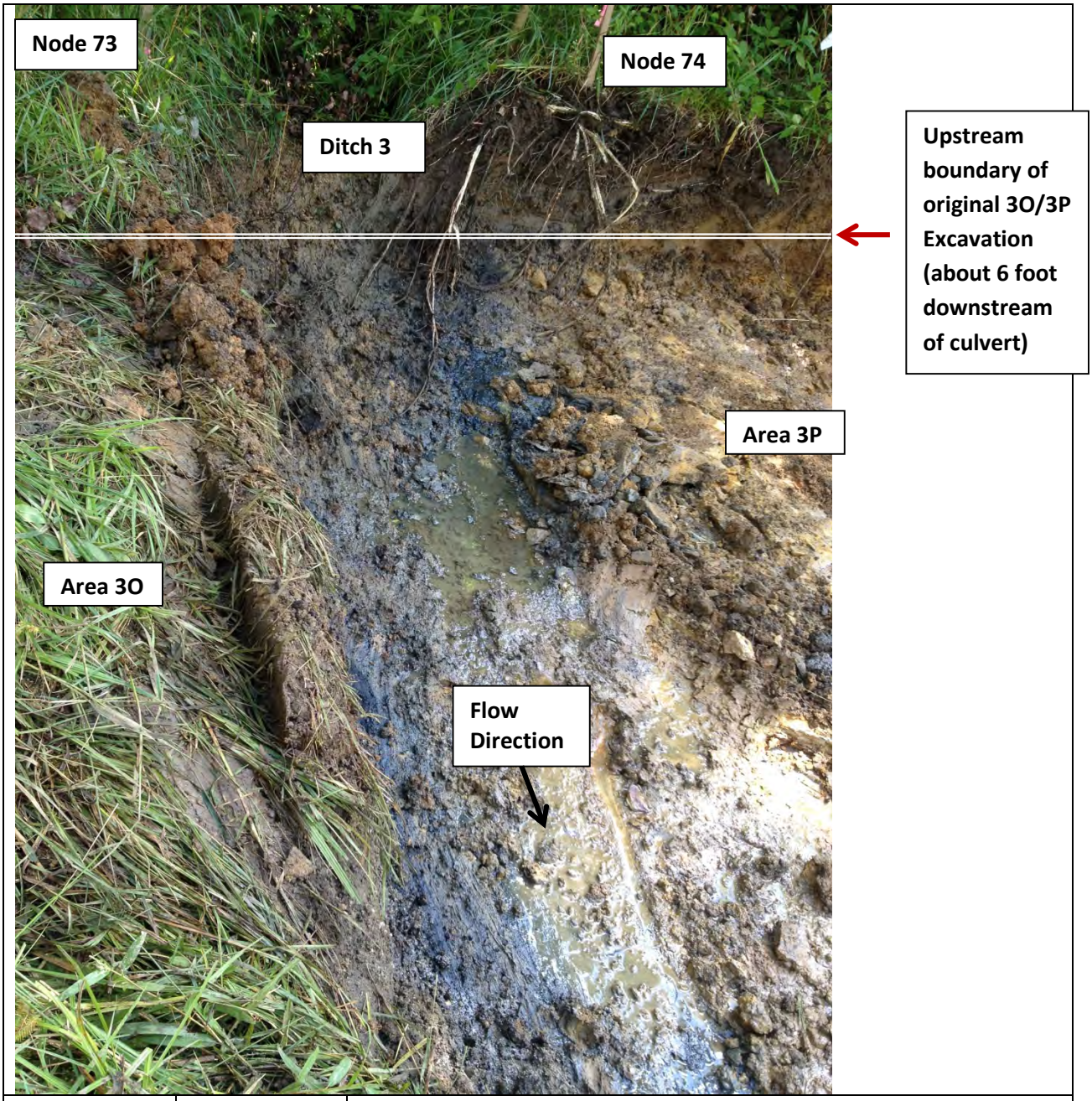


Photo 2321	7/11/2014	View: Downward and upstream in Ditch 3. The upper end of excavation in this photo is the upper end of the original 3O/3P excavation area. Excavation Nodes 73 (Area 3O) and 74 (Area 3P) are shown as stakes with pink flagging. A swath of soil/sediment 2.5 foot wide on each side of the Ditch 3 centerline was excavated between the original upstream end of 3O/3P and the culvert (a distance of 6 foot) upstream from the original 3O/3P boundary. This excavation is not shown on this figure.

Photo 2324	**7/10/2014**	**View: Downward showing the black sludge that was collected.**

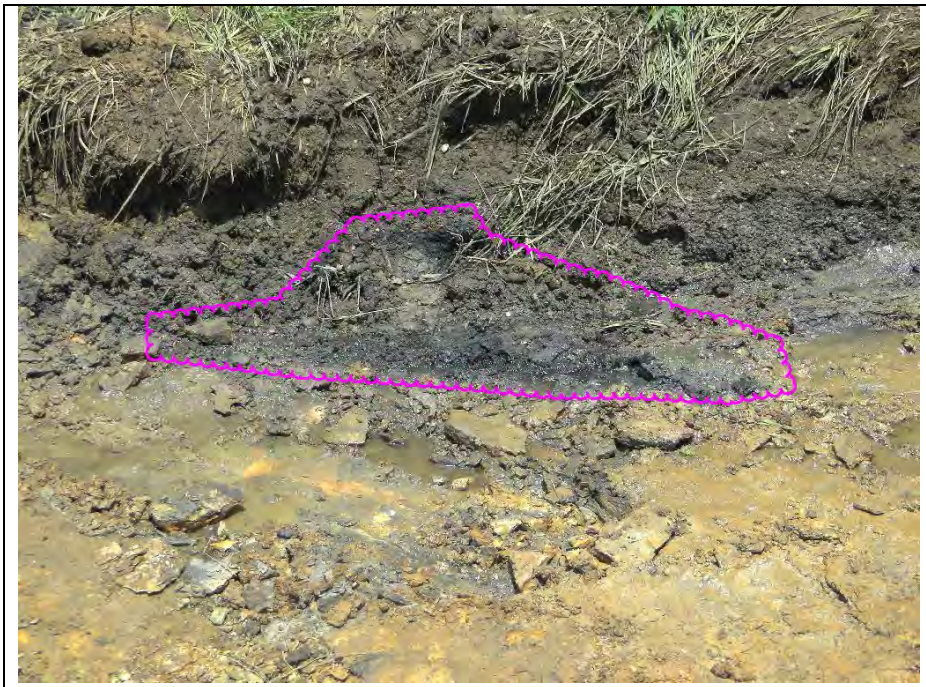


Photo 2325	**7/11/2014**	**View: Downward toward Excavation Area 3O where discolored soil and sediment were found near black sludge. Distance within pink outline (left to right in photo) is about 10 foot.**

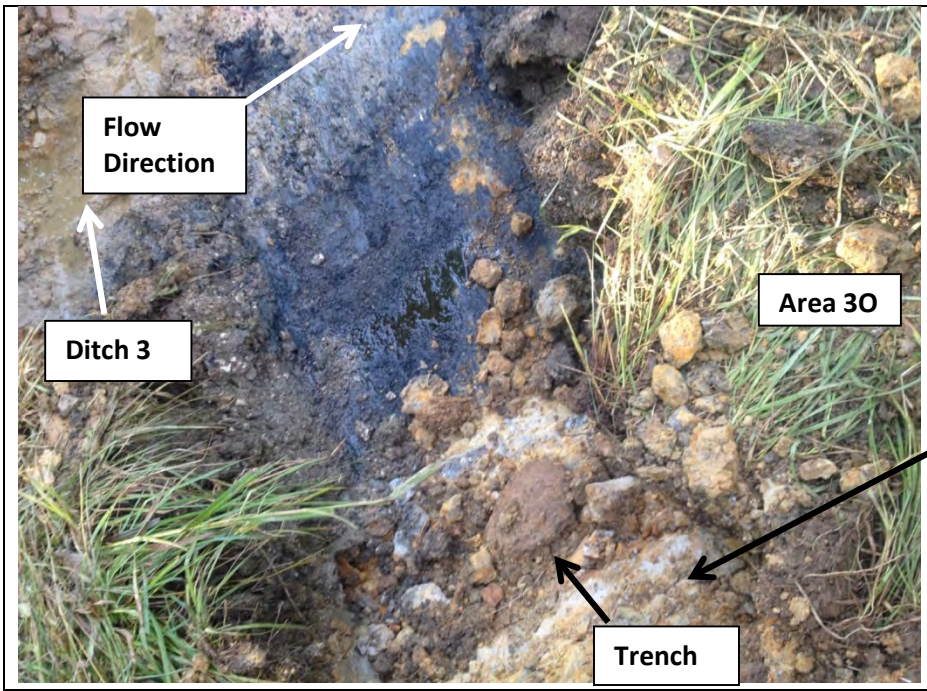


Photo 2330	**7/11/2014**	**View: Downward at portion of trench installed on July 11 2014 to determine extent of black sludge in a direction perpendicular to Ditch 3 flow. Bottom of photo is North/West side of Ditch 3, i.e., Area 3O. This view also shows the degree to which the black sludge was removed from the top of bedrock.**

Photo 2334	**7/11/2014**	**View: Northwestward from Area 3P side of excavation at top of Ditch 3 looking toward Area 3O.**

Photo 2424	**8/4/2014**	**View: Downward showing broken end of 2-feet diameter concrete culvert pipe.**

Photo 2425	**8/4/2014**	**View: Toward upstream, inside original 2-foot diameter culvert pipe.**

Photo DSC02464	Date 10/7/2014	View: Upstream within Ditch 3 showing sediment trap installed at end of new 6-feet long culvert pipe that had been grouted to the old culvert. Rocks keep the plate in place.

Photo DSC02467	Date 10/7/2014	View: A pool in Ditch 3 approximately 380 feet downstream from the culvert, which is approximately 10 feet upstream from Ditch 13 where post-IKM Phase 2 sample 17SD1370006 was collected.

Photo 6320	**4/3/2014**	**View: Northward showing downstream end of culvert under road in Gate 9 area that had washed out.**

Photo Post IM Ph_2_Cell_1	**9/3/2014**	**View: Upstream in Ditch 3. Appearance of excavation after removing two, 3-foot long sections of concrete culvert pipe upstream of the original 3O/3P boundary.**

Photo Post IM Ph_2_Cell_2	**9/3/2014**	**View: Downward, showing texture/appearance of dark-colored sediment collected from directly underneath culvert pipe.**

APPENDIX F

EMAC DAILY FIELD REPORTS AND PHOTOGRAPHS

APPENDIX F-1

SEQ/Vets DAILY FIELD REPORTS AND PHOTOGRAPHS

APPENDIX F-1.1

SEQ/Vets DAILY PRODUCTION REPORTS

CONTRACTOR PRODUCTION REPORT

DATE: April 15, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 1
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Sunny, mild		*TEMP (F):* 42 – 65 degrees		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Mobilization/Travel Day	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	10
	SEQ Vets	1	Laborer	10
	SEQ Vets	1	QA/CP Rep	10
	SEQ Vets	1	Trucking Manager	10

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)		X
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	60
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	0
TOTAL WORK HOURS FROM START OF CONSTRUCTION	60

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
None – travel day.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
Cat 319 Excavator & D5 Dozer delivered via MacAllister.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 0 hours D5 Dozer – 0 hours

REMARKS:
Travel day; Superintendent was on-site to mark area 4B with white flags for Crane Dig-permit.

SEQ VETS/CRAIG HOBY DATE: 4/15/2013

CONTRACTOR PRODUCTION REPORT

DATE: April 16, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 2
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Sunny, mild		*TEMP (F):* 42 – 65 degrees		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Areas 4B	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	10
	SEQ Vets	1	Laborer	10
	SEQ Vets	1	QA/CP Rep	10
	SEQ Vets	1	Trucking Manager	10

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	60
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	60
TOTAL WORK HOURS FROM START OF CONSTRUCTION	120

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
Crew conducted site orientation and review of APP & SSHP.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
Padded Roller & trencher delivered from MacAllister.
Purchased and placed 8 straw bales as BMPs in Area 4B.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 0 hours D5 Dozer – 0 hours
Cat 433 Padded Roller – 0 hours Trencher – 0 hours

REMARKS:
Dig permit will be in-hand by 10:00 am Wednesday.

SEQ VETS/CRAIG HOBY DATE: 4/16/2013

CONTRACTOR PRODUCTION REPORT

DATE: April 17, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 3
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Sunny, mild		*TEMP (F):* 42 – 65 degrees		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Areas 4A & 4 B	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	10
	SEQ Vets	1	Laborer	10
	SEQ Vets	1	QA/CP Rep	10
	SEQ Vets	1	Trucking Manager	10

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	60
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	120
TOTAL WORK HOURS FROM START OF CONSTRUCTION	180

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

Purchased 8 additional straw bales for use as BMPs.
Cat 420 RT-Hoe delivered from MacAllister.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 0 hours D5 Dozer – 0 hours Cat 420 RT-Hoe – 1 hours
Padded Roller – 0 hours Trencher – 0 hours

REMARKS:

Dig permit will be in-hand by 10:00 am Wednesday. Removed steel rail posts with concrete and staged on plastic in Area 4A-5 for later disposal.

SEQ VETS/CRAIG HOBY DATE: 4/17/2013

CONTRACTOR PRODUCTION REPORT

DATE: April 18, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 4
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Cloudy, rain overnight		*TEMP (F):* 42 – 65 degrees		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Area 4AB	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	10
	SEQ Vets	1	Laborer	10
	SEQ Vets	1	QA/CP Rep	10
	SEQ Vets	1	Trucking Manager	10

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	60
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	180
TOTAL WORK HOURS FROM START OF CONSTRUCTION	240

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

#3 Stone (20.5 ton) for equipment zone/trailer

500’ silt fence & 1 roll of 8 oz geotextile

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 0 hours D5 Dozer – 0 hours

Padded Roller – 0 hours Trencher – 0 hours

REMARKS:

SEQ VETS/CRAIG HOBY DATE: 4/18/2013

CONTRACTOR PRODUCTION REPORT

DATE: April 19, 2013

CONTRACT NO.:	*TITLE & LOCATION:*	*REPORT NO.:*
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	5

CONTRACTOR:	*SITE SUPERINTENDENT:*
SEQ Vets	Craig Hoby
WEATHER:	*TEMP (F):*
Partly Sunny, mild	55 – 70 degrees

WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Utility Yard – Section 4B-1	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	8
	SEQ Vets	1	Laborer	8
	SEQ Vets	1	QA/CP Rep	8
	SEQ Vets	1	Trucking Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	50
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	240
TOTAL WORK HOURS FROM START OF CONSTRUCTION	290

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

Cat 938 loader delivered and Cat 420 RT-Hoe picked up by MacAllister.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 0 hours
D5 Dozer – 0 hours
Padded Compactor – 0 hours
Trencher – 4 hours
Cat 938 Loader –0 hour

REMARKS:

Installed silt fence in Area 4A and performed addition sizing of downed trees and stumps to facilitate removal and piling.

SEQ VETS/CRAIG HOBY DATE: 4/19/2013

CONTRACTOR PRODUCTION REPORT

DATE: April 22, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 6
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Sunny, mild		*TEMP (F):* 55 – 70 degrees		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Utility Yard – Section 4B-1	SEQ Vets	1	Superintendent	11
	SEQ Vets	2	Equip. Operators	10.5
	SEQ Vets	1	Laborer	10.5
	SEQ Vets	1	QA/CP Rep	10.5
	SEQ Vets	1	Trucking Manager	10.5

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	63.5
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	290
TOTAL WORK HOURS FROM START OF CONSTRUCTION	353.5

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

Excavation marked with caution tape.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

40 mil PVC liner material delivered via SAIA.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours
D5 Dozer – 0 hours
Padded Compactor – 0 hours
Trencher – 0 hours
Cat 938 Loader –1 hour

REMARKS:

Assisted drivers to secure their gate passes and escorted drivers to scales & job site. Loaded-out out non-TSCA soil into semis from Beelman. Two trucks were overloaded – returned and partially dug out to adjust weight. Seven loads were loaded-out, totaling 176 tons.

SEQ VETS/CRAIG HOBY DATE: 4/22/2013

CONTRACTOR PRODUCTION REPORT

DATE:
April 23, 2013

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	7

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Partly cloudy, no wind	50 – 65 degrees

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
Utility Yard – Section 4B-1	SEQ Vets	1	Superintendent	11
	SEQ Vets	2	Equip. Operators	10.5
	SEQ Vets	1	Laborer	10.5
	SEQ Vets	1	QA/CP Rep	10.5
	SEQ Vets	1	Trucking Manager	10.5

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	63.5
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	353.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	417

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

Excavation marked with caution tape.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

Young delivered fill dirt via tandem truck starting at 11:30 am. Total 26 loads delivered.
Storage unit/trailer unit delivered today from Mini-Mobil.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours
D5 Dozer – 3 hours
Padded Compactor – 3 hours
Cat 938 Loader –3 hours

REMARKS:

Young placed fill dirt directly into the excavation and also a soil stockpile. The stockpile was covered with plastic visqueen secured with sandbags.
Loaded-out 12 loads of non-TSCA soil into semis from Beelman, totaling 305 tons.

SEQ VETS/CRAIG HOBY DATE: 4/23/2013

CONTRACTOR PRODUCTION REPORT

DATE:
April 24, 2013

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	8

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Rain over-night and continued until mid-afternoon	50 – 65 degrees

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
Utility Yard – Section 4B-1	SEQ Vets	1	Superintendent	12
	SEQ Vets	2	Equip. Operators	3
	SEQ Vets	1	Laborer	3
	SEQ Vets	1	QA/CP Rep	3
	SEQ Vets	1	Trucking Manager	3

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	27
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	417
TOTAL WORK HOURS FROM START OF CONSTRUCTION	444

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

Excavation marked with caution tape.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 3 hours
D5 Dozer – 0 hours
Padded Compactor – 0 hours
Trencher – 0 hours
Cat 938 Loader – 1 hour

REMARKS:

Rain water infiltrated open excavation; shielded water from the non-TSCA soils with fabric & clean fill. Received verbal authorization to de-water the excavation with small electric pump thru silt fence & straw bales. De-watered the excavation as such; load-out of non-TSCA soil halted after first round (6 loads), totaling 148 tons.

SEQ VETS/CRAIG HOBY DATE: 4/24/2013

CONTRACTOR PRODUCTION REPORT

DATE: April 25, 2013

CONTRACT NO.:	*TITLE & LOCATION:*	*REPORT NO.:*
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	9

CONTRACTOR:	*SITE SUPERINTENDENT:*
SEQ Vets	Craig Hoby
WEATHER:	*TEMP (F):*
Clear & Dry, no rain	40 – 65 degrees

WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Utility Yard – Section 4B-1	SEQ Vets	1	Superintendent	10.5
	SEQ Vets	2	Equip. Operators	10.5
	SEQ Vets	1	Laborer	10.5
	SEQ Vets	1	QA/CP Rep	10.5
	SEQ Vets	1	Trucking Manager	10.5
	Alt & Witzig	1	Geo-tech Consultant	10

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	73
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	444
TOTAL WORK HOURS FROM START OF CONSTRUCTION	517

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

Safety Fence installed prior to leaving site.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

Power broom/sweeper

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours	D5 Dozer – 2 hours
Padded Compactor – 3 hours	Trencher – 0 hours
Cat 938 Loader – 5 hours	Power Broom – 1 hour

REMARKS:

Imported fill needs to dry more before compaction standard can be achieved. Loaded out 12 loads of non-TSCA.

SEQ VETS/CRAIG HOBY DATE: 4/25/2013

CONTRACTOR PRODUCTION REPORT

DATE:
April 26, 2013

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	10

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Clear & Dry, no rain	45 – 55 degrees

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
Utility Yard – Section 4B & 4C	SEQ Vets	1	Superintendent	12
	SEQ Vets	2	Equip. Operators	12
	SEQ Vets	1	Laborer	12
	SEQ Vets	1	QA/CP Rep	12
	SEQ Vets	1	Trucking Manager	10

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	70
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	517
TOTAL WORK HOURS FROM START OF CONSTRUCTION	587

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

Safety Fence installed prior to leaving site.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 11 hours	D5 Dozer – 3 hours
Padded Compactor – 3 hours	Trencher – 0 hours
Cat 938 Loader – 2 hours	Power Broom – 1 hour

REMARKS:

Imported fill in Area 4B needs to dry more before compaction standard can be achieved. Loaded out 6 loads of TSCA & 7 loads of non-TSCA. Moved into Area 4C- laid liner and plywood over road for excavator to crawl on crossing road. Moved trees and shrubs from Area 4C and developed two brush piles outside of 4C limits. Installed silt fence along ditch 2 and northern boundary of 4C.

SEQ VETS/CRAIG HOBY DATE: 4/26/2013

CONTRACTOR PRODUCTION REPORT

CONTRACT NO.: N40083-11-D-0030; Task Order 0004	*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072	*DATE:* April 29, 2013 *REPORT NO.:* 11
CONTRACTOR: SEQ Vets	*SITE SUPERINTENDENT:* Craig Hoby	
WEATHER: Overcast & damp, rain overnight, clearing in late afternoon	*TEMP (F):* 55-70 degrees	

WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Wooded Area along Ditch 2 – Section 4C	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	10
	SEQ Vets	1	Laborer	10
	SEQ Vets	1	QA/CP Rep	10

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	50
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	587
TOTAL WORK HOURS FROM START OF CONSTRUCTION	637

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
Safety Fence installed prior to leaving site.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
Straw Bales and Silt fence placed in Areas 4C, 4A and NW Ditch.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 9 hours	D5 Dozer – 0 hours
Padded Compactor – 0 hours	Trencher – 3 hours
Cat 938 Loader – 0 hours	Power Broom – 0 hour

REMARKS:
Excavated non-TSCA soils in Area 4C in preparation for loadout. Tetra-Tech collected soil samples – should have results by Friday. No hauling today. Finished placing silt fence and straw bales in Area 4C & 4A.

SEQ VETS/CRAIG HOBY DATE: 4/29/2013

CONTRACTOR PRODUCTION REPORT

DATE: April 30, 2013

CONTRACT NO.:	*TITLE & LOCATION:*	*REPORT NO.:*
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	12

CONTRACTOR:	*SITE SUPERINTENDENT:*
SEQ Vets	Craig Hoby
WEATHER:	*TEMP (F):*
Clear & sunny, slight breeze	58-80 degrees

WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Wooded Area along Ditch 2 – Section 4C	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	10
	SEQ Vets	1	Laborer	10
	SEQ Vets	1	QA/CP Rep	10
	Alt & Witzig	1	Compaction Tech	8
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	66
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	637
TOTAL WORK HOURS FROM START OF CONSTRUCTION	703

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
NA

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
Fill dirt hauled in and placed in Area 4B.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 4 hours	D5 Dozer – 8 hours
Padded Compactor – 6 hours	Trencher – 0 hours
Cat 938 Loader –3 hour	Power Broom – 1 hour

REMARKS:
Limited hauling of non-TSCA today due to hauler no-shows; shipped 4 loads. Imported fill dirt for Area 4B, placed, graded and compacted fill. Compaction results were 90% plus. Will import topsoil and place rock in front of overhead door/loading dock in Bldg 357. NAVFAC will seed and straw the rest of 4B.

SEQ VETS/CRAIG HOBY DATE: 4/30/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 1, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 13
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Clear & sunny, slight breeze		*TEMP (F):* 60-80 degrees		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Wooded Area along Ditch 2 – Section 4C	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	10
	SEQ Vets	1	Laborer	10
	SEQ Vets	1	QA/CP Rep	10
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	58
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	703
TOTAL WORK HOURS FROM START OF CONSTRUCTION	761

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
NA

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
Advanced Waste delivered one 30 cyd & one 20 cyd roll-off today. Received 2 loads of rock for approach to Bldg 357. Delivered one manual plate compactor.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 9 hours	D5 Dozer – 6 hours
Padded Compactor – 0 hours	Trencher – 0 hours
Cat 938 Loader –6 hour	Power Broom – 1 hour

REMARKS:
Hauling of non-TSCA today from 4C; shipped 12 loads. Scheduled topsoil and fill for tomorrow. Partially filled excavation in 4C. Compacted fill along Bldg 357 with plate compactor.

SEQ VETS/CRAIG HOBY DATE: 5/1/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 2, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 14
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Partly Cloudy with slight breeze		*TEMP (F):* 58-77 degrees		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Wooded Area along Ditch 2 – Section 4C	SEQ Vets	1	Superintendent	10.5
	SEQ Vets	2	Equip. Operators	10.5
	SEQ Vets	1	Laborer	10.5
	SEQ Vets	1	QA/CP Rep	10.5
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	60.5
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	761
TOTAL WORK HOURS FROM START OF CONSTRUCTION	821.5

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
NA

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
8 loads of topsoil delivered today; 39 loads of fill dirt.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 9 hours	D5 Dozer – 6 hours
Padded Compactor – 0 hours	Trencher – 0 hours
Cat 938 Loader –6 hour	Power Broom – 1 hour

REMARKS:
Hauling of non-TSCA today from 4C; shipped 14 loads. Started excavation in 4A-8.

SEQ VETS/CRAIG HOBY DATE: 5/2/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 3, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 15
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Cloudy, slight rain overnight		*TEMP (F):* 60-73 degrees		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Areas 4C & 4A-8	SEQ Vets	1	Superintendent	11.5
	SEQ Vets	2	Equip. Operators	11.5
	SEQ Vets	1	Laborer	11.5
	SEQ Vets	1	QA/CP Rep	11.5
	SEQ Vets	1	Truck Manager	10

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	67.5
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	821.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	889

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
NA

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 9 hours
D5 Dozer – 6 hours
Padded Compactor – 0 hours
Cat 938 Loader –6 hour
Power Broom – 1 hour

REMARKS:
Hauling of non-TSCA today from 4C & 4A-8; shipped 10 loads od soil. Backfilled the excavation in 4A-8. No fill delivered today. Advanced Waste hauled two roll-offs with steel posts and concrete as non-TSCA.

SEQ VETS/CRAIG HOBY DATE: 5/3/2013

CONTRACTOR PRODUCTION REPORT

DATE:
May 6, 2013

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	16

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Cloudy, wet conditions – lots of rain over the weekend	60-73 degrees

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
Areas 4C & 4A-8	SEQ Vets	1	Superintendent	8.5
	SEQ Vets	2	Equip. Operators	8.5
	SEQ Vets	1	Laborer	8.5
	SEQ Vets	1	QA/CP Rep	8.5
	SEQ Vets	1	Truck Manager	8.5

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	51
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	889
TOTAL WORK HOURS FROM START OF CONSTRUCTION	940

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

NA

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

Two additional rolls of geotextile delivered today.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 7 hours
D5 Dozer – 0 hours
Padded Compactor – 0 hours
Cat 938 Loader –0 hour
Power Broom – 1 hour

REMARKS:

Hauling of non-TSCA today from 4A-8; shipped 10 loads of soil. No additional excavation performed today due to wet conditions here and at the borrow pit. Cancelled trucks for tomorrow. Will re-assess after seeing if things dry out.

SEQ VETS/CRAIG HOBY DATE: 5/6/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 8, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 17
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Mostly sunny, no rain overnight		*TEMP (F):* 55-75 degrees		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Areas 4C & 4A-8	SEQ Vets	1	Superintendent	9
	SEQ Vets	2	Equip. Operators	9
	SEQ Vets	1	Laborer	9
	SEQ Vets	1	QA/CP Rep	9
	SEQ Vets	1	Truck Manager	8
	Wetland Svs	2	Surveyors	3

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	59
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	940
TOTAL WORK HOURS FROM START OF CONSTRUCTION	999

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
NA

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
Two additional rolls of geotextile delivered today.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 7 hours
D5 Dozer – 4 hours
Padded Compactor – 0 hours
Cat 938 Loader –4 hour
Power Broom – 3 hour

REMARKS:
Hauling of non-TSCA today from 4A-8; shipped 2 loads of soil and hauling of two loads of TSCA soil from 4A-7. Borrow source drier today – imported 48 loads of fill – placed in surge pile and 4C. Tetra-Tech indicated that confirmation sample from the side wall in 4C met the remediation objective. We will finish the restoration of the area. Wetland Services performed the ditch cross-section surveying in the NW Ditch as part of the IDEM permit.

SEQ VETS/CRAIG HOBY DATE: 5/8/2013

CONTRACTOR PRODUCTION REPORT

DATE:
May 9, 2013

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	18

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Mostly sunny turning to rain in late afternoon	55-75 degrees

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
Areas 4C & 4A-8	SEQ Vets	1	Superintendent	11
	SEQ Vets	2	Equip. Operators	12
	SEQ Vets	1	Laborer	12
	SEQ Vets	1	QA/CP Rep	12
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	67
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	999
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1,066

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

NA

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

Erosion control blanket & grass seed for Area 4-C.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 7 hours
D5 Dozer – 4 hours
Padded Compactor – 0 hours
Cat 938 Loader –3 hour
Power Broom – 1 hour

REMARKS:

Hauling of non-TSCA today from 4A-8; shipped 2 loads of soil and hauling of three loads of TSCA soil from 4A-9. Cut asphalt pavement in 4A-9 with gas saw. Installed geotextile and rock for temporary road to TSCA Area 4A-6. Seeded Area 4C and placed erosion control blanket over area.

SEQ VETS/CRAIG HOBY DATE: 5/9/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 10, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 19
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Mostly sunny turning to rain in late afternoon		*TEMP (F):* 55-75 degrees		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Areas 4A-8 & 9 Excavation & Load-out	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	9
	SEQ Vets	1	Laborer	9
	SEQ Vets	1	QA/CP Rep	9
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	54
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1066
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1120

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
NA

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 7 hours
D5 Dozer – 2 hours
Padded Compactor – 0 hours
Cat 938 Loader –2 hour
Power Broom – 1 hour

REMARKS:
Worked Areas 4A-8 & 4A-9; shipped 2 loads of non-TSCA and 3 loads of TSCA soil. Backfilled a portion of the excavation in 4A-8.

SEQ VETS/CRAIG HOBY DATE: 5/10/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 13, 2013

CONTRACT NO.:	*TITLE & LOCATION:*	*REPORT NO.:*
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	20

CONTRACTOR:	*SITE SUPERINTENDENT:*
SEQ Vets	Craig Hoby
WEATHER: Clear & Cold morning, dry, mostly sunny	*TEMP (F):* 35-60 degrees

WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Areas 4A-7 & 9 Excavation & Load-out	SEQ Vets	1	Superintendent	11
	SEQ Vets	2	Equip. Operators	11
	SEQ Vets	1	Laborer	11
	SEQ Vets	1	QA/CP Rep	11
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	63
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1120
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1183

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
Safety fence installed along roadway at day's end.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 10 hours
D5 Dozer – 2 hours
Padded Compactor – 0 hours
Cat 938 Loader –2 hour
Power Broom – 1 hour

REMARKS:
Worked Areas 4A-7 & 4A-9; shipped 13 loads of TSCA soil. Backfilled a portion of the excavation in 4A-9. Placed geotextile in excavation floor of 4A-9 where stained soils where encountered beyond prescribed removal depth.

SEQ VETS/CRAIG HOBY DATE: 5/13/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 14, 2013

CONTRACT NO.:	*TITLE & LOCATION:*	*REPORT NO.:*
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	21

CONTRACTOR:	*SITE SUPERINTENDENT:*
SEQ Vets	Craig Hoby
WEATHER: Clear morning, dry, mostly sunny	*TEMP (F):* 42-70s degrees

WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Areas 4A-7 & 9 Excavation & Load-out	SEQ Vets	1	Superintendent	11
	SEQ Vets	2	Equip. Operators	11
	SEQ Vets	1	Laborer	11
	SEQ Vets	1	QA/CP Rep	11
	SEQ Vets	1	Truck Manager	8
	Alt & Witzig	1	Compaction Tech	5.5

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	68.5
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1120
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1188.5

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
Safety fence installed along roadway at day's end.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 10 hours
D5 Dozer – 4 hours
Padded Compactor – 4 hours
Cat 938 Loader –3 hour
Power Broom – 1 hour

REMARKS:
Finished excavation in 4A-7, placed and compacted fill in Areas 4A-7 & 4A-9; excavated TSCA soils in 4A-6. Shipped 11 loads of TSCA soil.

SEQ VETS/CRAIG HOBY DATE: 5/14/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 15, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 22
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Clear morning, dry, mostly sunny, slight breeze		*TEMP (F):* 60-80 degrees F		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Excavation in Area 4A-6 & backfilling Areas 4A-7 & 4A-9	SEQ Vets	1	Superintendent	11
	SEQ Vets	2	Equip. Operators	11
	SEQ Vets	1	Laborer	11
	SEQ Vets	1	QA/CP Rep	11
	SEQ Vets	1	Truck Manager	8
	Alt & Witzig	1	Compaction Tech	4.5

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	67.5
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1188.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1256

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
Imported fill dirt (42 loads).

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours
D5 Dozer – 4 hours
Padded Compactor – 4 hours
Cat 938 Loader –4 hours
Power Broom – 1 hour

REMARKS:
Loaded out 14 loads of TSCA soil from 4A-6. Shipped 11 loads of TSCA soil.

SEQ VETS/CRAIG HOBY DATE: 5/15/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 16, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 23
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Clear morning, with rain later in the day.		*TEMP (F):* 55-70s degrees		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Areas 4A-6 Excavation & Load-out	SEQ Vets	1	Superintendent	9
	SEQ Vets	2	Equip. Operators	9
	SEQ Vets	1	Laborer	9
	SEQ Vets	1	QA/CP Rep	9
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	53
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1256
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1309

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
Safety fence installed along and open excavation roadway at day's end.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 10 hours
D5 Dozer – 4 hours
Padded Compactor – 0 hours
Cat 938 Loader –3 hours
Power Broom – 1 hour

REMARKS:
Excavated TSCA soils in 4A-6. Shipped 7 loads of TSCA soil. Weather (rain and lightning) shortened work day.

SEQ VETS/CRAIG HOBY DATE: 5/16/2013

CONTRACTOR PRODUCTION REPORT

DATE:	
May 17, 2013	

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	24

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Clear morning, mostly sunny, some rain overnight	65-75 degrees F

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
Areas 4A-6 Excavation & Load-out	SEQ Vets	1	Superintendent	11
	SEQ Vets	2	Equip. Operators	11
	SEQ Vets	1	Laborer	11
	SEQ Vets	1	QA/CP Rep	11
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	63
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1309
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1372

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

Safety fence installed along roadway and open excavation at day's end. Stockpiles covered with plastic.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours
D5 Dozer – 4 hours
Padded Compactor – 0 hours
Cat 938 Loader –4 hour s
Power Broom – 1 hour

REMARKS:

Excavated TSCA soils in 4A-6. Shipped 11 loads of TSCA soil. Started placing fill in 4A-6 on the back wall.

SEQ VETS/CRAIG HOBY DATE: 5/17/2013

CONTRACTOR PRODUCTION REPORT

DATE:
May 20, 2013

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	25

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Clear morning, mostly sunny, warm	68-85 degrees F

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
Areas 4A-6 Excavation & Load-out	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	10
	SEQ Vets	1	Laborer	10
	SEQ Vets	1	QA/CP Rep	10
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	58
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1372
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1430

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

Safety fence installed along open excavation at day's end. Stockpiles covered with plastic.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours
D5 Dozer – 4 hours
Padded Compactor – 0 hours
Cat 938 Loader –4 hours
Power Broom – 1 hour

REMARKS:

Excavated TSCA soils in 4A-6. Shipped 7 loads of TSCA soil. Placed fill in 4A-6 along northern edge.

SEQ VETS/CRAIG HOBY DATE: 5/20/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 21, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 26
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Rain overnight and morning; lightning delays		*TEMP (F):* 62-75 degrees F		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Areas 4A-6 Excavation & Load-out	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	10
	SEQ Vets	1	Laborer	10
	SEQ Vets	1	QA/CP Rep	10
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	58
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1430
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1488

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

Safety fence installed along open excavation at day's end. Stockpiles covered with plastic. Inspected silt fencing, one repair needed and completed in Area 4C.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours
D5 Dozer – 0 hours
Padded Compactor – 0 hours
Cat 938 Loader –0 hours
Power Broom – 1 hour

REMARKS:

Excavated TSCA soils in 4A-6. Shipped 9 loads of TSCA soil. Lightning delayed loading for 1.5 hrs. No fill imported due to wet conditions.

SEQ VETS/CRAIG HOBY DATE: 5/21/2013

CONTRACTOR PRODUCTION REPORT

DATE:
May 22, 2013

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	27

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Cloudy, overcast all day, rain overnight,	62-75 degrees F

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
Areas 4A-6 Excavation & Load-out	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	9
	SEQ Vets	1	Laborer	9
	SEQ Vets	1	QA/CP Rep	9
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	54
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1488
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1542

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

Safety fence installed along open excavation at day's end. Stockpiles covered with plastic.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours
D5 Dozer – 3 hours
Padded Compactor – 0 hours
Cat 938 Loader –0 hours
Power Broom – 1 hour

REMARKS:

Excavated TSCA soils in 4A-6. Shipped 13 loads of TSCA soil. No fill imported due to wet conditions. Heritage roll-off is full of debris from Area 4A-6; called for pick-up.

SEQ VETS/CRAIG HOBY DATE: 5/22/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 23, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 28
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Cloudy all day, rain overnight and in late afternoon		*TEMP (F):* 55-70 degrees F		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Areas 4A-6 Excavation & Load-out	SEQ Vets	1	Superintendent	12
	SEQ Vets	2	Equip. Operators	12
	SEQ Vets	1	Laborer	12
	SEQ Vets	1	QA/CP Rep	12
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	68
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1542
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1610

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

Safety fence installed along open excavation at day's end. Stockpiles covered with plastic.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours
D5 Dozer – 4 hours
Padded Compactor – 0 hours
Cat 938 Loader – 5 hours
Power Broom – 3 hours

REMARKS:

Excavated TSCA soils in 4A-6. Shipped 12 loads of TSCA soil. Young Trucking delivered fill imported, estimated 40-45 loads. Fill placed and compacted in 4A-6. Heritage is schedule to pick-up roll-off next week. Performed decon of track excavator to permit operation in non-TSCA removal areas. Dig permit for Area 4D is in process.

SEQ VETS/CRAIG HOBY DATE: 5/23/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 24, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 29
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Cloudy to start, clear sky in the afternoon		*TEMP (F):* 55-70 degrees F		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
Areas 4A-6 & 4A-4 Excavation & Load-out	SEQ Vets	1	Superintendent	12
	SEQ Vets	2	Equip. Operators	12
	SEQ Vets	1	Laborer	12
	SEQ Vets	1	QA/CP Rep	12
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	68
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1610
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1678

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
See below

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
Imported 40 loads of fill dirt.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 10 hours
D5 Dozer – 4 hours
Padded Compactor – 3 hours
Cat 938 Loader – 4 hours
Power Broom – 2 hours

REMARKS:
Excavated TSCA soils in 4A-6. Shipped 7 loads of TSCA soil. Young Trucking delivered fill imported, 40 loads. Encountered pipe at 5.5' in 4A-4, suspected to be asbestos concrete pipe. Notified NAVFAC of pipe – appears to be drain line from corner of Bldg 357 leading to the NW Ditch. NAVFAC will provide an ACM contractor to assist in removal and sizing on Tuesday – SEQ Vets will arrange disposal of pipe as TSCA waste into Heritage – Roachdale. Open excavation was draped with geotextile and backfilled to prevent collection of rainwater. Additionally, NAVFAC will request SEQ Vets to replace this drain pipe with new pipe.

SEQ VETS/CRAIG HOBY DATE: 5/24/2013

CONTRACTOR PRODUCTION REPORT

CONTRACT NO.: N40083-11-D-0030; Task Order 0004	*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072	*DATE:* May 28, 2013 *REPORT NO.:* 30
CONTRACTOR: SEQ Vets	*SITE SUPERINTENDENT:* Craig Hoby	
WEATHER: Cloudy, overcast all day; significant rain over the weekend and holiday; site conditions very wet.	*TEMP (F):* 60-70 degrees F	

WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
4A-4 & 4A-5 Excavation & Load-out	SEQ Vets	1	Superintendent	12
	SEQ Vets	2	Equip. Operators	12
	SEQ Vets	1	Laborer	12
	SEQ Vets	1	QA/CP Rep	12
	SEQ Vets	1	Truck Manager	12

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	72
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1678
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1750

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
See below

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
Purchased and delivered two poly water tanks.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 10 hours
D5 Dozer – 0 hours
Padded Compactor – 0 hours
Cat 938 Loader – 0 hours
Power Broom – 0 hours

REMARKS:
Storm water infiltrated the excavation in 4A-4 as SEQ Vets excavated down to pipe in preparation for removal of ACM pipe. NAVFAC's ACM contractor (Maven Environmental was on-site). Excavated non-TSCA soils in 4A-5 as recourse since the water in 4A-4 needed to be pumped out. Shipped 7 loads of non-TSCA soil. Used fill dirt from surge pile to backfill 4A-5. Notified NAVFAC of water in the excavation of 4A-4 and transition to non-TSCA excavation and loadout. Obtained two poly tanks and began dewatering of open excavation. Pumped approximately 1,600 gallons of water. Will store and test in advance of off-site disposal. Obtained 12" rubber plug for existing pipe to prevent further water infiltration. Postponed ACM contractor until excavation can be dewatered. Will complete dewatering tomorrow to collect water that re-charges overnight.

CONTRACTOR PRODUCTION REPORT

DATE:
May 29, 2013

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	31

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Clear & Dry	70-80 degrees F

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
4A-4 & 4A-5 Excavation & Load-out	SEQ Vets	1	Superintendent	11
	SEQ Vets	2	Equip. Operators	11
	SEQ Vets	1	Laborer	11
	SEQ Vets	1	QA/CP Rep	11
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	63
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1750
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1813

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

See below

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

Purchased and delivered one poly water tank.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours
D5 Dozer – 4 hours
Padded Compactor – 0 hours
Cat 938 Loader – 4 hours
Power Broom – 1 hour

REMARKS:

Installed 12" inflatable plug into drain pipe at the corner of Bldg 357. Finished dewatering the excavation in Area 4A-4 by pumping into third water tank. Heritage will accept ACM pipe comingled with TSCA soil if the pipe is in 3' sections and bagged. No changes needed to current disposal profile –HES will bury in dedicated hole once received – SEQ Vets to provide advance notice of shipment. Excavated the rest of the pipe after the excavation was dewatered – the pipe consisted on two sections of ACM (7' & 21') and then the pipe transitioned into a corrugated metal culvert. SEQ Vets set the ACM aside and removed the corrugated metal pipe as well. Excavated and loaded out 175 tons (7 loads) of non-TSCA from 4A-5.

SEQ VETS/CRAIG HOBY DATE: 5/29/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 30, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 32
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Clear & dry; warm and humid		*TEMP (F):* 70-90 degrees F		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
4A-4 & 4A-5 Excavation & Load-out	SEQ Vets	1	Superintendent	11
	SEQ Vets	2	Equip. Operators	11
	SEQ Vets	1	Laborer	11
	SEQ Vets	1	QA/CP Rep	11
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	63
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1813
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1876

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
See below

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
Imported 40 loads of fill dirt from Young Trucking.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 10 hours
D5 Dozer – 4 hours
Padded Compactor – 3 hours
Cat 938 Loader – 4 hours
Power Broom – 1 hour

REMARKS:
Loaded out 6 loads from 4A-4 to finish TSCA waste at this location. Maven Env. Was on-site to bag the pipe for disposal. SEQ Vets loaded the pipe onto the TSCA load, manifest number 011773569JJK. Heritage hauled one 20-cyd roll-off of TSCA debris off-site today.

SEQ VETS/CRAIG HOBY DATE: 5/30/2013

CONTRACTOR PRODUCTION REPORT

DATE: May 31, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 33
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Storms and rain.		*TEMP (F):* 62-70 degrees F		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
4A-2 Excavation & Load-out	SEQ Vets	1	Superintendent	8
	SEQ Vets	2	Equip. Operators	5
	SEQ Vets	1	Laborer	5
	SEQ Vets	1	QA/CP Rep	3
	SEQ Vets	1	Truck Manager	3

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	29
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1876
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1905

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
See below

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
13 rolls of erosion control blanket and 3 rolls of 6 oz geotextile were staged on-site.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 3 hours
D5 Dozer – 0 hours
Padded Compactor – 0 hours
Cat 938 Loader – 0 hours
Power Broom – 0 hours

REMARKS:
Loaded out 3 loads from 4A-2 of non-TSCA waste since trucks were on-site. Continuous rainfall prevented any additional work. Called off crew after the third truck was off-site. Crew picked up additional geotextile & erosion control blanket and delivered it to the site.

SEQ VETS/CRAIG HOBY DATE: 5/31/2013

CONTRACTOR PRODUCTION REPORT

DATE: June 3, 2013

CONTRACT NO.:	*TITLE & LOCATION:*	*REPORT NO.:*
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	34

CONTRACTOR:	*SITE SUPERINTENDENT:*
SEQ Vets	Craig Hoby

WEATHER:	*TEMP (F):*
Clear and dry, significant rain over weekend	60-70 degrees F

WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
4A-2 & 4A-3 Excavation & Load-out	SEQ Vets	1	Superintendent	12
	SEQ Vets	2	Equip. Operators	12
	SEQ Vets	1	Laborer	12
	SEQ Vets	1	QA/CP Rep	12
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	68
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1905
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1973

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
See below

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
Delivered soil stabilization seed mixture for restoration of the

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 10 hours
D5 Dozer – 4 hours
Padded Compactor – 0 hours
Cat 938 Loader –4 hours
Power Broom – 1 hour

REMARKS:
Loaded out 12 loads from 4A-2 of non-TSCA waste. Dewatered the pool of watered backed-up at the plugged drain, water routed to drain across Area 4B to ditch 2. Backfilled excavation with fill dirt from surge pile on-site. Began using Young Trucking to supplement Beelman for non-TSCA wastes.

SEQ VETS/CRAIG HOBY DATE: 6/3/2013

CONTRACTOR PRODUCTION REPORT

DATE: June 4, 2013				
CONTRACT NO.: N40083-11-D-0030; Task Order 0004		*TITLE & LOCATION:* SWMU 17, Phase I, Bldgs 357-3072		*REPORT NO.:* 35
CONTRACTOR: SEQ Vets		*SITE SUPERINTENDENT:* Craig Hoby		
WEATHER: Clear and dry, cool morning		*TEMP (F):* 45-70 degrees F		
WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
4A-10, 4A-3 & 4A-1 Excavation & Load-out	SEQ Vets	1	Superintendent	12
	SEQ Vets	2	Equip. Operators	12
	SEQ Vets	1	Laborer	12
	SEQ Vets	1	QA/CP Rep	12
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	68
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1973
TOTAL WORK HOURS FROM START OF CONSTRUCTION	2041

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:
See below

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:
None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:
Cat 319 Excavator – 10 hours
D5 Dozer – 4 hours
Padded Compactor – 0 hours
Cat 938 Loader –4 hours
Power Broom – 1 hour

REMARKS:
Loaded out 15 loads of non-TSCA waste; dug 4A-1 after trucks finished their day – stockpile soils for loadout. Backfilled other excavation with fill dirt from surge pile on-site. Prepared for dig in 4D for tomorrow.

SEQ VETS/CRAIG HOBY DATE: 6/4/2013

CONTRACTOR PRODUCTION REPORT

DATE:
June 5, 2013

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	36

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Clear and dry, sun all day	60-80 degrees F

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
4A-3 & 4A-5 Excavation & Load-out	SEQ Vets	1	Superintendent	12
	SEQ Vets	2	Equip. Operators	12
	SEQ Vets	1	Laborer	12
	SEQ Vets	1	QA/CP Rep	12
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	68
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2041
TOTAL WORK HOURS FROM START OF CONSTRUCTION	2109

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

See below

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours	D5 Dozer – 2 hours
Padded Compactor – 0 hours	Cat 938 Loader –8 hours
Cat 308 Excavator – 8 hours	Power Broom – 1 hour

REMARKS:

Loaded out 2 loads of TSCA waste from 4D and 13 loads of non-TSCA from stockpiled soils from 4A-3, 4A-1 & 4A-5; Backfilled 4D excavation with fill dirt from surge pile on-site; seeded and placed straw mulch.

SEQ VETS/CRAIG HOBY DATE: 6/5/2013

CONTRACTOR PRODUCTION REPORT

DATE:
June 6, 2013

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	37

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Light rain overnight, clearing later and with sun in PM	64-80 degrees F

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
4A-5 Excavation & Load-out	SEQ Vets	1	Superintendent	8
	SEQ Vets	2	Equip. Operators	11
	SEQ Vets	1	Laborer	11
	SEQ Vets	1	QA/CP Rep	11
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	60
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2109
TOTAL WORK HOURS FROM START OF CONSTRUCTION	2169

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

See below

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

None

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours	D5 Dozer – 2 hours	Smooth drum compactor – 2 hours
Padded Compactor – 1 hours	Cat 938 Loader –4 hours	
Cat 308 Excavator – 4 hours	Power Broom – 1 hour	

REMARKS:

Loaded out 18 loads of non-TSCA waste from 4A-5; Re-worked gravel approach to loading dock of Bldg 357 in Area 4B. Prepared and rolled backfilled areas in advance of placing gravel.

SEQ VETS/CRAIG HOBY DATE: 6/6/2013

CONTRACTOR PRODUCTION REPORT

DATE:
June 7, 2013

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	38

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Cloudy, no rain	65-80 degrees F

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
4A-5 Excavation & Load-out	SEQ Vets	1	Superintendent	12
	SEQ Vets	2	Equip. Operators	12
	SEQ Vets	1	Laborer	12
	SEQ Vets	1	QA/CP Rep	12
	SEQ Vets	1	Truck Manager	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	68
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2169
TOTAL WORK HOURS FROM START OF CONSTRUCTION	2237

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

See below

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

1 load of #53

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 10 hours	D5 Dozer – 2 hours	Smooth drum compactor – 2 hours
Padded Compactor – 0 hours	Cat 938 Loader –4 hours	
Cat 308 Excavator – 3 hours	Power Broom – 1 hour	

REMARKS:

Loaded 23 loads off-site today. Almost completely finished the load-out of waste soils from 4A-5; Young had 6 trucks running and Beelman had 3 trucks; estimate 1-2 loads remaining,, including decon wastes. Decontaminated the excavator tracks and carriage to allow the unit to move on the clean fill portion of 4A-5. Seeded and placed erosion control blanket over the vegetative portion of 4A-8 above Ditch 8. Imported, placed & compacted #53 rock for repair of dock approach at Bldg 357. Tetra-Tech indicated that the confirmation sample from 4A-10 met the soil remediation objective.

SEQ VETS/CRAIG HOBY DATE: 6/7/2013

CONTRACTOR PRODUCTION REPORT

DATE: June 10, 2013

CONTRACT NO.:	*TITLE & LOCATION:*	*REPORT NO.:*
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	39

CONTRACTOR:	*SITE SUPERINTENDENT:*
SEQ Vets	Craig Hoby

WEATHER:	*TEMP (F):*
Rain overnight, overcast all day, couple of periods of slight rain	66-76 degrees F

WORK LOCATION & DESCRIPTION:	*EMPLOYER:*	*NO.:*	*TRADE:*	*HRS:*
4A-5 Excavation & Load-out	SEQ Vets	1	Superintendent	10
	SEQ Vets	2	Equip. Operators	10
	SEQ Vets	1	Laborer	10
	SEQ Vets	1	QA/CP Rep	10
	Alt & Witzig	1	Compaction Tech	8

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? *(IF YES, ATTACH COPY OF MEETING MINUTES)*	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? *(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)*		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? *(IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)*		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? *(IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)*		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	58
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2287
TOTAL WORK HOURS FROM START OF CONSTRUCTION	2345

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

See below

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

39 loads of fill dirt & 1 load of #53 rock.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 4 hours
D5 Dozer – 8 hours
Smooth drum compactor –2 hours
Padded Compactor – 7 hours
Cat 938 Loader –3 hours
Cat 308 Excavator – 1 hour
Power Broom – 1 hour

REMARKS:

Loaded out 2 last loads of impacted soil and final decon waste from the decon of the excavator bucket. Imported fill dirt to backfill 4A-5. Placed fill in lifts and compacted – Alt Witzig confirmed compaction as all greater than 90%. Placed addition fill in 4A-1 and tracked in place as well as final grading of the slope. Rolled final lift of flat portion of 4A with smooth roller. Finished rolling rock in place at 4B.

SEQ VETS/CRAIG HOBY DATE: 6/10/2013

CONTRACTOR PRODUCTION REPORT

DATE:	
June 11, 2013	

CONTRACT NO.:	TITLE & LOCATION:	REPORT NO.:
N40083-11-D-0030; Task Order 0004	SWMU 17, Phase I, Bldgs 357-3072	40

CONTRACTOR:	SITE SUPERINTENDENT:
SEQ Vets	Craig Hoby

WEATHER:	TEMP (F):
Clear & Sunny, warm	66-88 degrees F

WORK LOCATION & DESCRIPTION:	EMPLOYER:	NO.:	TRADE:	HRS:
4A	SEQ Vets	1	Superintendent	8
	SEQ Vets	2	Equip. Operators	8
	SEQ Vets	1	Laborer	8
	SEQ Vets	1	QA/CP Rep	8
	SEQ Vets	2	Safety Audit Team	2

JOB SAFETY:	Yes	No
WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES, ATTACH COPY OF MEETING MINUTES)	X	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)		X
WAS TRENCHING/SCAFFOLDING/HIGH WORK DONE? (IF YES ATTACH STATEMENT OF CHECKLIST SHOWING INSPECTION PERFORMED)		X
WERE THERE ANY NEAR MISS ACCIDENTS THIS DATE? (IF YES ATTACH DESCRIPTION OF INCIDENT AND PROPOSED ACTION)		X

TOTAL WORK HOURS ON JOB SITE THIS DATE	44
CUMMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2345
TOTAL WORK HOURS FROM START OF CONSTRUCTION	2389

LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED:

SEQ Vets safety audit team performed an inspection of field operations, safety practices/procedures/paperwork and QC practices.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB:

4 loads of #53 rock and 2 loads of rip rap.

CONSTRUCTION EQUIPMENT ON JOB SITE TODAY, INCLUDE NUMBER OF HOURS USED TODAY:

Cat 319 Excavator – 6 hours
D5 Dozer – 0 hours
Smooth drum compactor –6 hours
Padded Compactor – 0 hours
Cat 938 Loader –1 hour
Cat 308 Excavator – 2 hour
Power Broom – 1 hour

REMARKS:

Removed and hauled three loads of broken asphalt from the service road to the landfill on-base. Replaced asphalt with geotextile and #53 road base rock. Compacted with smooth drum vibratory roller to match existing road grade. Road repairs inspected and approved by Tim Sears. Used a laser level and grade stick to estimate pipe outfall with a 1% grade and run of 130'. Placed geotextile and rip-rap rock at the outfall of the storm water pipe from Bldg 357 down to the start of the NW ditch. Seeded the entire slope of 4A with the soil stabilization seed blend per planting plan. Covered the entire slope with erosion control blanket. Prepare heavy equipment for demob/pickup. Loaded up miscellaneous equipment from the site.

SEQ VETS/CRAIG HOBY DATE: 6/11/2013

APPENDIX F-1.2

SEQ/Vets DAILY QUALITY CONTROL REPORTS

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Apr 15, 2013

REPORT NO: 1

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ( ) YES (•) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.1	Site Preparation	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ( ) YES (•) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (•) YES ( ) NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (•) YES ( ) NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	N/A

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc.

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach DN: cn=Tracey Koach, o, ou, email=tkoach@oneusa.com, c=US Date: 2013.05.15 15:11:56 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Apr 15, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY.

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Apr 16, 2013

REPORT NO: 2

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? (●) YES ( ) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.1	Site Preparation	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (●) YES ( ) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.1	Site Preparation	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (●) YES ( ) NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (●) YES ( ) NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	N/A

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc.

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneillnet.com, c=US, Date: 2013.06.15 15:14:38 -05'00'

Apr 16, 2013

AUTHORIZED QC MANAGER AT SITE — DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY.

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Apr 17, 2013

REPORT NO: 3

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? (●) YES ( ) NO — IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.1	Site Preparation	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (●) YES ( ) NO — IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.1	Site Preparation	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (●) YES ( ) NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (●) YES ( ) NO [Add] [Del]

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	N/A

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) [Add] [Del]

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. [Add] [Del]

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@onesubvan.com, c=US, Date: 2013.05.15 15:16:23 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Apr 17, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. [Add] [Del]

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Apr 18, 2013

REPORT NO: 4

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? (●) YES ( ) NO — IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.1	Site Preparation	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (●) YES ( ) NO — IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.1	Site Preparation	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (●) YES ( ) NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (●) YES ( ) NO [Add] [Del]

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	N/A

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) [Add] [Del]

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. [Add] [Del]

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@ensafrica.com, c=US, Date: 2013.05.15 15:18:44 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Apr 18, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. [Add] [Del]

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Apr 19, 2013

REPORT NO: 5

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? (YES / NO) — IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.1	Site Preparation	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (YES / NO) — IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.1	Site Preparation	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (YES / NO) — WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (YES / NO) [Add] [Del]

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	N/A

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) [Add] [Del]

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. [Add] [Del]

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@parsons.com, c=US, Date: 2013.05.15 15:20:58 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Apr 19, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. [Add] [Del]

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Apr 22, 2013

REPORT NO: 6

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? (●) YES ( ) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (●) YES ( ) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (●) YES ( ) NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (●) YES ( ) NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	N/A

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc.

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneneilljean.com, c=US, Date: 2013.05.15 15:23:07 -05'00'

Apr 22, 2013

AUTHORIZED QC MANAGER AT SITE — DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY.

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Apr 23, 2013

REPORT NO: 7

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? (YES / NO) — IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (YES / NO) — IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (YES / NO) — WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (YES / NO) [Add] [Del]

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	N/A

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) [Add] [Del]

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. [Add] [Del]

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@onesulfive.n.com, c=US, Date: 2013.05.15 15:27:57 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Apr 23, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. [Add] [Del]

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Apr 24, 2013

REPORT NO: 8

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? (YES / NO) — IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (YES / NO) — IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (YES / NO) — WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (YES / NO) [Add] [Del]

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	N/A

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) [Add] [Del]

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. [Add] [Del]

Schedule Activity No	Description

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Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@ensafe.com, c=US, Date: 2013.05.15 15:29:17 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Apr 24, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. [Add] [Del]

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Apr 25, 2013

REPORT NO: 9

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? (●) YES ( ) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (●) YES ( ) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (●) YES ( ) NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (●) YES ( ) NO [Add] [Del]

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	N/A

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) [Add] [Del]

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. [Add] [Del]

Schedule Activity No	Description

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Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@jonesedfinn.com, c=US, Date: 2013.05.15 13:50:38 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Apr 25, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. [Add] [Del]

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Apr 26, 2013

REPORT NO: 10

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? (●) YES ( ) NO — Add / Del

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (●) YES ( ) NO — Add / Del

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (●) YES ( ) NO

WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (●) YES ( ) NO — Add / Del

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	N/A

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) — Add / Del

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. — Add / Del

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach DN: cn=Tracey Koach, o, ou, email=tkoach@tetratech.com, c=US Date: 2013.05.15 15:52:15 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Apr 26, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. — Add / Del

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Apr 29, 2013

REPORT NO: 11

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? (●) YES ( ) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 19 - Area 4C	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (●) YES ( ) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 19 - Area 4C	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (●) YES ( ) NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (●) YES ( ) NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	N/A

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc.

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneillsullivan.com, c=US, Date: 2013.04.29 19:06:43 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Apr 29, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY.

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Apr 30, 2013

REPORT NO: 12

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 19 - Area 4C	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration - Task IDs 28 & 29 - Area 4B	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO (Add / Del)

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
3.5.4	Compaction Tests performed by Mark Pitman (Alt & Witzig Engineering) in Area 4B

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) (Add / Del)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@onesulfur.com, c=US, Date: 2013.04.30 17:46:47 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Apr 30, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 1, 2013

REPORT NO: 13

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ( ) YES (•) NO [Add] [Del]
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (•) YES ( ) NO [Add] [Del]
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 19 - Area 4C	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration - Task IDs 28 & 29 - Area 4B	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (•) YES ( ) NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (•) YES ( ) NO [Add] [Del]

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) [Add] [Del]

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. [Add] [Del]

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach DN: cn=Tracey Koach, o, ou, email=tkoach@oneneuver.com, c=US Date: 2013.05.01 18:42:22 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 1, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. [Add] [Del]

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 2, 2013

REPORT NO: 14

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? (●) YES ( ) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 23 - Area 4A	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (●) YES ( ) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task IDs 19 & 23 - Areas 4C and 4A, respectively	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration - Task IDs 28 & 29 - Area 4B	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (●) YES ( ) NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (●) YES ( ) NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc.

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, Dn: cn=Tracey Koach, o, ou, email=tkoach@ensafrican.com, c=US, Date: 2013.05.02 19:33:06 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 2, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY.

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 3, 2013

REPORT NO: 15

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? (●) YES ( ) NO — IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 23 - Area 4A-8	

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (●) YES ( ) NO — IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task IDs 19 & 23 - Areas 4C and 4A-8, respectively	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration - Task ID 30 - Area 4B	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (●) YES ( ) NO — WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (●) YES ( ) NO [Add] [Del]

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) [Add] [Del]

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. [Add] [Del]

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@jonesus@van.com, c=US, Date: 2013.05.05 15:17:49 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 5, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. [Add] [Del]

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 6, 2013

REPORT NO: 16

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.3	Transportation and Off-site Disposal of Soil	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-17 ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc.

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@onesubnet.com, c=US, Date: 2013.05.07 08:45:56 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 7, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY.

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 8, 2013

REPORT NO: 17

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task IDs 21 and 23	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc.

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneilldunn.com, c=US, Date: 2013.05.08 19:57:43 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 8, 2013

GOVERNMENT QUALITY ASSURANCE REPORT — DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY.

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 9, 2013

REPORT NO: 18

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ( ) YES (•) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? (•) YES ( ) NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task IDs 21	
3.5.3	Transportation and Off-site Disposal of Soil	
3.5.4	Backfilling and Restoration	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? (•) YES ( ) NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? (•) YES ( ) NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc.

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneneilsen.com, c=US, Date: 2013.05.09 18:11:14 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 9, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY.

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 10, 2013

REPORT NO: 19

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST. [Add] [Del]

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 21	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	
3.5.4	Backfilling and Restoration	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO [Add] [Del]

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) [Add] [Del]

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. [Add] [Del]

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach DN: cn=Tracey Koach, o, ou, email=tkoach@oneaa.ttlive.com, c=US Date: 2013.05.12 19:48:54 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 10, 2013

GOVERNMENT QUALITY ASSURANCE REPORT — DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. [Add] [Del]

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 13, 2013

REPORT NO: 20

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 21	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	
3.5.4	Backfilling and Restoration	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO (Add / Del)
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) (Add / Del)

Schedule Activity No	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

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Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneilldiva.com, c=US, Date: 2013.05.13 19:20:52 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 13, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 14, 2013

REPORT NO: 21

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 21	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	
3.5.4	Backfilling and Restoration - Task ID	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO (Add / Del)

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) (Add / Del)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

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Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@onesti.com, c=US, Date: 2013.05.14 19:12:24 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 14, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 15, 2013

REPORT NO: 22

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 21	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	
3.5.4	Backfilling and Restoration - Task ID 31	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO (Add / Del)

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
3.5.4	Compaction Tests performed by Mark Pitman (Alt & Witzig Engineering) in Area 4A-7

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) (Add / Del)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

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Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneas.dlvn.com, c=US, Date: 2013.05.15 19:34:53 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 15, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 16, 2013

REPORT NO: 23

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 21	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	
3.5.4	Backfilling and Restoration - Task ID 31	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO

WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO (Add / Del)

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) (Add / Del)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

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Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@onesulivan.com, c=US, Date: 2013.05.19 20:01:12 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 16, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 17, 2013

REPORT NO: 24

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 21	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	
3.5.4	Backfilling and Restoration - Task ID 31	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO

WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO (Add / Del)

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) (Add / Del)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach DN: cn=Tracey Koach, o, ou, email=tkoach@oneau@aol.com, c=US Date: 2013.05.19 20:03:39 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 17, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 20, 2013

REPORT NO: 25

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 21	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	
3.5.4	Backfilling and Restoration - Task ID 31	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO (Add / Del)

WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) (Add / Del)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneeulfvan.com, c=US, Date: 2013.05.20 19:08:09 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 20, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 21, 2013

REPORT NO: 26

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 21	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	
3.5.4	Backfilling and Restoration - Task ID 31	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO

WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO (Add / Del)

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) (Add / Del)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach DN: cn=Tracey Koach, o, ou, email=tkoach@oneus.dhon.com, c=US Date: 2013.05.22 18:18:06 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 21, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 22, 2013

REPORT NO: 27

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 21	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	
3.5.4	Backfilling and Restoration - Task ID 31	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO (Add / Del)

WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) (Add / Del)

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneill.com, c=US, Date: 2013.05.22 18:19:34 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 22, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 23, 2013

REPORT NO: 28

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 21	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	
3.5.4	Backfilling and Restoration - Task ID 31	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO (Add / Del)
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) (Add / Del)

Schedule Activity No	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneau.com, c=US, Date: 2013.05.23 18:55:25 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 23, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 24, 2013

REPORT NO: 29

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 21	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	
3.5.4	Backfilling and Restoration - Task ID 31	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO (Add / Del)
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) (Add / Del)

Schedule Activity No	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach DN: cn=Tracey Koach, o, ou, email=tkoach@oneauthen.com, c=US Date: 2013.05.29 18:51:59 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 24, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 28, 2013

REPORT NO: 30

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 23	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 24	
3.5.4	Backfilling and Restoration - Task ID 32	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO (Add / Del)
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) (Add / Del)

Schedule Activity No	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

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Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneusa@wn.com, c=US, Date: 2013.05.29 18:54:28 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 28, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 29, 2013

REPORT NO: 31

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 23	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 24	
3.5.4	Backfilling and Restoration - Task ID 32	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO (Add / Del)

WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) (Add / Del)

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

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Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneneillvan.com, c=US, Date: 2013.05.29 18:56:20 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 29, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 30, 2013

REPORT NO: 32

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 21	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	
3.5.4	Backfilling and Restoration - Task ID 31	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO

WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO (Add / Del)

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) (Add / Del)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@jonesedfinan.com, c=US, Date: 2013.05.30 19:05:28 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 30, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: May 31, 2013

REPORT NO: 33

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 22	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO (Add / Del)

WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) (Add / Del)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneaa.com, c=US, Date: 2013.06.03 18:22:45 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: May 31, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Jun 3, 2013

REPORT NO: 34

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 23	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 23	
3.5.4	Backfilling and Restoration - Task ID 32	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO (Add / Del)

WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) (Add / Del)

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneau.com, c=US, Date: 2013.06.04 19:58:54 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Jun 3, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Jun 4, 2013

REPORT NO: 35

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 23	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 23	
3.5.4	Backfilling and Restoration - Task ID 32	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO

WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO (Add / Del)

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) (Add / Del)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@navy.mil, c=US, Date: 2013.06.04 20:00:31 -07'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Jun 4, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Jun 5, 2013

REPORT NO: 36

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task IDs 23 and 25	
3.5.3	Transportation and Off-site Disposal of Soil - Task IDs 24 and 26	
3.5.4	Backfilling and Restoration - Task IDs 32 and 33	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO

WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO (Add / Del)

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) (Add / Del)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach DN: cn=Tracey Koach, o, ou, email=tkoach@oneal.dlvan.com, c=US Date: 2013.06.05 17:04:55 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Jun 5, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Jun 6, 2013

REPORT NO: 37

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO [Add] [Del]
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO [Add] [Del]
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 23	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 24	
3.5.4	Backfilling and Restoration - Task ID 32	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO [Add] [Del]
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) [Add] [Del]

Schedule Activity No	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. [Add] [Del]

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach DN: cn=Tracey Koach, o, ou, email=tkoach@onesullivan.com, c=US Date: 2013.06.06 18:09:02 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Jun 6, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. [Add] [Del]

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Jun 7, 2013

REPORT NO: 38

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0030/0004	SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 23	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 24	
3.5.4	Backfilling and Restoration - Task ID 32	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO (Add / Del)

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) — REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST) (Add / Del)

Schedule Activity No	Description	Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneandone.com, c=US, Date: 2013.06.08 16:17:06 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Jun 7, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: Jun 10, 2013

REPORT NO: 39

PHASE | CONTRACT NO: N40083-11-D-0030/0004 | CONTRACT TITLE: SWMU 17 Soil Excavation - Phase 1

PREPARATORY — WAS PREPARATORY PHASE WORK PREFORMED TODAY? ○ YES ◉ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #

INITIAL — WAS INITIAL PHASE WORK PREFORMED TODAY? ◉ YES ○ NO (Add / Del)
IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No	Definable Feature of Work (DFOW)	Index #
3.5.2	Soil Excavation - Task ID 23	
3.5.3	Transportation and Off-site Disposal of Soil - Task ID 24	
3.5.4	Backfilling and Restoration - Task ID 32	

FOLLOW-UP — WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? ◉ YES ○ NO (Add / Del)
WORK COMPLIES WITH SAFETY REQUIREMENTS AND INSPECTION COMPLIES WITH EM385-1-1? ◉ YES ○ NO

Schedule Activity No	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS) (Add / Del)

Schedule Activity No	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No	Description

REMARKS (Also Explain Any Follow-Up Phase checklist Item From Above That Was Answered "NO"; Work Deficiency, Safety Deficiency.) Manuf. Rep On-Site, etc. (Add / Del)

Schedule Activity No	Description

On behalf of the contractor, I certify that this report is complete and correct and equipment and material used and work performed during this reporting period is in compliance with the contract drawings and specifications to the best of my knowledge except as noted in this report.

Tracey Koach — Digitally signed by Tracey Koach, DN: cn=Tracey Koach, o, ou, email=tkoach@oneillvan.com, c=US, Date: 2013.06.10 17:29:36 -05'00'

AUTHORIZED QC MANAGER AT SITE — DATE: Jun 10, 2013

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT: FOR GOVERNMENT USE ONLY. (Add / Del)

Schedule Activity No	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

APPENDIX F-1.3

SEQ/Vets DAILY TAILGATE SAFETY MEETINGS

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 4/17/13	**Time:** 07:00	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Overcast, warm, occasional light rain	

SITE ACTIVITIES FOR TODAY – 4/17/13

General (Safety Concerns for the Day)

- Severe Weather
- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Site Prep	1		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember BBP – Be aware of severe weather (lightning, heavy rain, high winds).

Equipment Hazards: Heavy equipment will be active today on site. Stay alert. Complete your daily inspections. Try to keep the cabs clean and not have bottles or other loose item rolling on the floor of the cab.

Decontamination:

Others:

Employee Questions or Comments:

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SAFETY ISSUES and COMMENTS FOR 4/16/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 4-17-2013

Employee Signature	Printed Name	Company	Time
Tracey Koach	TRACEY KOACH	SEQ Vos/SUL	0723
Scott Boyer	Scott Boyer	EQM	0723
Brent Hardinger	Brent Hardinger	EQM	0700
Leon Gibson	Leon Gibson	EQM	0700
Kevin Cockamp	Kevin Cockamp	Tetra Tech	0700
Barry Appleton	Barry Appleton	EQM	0745
Craig Hoby	Craig Hoby	EQM	0745

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 4/19/13	**Time:** 07:00	Project:	**Conducting DTSM**	Chris Ore
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Cool and windy	

SITE ACTIVITIES FOR TODAY – 4/19/13

General (Safety Concerns for the Day)

- Severe Weather
- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Site Prep	**1**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE needs to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember BBP – Be aware of severe weather (lightning, heavy rain, high winds).

Equipment Hazards: Heavy equipment will be active today on site. Stay alert. Complete your daily inspections. Try to keep the cabs clean and not have bottles or other loose item rolling on the floor of the cab.

Decontamination: Dry decon of boots prior to leaving site, wash hands prior to eating/drinking

Others:

Employee Questions or Comments:

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

(Any concerns, comments, or changes that were brought up from the previous day) Not applicable

SAFETY ISSUES and COMMENTS FOR 4/19/13

(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day) Not applicable

REMINDER: Watch for poison ivy/oak when clearing brush. Be cautious of insects (ticks, bees) and wildlife (coyote, deer) observed in the vicinity of the site.

Date: 4/19/13

Employee Signature	Printed Name	Company	Time
	Chris Orr	SEQ Vets	0700
	Craig Hoby	EQM	0715
	Barry Appleton	EQM	0715
	Scott Boyer	EQM	0700
	Leon Gibson	EQM	0700
	Brent Hardinger	EQM	0700

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 4/18/13	**Time:** 07:00	Project:	**Conducting DTSM**	Chris Ore
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Warm with chance of thunderstorms and strong wind	

SITE ACTIVITIES FOR TODAY – 4/18/13

General (Safety Concerns for the Day)

- Severe Weather
- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Site Prep	1		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE needs to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember BBP – Be aware of severe weather (lightning, heavy rain, high winds).

Equipment Hazards: Heavy equipment will be active today on site. Stay alert. Complete your daily inspections. Try to keep the cabs clean and not have bottles or other loose item rolling on the floor of the cab.

Decontamination: Dry decon of boots prior to leaving site, wash hands prior to eating/drinking

Others:

Employee Questions or Comments:

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SAFETY ISSUES and COMMENTS FOR 4/18/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area. Properly store equipment/ tools when not in use to prevent slip/trip/fall & be prepared in the event of severe weather

Date: 4/18/13

Employee Signature	Printed Name	Company	Time
Chris Ore	Chris Ore	SEQ Vets	0700
Leon Gibson	Leon Gibson	EQM	0700
Brent B Hardinger	Brent B Hardinger	EQM	0700
Craig Hoby	Craig Hoby	EQM	0700
Kevin Cosekamp	Kevin Cosekamp	Tetra Tech	0700
Barry Appleton	Barry Appleton	EQM	0700
Scott Boyer	Scott Boyer	EQM	0700

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 4/22/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Partly sunny, warm	

SITE ACTIVITIES FOR TODAY – 4/22/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Site Prep	**1**		
Excavating	**2**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember to watch for ticks.

Equipment Hazards: Heavy equipment will be active today on site. Stay alert. Complete your daily inspections. Watch for truck traffic.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SAFETY ISSUES and COMMENTS FOR 4/16/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 4-22-2013

Employee Signature	Printed Name	Company	Time
Tracey L Roach	Tracey Roach	SEQ / Sullivan	0645
Brent Hardinger	Brent Hardinger	EQM	0645
Leon Gibson	Leon Gibson	EQM	0645
Craig Hoby	Craig Hoby	EQM	0645
Scott Boyer	Scott Boyer	EQM	0645
Kevin Losekamp	Kevin Losekamp	Tetra Tech	0900
Barry Appleton	Barry Appleton	EQM	0645

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 4/23/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Overcast, warm, possible rain	

SITE ACTIVITIES FOR TODAY – 4/23/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember to watch for ticks.

Equipment Hazards: Heavy equipment will be operating on site. Stay alert. Complete your daily inspections. Watch for truck traffic.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SAFETY ISSUES and COMMENTS FOR 4/~~16~~23/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 4/23/2013

Employee Signature	Printed Name	Company	Time
	Brent Harsinger	EQM	0630
	Scott Boyer	EQM	0630
	Leon Gibson	EQM	0630
	Tracy Foach	Sullivan	0630
		EQM	0700
	Kevin Cockramp	Tetra Tech	0655
	Barry Appleton	EQM	0655

Date: 4/24/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Overcast, cold, raining	

SITE ACTIVITIES FOR TODAY – 4/24/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Transportation (loading) & Off-site Disposal	**3**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember to watch for ticks.

Equipment Hazards: Heavy equipment will be operating on site. Stay alert. Complete your daily inspections. Watch for truck traffic.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SAFETY ISSUES and COMMENTS FOR 4/16/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 4/24/2013

Employee Signature	Printed Name	Company	Time
Tracey K Koach	Tracey Koach	SEQ/Sullivan	0645
Scott Boyer	Scott Boyer	EQM	0630
Leon Gibson	Leon Gibson	EQM	0630
Brent Hardinger	Brent Hardinger	EQM	0630

Date: 4/25/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Clear, sunny, cool (60)	

SITE ACTIVITIES FOR TODAY – 4/25/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember to watch for ticks.

Equipment Hazards: Heavy equipment will be operating on site. Stay alert. Ground will be wet from yesterday's rainfall.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SAFETY ISSUES and COMMENTS FOR 4/~~16~~15/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 4/25/2013

Employee Signature	Printed Name	Company	Time
Tracey Koach	Tracey Koach	SEQ/Sullivan	0630
Craig Holy	Craig Holy	SEQ/EQM	0630
Brent Hardinger	Brent Hardinger	SEQ/EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Leon Gibson	Leon Gibson	EQM	0630
Mark Pitman	Mark Pitman	A+W	0:630

Date: 4/26/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions: Partly s**unny, cool	

SITE ACTIVITIES FOR TODAY – 4/26/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember to watch for ticks.

Equipment Hazards: Heavy equipment will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SAFETY ISSUES and COMMENTS FOR 4/16/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 4/26/2013

Employee Signature	Printed Name	Company	Time
	Brent Hardinger	EQM	0630
	Leon Gibson	EQM	0630
	Scott Boyer	EQM	0630
	Tracy Roach	Sullivan	0630

Date: 4/29/13	**Time:** 07:00	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Overcast; cool; rained over weekend	

SITE ACTIVITIES FOR TODAY – 4/29/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Site preparation	**1**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember to watch for ticks.

Equipment Hazards: Heavy equipment will be operating on site. Stay alert. Ground will be wet from yesterday's rainfall.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 4/~~16~~29/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 4/29/2013

Employee Signature	Printed Name	Company	Time
Tracy R Knoch	TRACEY KOACH	SULLIVAN	0700
Scott Boyer	Scott Boyer	EQM	0700
Leon Gibson	Leon Gibson	Eqm	0700
Brent Hardinger	Brent Hardinger	Eqm	0700
Mark V Pitman	Mark V Pitman	Altwitzig	0700
Craig Hoby	Craig Hoby	Eqm	0715
Kevin Lockamp	Kevin Lockamp	Tetra Tech	1030

Date: 4/30/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Sunny, warm	

SITE ACTIVITIES FOR TODAY – 4/30/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
- Truck Traffic
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Soil Excavation	**2**		
Transportation (loading) and Off-Site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember to watch for ticks.

Equipment Hazards: Heavy equipment will be operating on site. Lots of truck traffic. Be aware.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 4/30/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 4/30/2013

Employee Signature	Printed Name	Company	Time
Tracey Koach	TRACEY KOACH	SULLIVAN	0630
Leon Gibson	Leon Gibson	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Brent Hardinger	Brent Hardinger	EQM	0630
Craig Hoby	Craig Hoby	EQM	0630
Mark Pitman	Mark Pitman	Altwitzig	0800

Date: 5/1/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Sunny, warm	

SITE ACTIVITIES FOR TODAY – 5/1/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
- Truck Traffic
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Soil Excavation	**2**		
Transportation (loading) and Off-Site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember to watch for ticks.

Equipment Hazards: Heavy equipment will be operating on site. Lots of truck traffic. Be aware.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/1/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/1/2013

Employee Signature	Printed Name	Company	Time
Tracy Koach	Tracy Koach	Sullivan	0630
Brent Hardinger	Brent Hardinger	EQM	0630
Leon Gibson	Leon Gibson	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Craig Hoby	Craig Hoby	EQM	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/2/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Sunny, warm	

SITE ACTIVITIES FOR TODAY – 5/2/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
- Truck Traffic
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Soil Excavation	**2**		
Transportation (loading) and Off-Site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember to watch for ticks.

Equipment Hazards: Heavy equipment will be operating on site. Lots of truck traffic. NAVFAC will be in Area 4B today working. Be aware of more workers in this area..

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/2/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/2/2013

Employee Signature	Printed Name	Company	Time
Tracy Koach	TRACEY KOACH	SULLIVAN	0630
Leon Gibson	Leon Gibson	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Brent Hardinger	Brent Hardinger	EQM	0630
Craig Hoby	Craig Hoby	EQM	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/3/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Overcast, warm	

SITE ACTIVITIES FOR TODAY – 5/3/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
- Truck Traffic
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Soil Excavation	**2**		
Transportation (loading) and Off-Site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember to watch for ticks. Be aware of potential thunder storms.

Equipment Hazards: Heavy equipment will be operating on site. Be aware.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/3/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/3/2013

Employee Signature	Printed Name	Company	Time
Tracy Koach	TRACEY KOACH	SULLIVAN	0630
Leon Gibson	Leon Gibson	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Brent Hardinger	Brent Hardinger	EQM	0630
Craig Hoby	Craig Hoby	EQM	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/6/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Overcast, warm; rain	

SITE ACTIVITIES FOR TODAY – 5/6/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
- Truck Traffic
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Soil Excavation	**2**		
Transportation (loading) and Off-Site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Remember to watch for ticks. Rain will make site work slower. Be aware of slipping.

Equipment Hazards: Heavy equipment will be operating on site. Be aware.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/6/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/6/2013

Employee Signature	Printed Name	Company	Time
Tracey Foach	TRACEY FOACH	SULLIVAN	0630
Leon Gibson	Leon Gibson	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Craig Hoby	Craig Hoby	EQM	0630
Brent Hardinger	Brent Hardinger	EQM	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/8/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Clear, sunny, cool (60)	

SITE ACTIVITIES FOR TODAY – 5/8/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/8/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/8/2013

Employee Signature	Printed Name	Company	Time
Tracey Foach	TRACEY FOACH	SULLIVAN	0630
Leon Gibson	Leon Gibson	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Brent Hardinger	Brent Hardinger	EQM	0630
Craig Hoby	Craig Hoby	EQM	0630
Kevin Losekamp	Kevin Losekamp	Tetra Tech	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/9/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy, warm (60-80), Thunderstorms and rain forcasted	

SITE ACTIVITIES FOR TODAY – 5/9/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Severe storms possible. Be alert for lightning and high winds.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SAFETY ISSUES and COMMENTS FOR 5/9/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/9/2013

Employee Signature	Printed Name	Company	Time
Tracey Koach	TRACEY KOACH	SULLIVAN	0630
Leon Gibson	LEON GIBSON	EQM	0630
Brent Hardinger	BRENT HARDINGER	EQM	0630
Scott Boyer	SCOTT BOYER	EQM	0630
Craig Hoby	CRAIG HOBY	EQM	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/10/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy, warm (60-80), Thunderstorms and rain forecasted	

SITE ACTIVITIES FOR TODAY – 5/10/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Severe storms possible. Be alert for lightning and high winds.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SAFETY ISSUES and COMMENTS FOR 5/10/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/10/2013

Employee Signature	Printed Name	Company	Time
	Brent Hardinger	EQM	0630
	Leon Gibson	EQM	0630
	Scott Boyer	EQM	0630
	Craig Hoby	EQM	0630
	TRACEY KOACH	SULLIVAN	0630
	Kevin Loschkamp	Tetra Tech	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/13/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Sunny, warm (67)),	

SITE ACTIVITIES FOR TODAY – 5/13/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Sunscreen might be needed today.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/13/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/13/2013

Employee Signature	Printed Name	Company	Time
Tracy Koach	Tracy Koach	Sullivan	0630
Brent Hardinger	Brent Hardinger	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Leon Gibson	Leon Gibson	EQM	0630
Craig Hoby	Craig Hoby	EQM	0630
Kevin Losekamp	Kevin Losekamp	Tetra Tech	0645

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/14/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Sunny, hot (low 80s))	

SITE ACTIVITIES FOR TODAY – 5/14/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Sunscreen might be needed today. Stay hydrated.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/14/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/14/2013

Employee Signature	Printed Name	Company	Time
Tracy Koach	TRACEY KOACH	SULLIVAN	0630
[signature]	Kevin Loseckamp	Tetra Tech	0630
[signature]	Brent Hartinger	EQM	0630
[signature]	Leon Gibson	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
[signature]	Craig Hoby	EQM	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/15/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Sunny, hot (mid 80s))	

SITE ACTIVITIES FOR TODAY – 5/15/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site (

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Sunscreen might be needed today. Stay hydrated. Watch for heat stress.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/15/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/15/2013

Employee Signature	Printed Name	Company	Time
Tracy A Koach	TRACEY KOACH	SULLIVAN	0630
Leon Gibson	Leon Gibson	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
[illegible]	Brent Hostetler	EQM	0630
Craig Hoby	Craig Hoby	EQM	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/16/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Sunny, hot (mid 80s))	

SITE ACTIVITIES FOR TODAY – 5/1/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Isolated thunderstorms are predicted. Watch for lightening.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/16/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/16/2013

Employee Signature	Printed Name	Company	Time
Tracy Kvach	TRACEY KOACH	SULLIVAN	0630
Brent Hardinger	Brent Hardinger	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Leon Gibson	Leon Gibson	EQM	0630
William Brunstein	William Brunstein	EQM	0645
Kevin Loselkamp	Kevin Loselkamp	Tetra Tech	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/17/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Overcast, hot (80s)), potential thunderstorms	

SITE ACTIVITIES FOR TODAY – 5/17/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Isolated thunderstorms are predicted. Watch for lightening.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SAFETY ISSUES and COMMENTS FOR 5/17/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/17/2013

Employee Signature	Printed Name	Company	Time
Tracy Koach	TRACEY KOACH	SULLIVAN	0630
Leon Gibson	Leon Gibson	EQM	0630
Brad Hardinger	Brad Hardinger	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
William Brewster	William Brewster	EQM	0630
K-Sop	Kevin Loseckamp	Tetra Tech	0700

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/20/13	**Time:** 06:45	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy, hot (80s))	

SITE ACTIVITIES FOR TODAY – 5/20/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/20/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/20/2013

Employee Signature	Printed Name	Company	Time
Tracey Koach	TRACEY KOACH	SULLIVAN	0630
Scott Boyer	Scott Boyer	EQM	0700
Leon Gibson	Leon Gibson	EQM	0700
[illegible]	Brent Harlinger	EQM	0700
Craig Hoby	Craig Hoby	EQM	0700
[illegible]	Kwin Coseckamp	Tetra Tech	0830

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/21/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Overcast, thunderstorms, hot (80s))	

SITE ACTIVITIES FOR TODAY – 5/21/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Severe storms predicted. Watch for lightning.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/21/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/21/2013

Employee Signature	Printed Name	Company	Time
	Brent Hardinger	EQM	0630
	Leon Gibson	EQM	063
	Scott Boyer	EQM	0630
	Tracey Koach	Sullivan	0630
	Craig Hoby	EQM	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/22/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Overcast, thunderstorms, hot (80s))	

SITE ACTIVITIES FOR TODAY – 5/22/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Severe storms predicted. Watch for lightning.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/22/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/22/2013

Employee Signature	Printed Name	Company	Time
Tracey Koach	TRACEY KOACH	SULLIVAN	0630
Leon Gibson	Leon Gibson	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Brent Hardinger	Brent Hardinger	EQM	0630
Kevin Loselcamp	Kevin Loselcamp	Tetra Tech	0630
Craig Holy	Craig Holy	EQM	0700

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/23/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy, hot (80s)	

SITE ACTIVITIES FOR TODAY – 5/23/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/23/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/23/2013

Employee Signature	Printed Name	Company	Time
	Brent Hardinger	EQM	0630
	Scott Boyer	EQM	0630
	Leon Gibson	EQM	0630
	Tracey Koach	Sullivan	0630
	Kevin LoseKamp	Tetra Tech	0630
	Craig Hoby	EQM	0650

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/24/13	**Time:** 07:00	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy, warm (60s)	

SITE ACTIVITIES FOR TODAY – 5/24/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/24/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/24/2013

Employee Signature	Printed Name	Company	Time
Leon Gibson	Leon Gibson	EQM	6:30
Scott Boyer	Scott Boyer	EQM	0630
Brent Hardinger	Brent Hardinger	EQM	0630
Tracy Koach	TRACEY KOACH	SULLIVAN	0630
Craig Hoby	Craig Hoby	EQM	9:00

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/28/13	**Time:** 06:00	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy, hot (80s)	

SITE ACTIVITIES FOR TODAY – 5/28/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Heat stress. Drink plenty of fluids.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/28/13 HK

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area. HK

Date: 5/28/2013

Employee Signature	Printed Name	Company	Time
Scott Boyer	Scott Boyer	EQM	0600
Leon Gibson	Leon Gibson	EQM	0600
Brent Hardinger	Brent Hardinger	EQM	0600
Tracy Koach	TRACEY KOACH	SULLIVAN	0600
KL Sp	Klein Coskamp	Tetra tech	0900

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/29/13	**Time:** 07:00	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy, hot (80s)	

SITE ACTIVITIES FOR TODAY – 5/29/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Heat stress. Drink plenty of fluids.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/29/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/29/2013

Employee Signature	Printed Name	Company	Time
Tracy Koach	Tracy Koach	Sullivan	0700
Scott Boyer	Scott Boyer	EQM	0700
Leon Gibson	Leon Gibson	EQM	0700
Brant Hardinger	Brant Hardinger	EQM	0700
K— S—	Kevin Loseknip	Tetra Tech	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/30/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy, hot (80s)	

SITE ACTIVITIES FOR TODAY – 5/30/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Heat stress. Drink plenty of fluids.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 5/30/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/30/2013

Employee Signature	Printed Name	Company	Time
Tracey Koach	TRACEY KOACH	SULLIVAN	06:30
[illegible]	Brent Hardinger	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Craig Hoby	Craig Hoby	EQM	0630
Leon Gibson	Leon Gibson	EQM	0630
K- BP	Kwin Loschkamp	Tetra Tech	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 5/31/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Overcast, hot (80s), thunderstorms forecasted	

SITE ACTIVITIES FOR TODAY – 5/31/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Heat stress. Drink plenty of fluids.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

1. **(Any concerns, comments, or changes that were brought up from the previous day)**
SAFETY ISSUES and COMMENTS FOR 5/31/13 2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**
REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 5/31/2013

Employee Signature	Printed Name	Company	Time
Tracey Koach	TRACEY KOACH	SULLIVAN	0630
Brent Hardinger	Brent Hardinger	EQM	0630
Leon Gibson	Leon Gibson	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 6/3/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy, warm (70s),	

SITE ACTIVITIES FOR TODAY – 6/3/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Rain over weekend watch for slip hazards.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 6/3/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 6/3/2013

Employee Signature	Printed Name	Company	Time
Tracey Koach	TRACEY KOACH	SULLIVAN	0630
[illegible]	Brad Hardinger	EQM	0630
Leon Gibson	Leon Gibson	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Craig Holy	Craig Holy	EQM	0630
[illegible]	Kevin Loscamp	Tetra Tech	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 6/4/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Sunny, hot (80s),	

SITE ACTIVITIES FOR TODAY – 6/4/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Be aware of heat stress.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 6/4/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 6/4/2013

Employee Signature	Printed Name	Company	Time
Tracy Koach	TRACEY KOACH	SULLIVAN	0630
Scott Boyer	Scott Boyer	EQM	0630
Leon Gibson	Leon Gibson	EQM	0630
Brent Hardinger	Brent Hardinger	EQM	0630
Craig Hoby	Craig Hoby	EQM	0630
Kevin Boseckamp	Kevin Boseckamp	Tetra Tech	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 6/5/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Sunny, hot (80s),	

SITE ACTIVITIES FOR TODAY – 6/5/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Be aware of heat stress.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 6/5/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 6/5/2013

Employee Signature	Printed Name	Company	Time
Tracey Roach	Tracey Roach	Sullivan	0630
Cray Hoby	Cray Hoby	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Leon Gibson	Leon Gibson	EQM	0630
Brent B Hardinger	Brent Hardinger	EQM	0630
K-Bp	Kevin Losekamp	Tetra Tech	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 6/6/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy - overcast, hot (80s)	

SITE ACTIVITIES FOR TODAY – 6/6/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Be aware of heat stress.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 6/6/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 6/6/2013

Employee Signature	Printed Name	Company	Time
Tracy Koach	TRACEY KOACH	SULLIVAN	0630
Leon Gibson	LEON GIBSON	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Brent Harlinger	Brent Harlinger	EQM	0630
Craig Hoby	Craig Hoby	EQM	0630
Kevin Cosekary	Kevin Cosekary	Tetra Tech	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 6/7/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy - overcast, hot (80s)	

SITE ACTIVITIES FOR TODAY – 6/7/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Be aware of heat stress.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 6/7/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 6/7/2013

Employee Signature	Printed Name	Company	Time
Tracy Koach	TRACEY KOACH	SULLIVAN	0630
Leon Gibson	Leon Gibson	EQM	0630
Scott Boyer	Scott Boyer	EQM	0630
Brent Hardinger	Brent Hardinger	EQM	0630
K-Bop	Kevin Loseckamp	Tetra Tech	0630

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 6/10/13	**Time:** 07:00	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy - overcast, possible rain, hot (80s)	

SITE ACTIVITIES FOR TODAY – 6/10/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Be aware of heat stress. Possible rain, be aware of slipping.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SAFETY ISSUES and COMMENTS FOR 6/10/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 6/10/2013

Employee Signature	Printed Name	Company	Time
Tracey Koach	TRACEY KOACH	SULLIVAN	0700
Leon Gibson	Leon Gibson	EQM	0700
Brent Harbinger	Brent Harbinger	EQM	0700
Scott Boyd	Scott Boyd	EQM	0700
Craig Hoby	Craig Hoby	EQM	0700
Kevin Loseke	Kevin Loseke	TetraTech	0800

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 6/11/13	**Time:** 07:00	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Sunny, hot (80s)	

SITE ACTIVITIES FOR TODAY – 6/11/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Transportation (loading) & Off-site Disposal	**3**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
PCBs	**0.5 mg/m^3**	**Dermal**	**Liver; reproductive**	

Environmental and biohazards: Insects. Be aware of heat stress.

Equipment Hazards: Heavy equipment and trucks will be operating on site. Stay alert.

Decontamination:

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 6/11/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: SEATBELTS, Everyone needs to sign the Safety Plan if you have not already. No Smoking except in permitted area.

Date: 6/11/2013

Employee Signature	Printed Name	Company	Time
Tracy Koach	TRACEY KOACH	SULLIVAN	0700
Leon Gibson	Leon Gibson	EQM	0700
Brent Hardinger	Brent Hardinger	EQM	0700
Scott Boyer	Scott Boyer	EQM	0700
Craig Hoby	Craig Hoby	EQM	0700
Kevin Loselamp	Kevin Loselamp	Tetra Tech	0940

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 6/27/13	**Time:** 07:00	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location:** Crane NSA SWMU-17		**Daily Weather Conditions:** Partly cloudy, hot (80s)	

SITE ACTIVITIES FOR TODAY – 6/27/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
None				

Environmental and biohazards: Insects. Be aware of heat stress.

Equipment Hazards: Heavy equipment will be operating on site. Stay alert.

Decontamination: NA

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

1. **(Any concerns, comments, or changes that were brought up from the previous day)**

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

SAFETY ISSUES and COMMENTS FOR 6/27/13

2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**

REMINDER: No Smoking except in permitted area.

Date: 6/27/2013

Employee Signature	Printed Name	Company	Time
Tracey Koach	TRACEY KOACH	SULLIVAN	1600
Craig Hoby	Craig Hoby	EQM	1600
Brent Hardinger	Brent Hardinger	EQM	1600
Leon Gibson	Leon Gibson	EQM	1600

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

Date: 6/28/13	**Time:** 06:30	Project:	**Conducting DTSM**	Tracey Koach
Client: NAVFAC	**Site Location**: Crane NSA SWMU-17		**Daily Weather Conditions:** Partly sunny, hot (80s) and humid	

SITE ACTIVITIES FOR TODAY – 6/28/13

General (Safety Concerns for the Day)

- Equipment operating
- Slip, trip, fall
-
-

Safety Topic or concerns

Activity	AHA #	Activity	AHA #
Excavating	**2**		
Backfill and Restoration	**4**		

Level of Protection: Level D – Hard hats, steel toe boots (safety boots), and eye protection (ANSI Z87.1). PPE need to be worn (excluding inside an enclosed cab)

Physical Hazards:

Chemical Hazards: List of chemicals from the HASP or any additional chemicals discovered or brought on site

Chemical of Concern	PEL/NIOSH/AGCIH	Route of Entry	Target Organs	Signs/Symptoms of Exposure
None				

Environmental and biohazards: Insects. Be aware of heat stress.

Equipment Hazards: Heavy equipment will be operating on site. Stay alert.

Decontamination: NA

Others:

Employee Questions or Comments:

Deficiency and Comments that had occurred from yesterday (DATE) Not applicable

SULLIVAN

Daily Tailgate Safety Meeting (DTSM)
Crane NSA-SWMU17
Crane, Indiana

1. **(Any concerns, comments, or changes that were brought up from the previous day)**
SAFETY ISSUES and COMMENTS FOR 6/28/13 2. **(Updates of activities or changes due to hazards that require changes in activities or amendments that were incorporated during the day)**
REMINDER: No Smoking except in permitted area.

Date: 6/28/2013

Employee Signature	Printed Name	Company	Time
Tracy Koach	TRACEY KOACH	SULLIVAN	0630
Craig Hoby	Craig Hoby	EQM	0630
Brent Hardinger	Brent Hardinger	EQM	0630
Leon Gibson	Leon Gibson	EQM	063

APPENDIX F-1.4

INTERIM MEASURES PHASE 1 SEQ/Vets PHOTOGRAPHS

Crane NSA SWMU 17
Phase 1 Photo Log

Week 2

Photo No.	Date	Description
450	4-23-13	Excavation at marker 140 in Area 4B-1 to 3 ft depth
451	4-23-13	Excavation at marker 140 in Area 4B-1 to 3 ft depth
454	4-23-13	Excavation to depth of 3 ft in Area 4B-1 east of marker 140
460	4-23-13	Excavation approx 50 ft east of marker 140, Area 4B-1 to 3 ft depth
473	4-24-13	Excavation to bedrock at marker 146, Area 4B-2
475	4-24-13	Excavation to bedrock at marker 146, Area 4B-2
482	4-25-13	Excavation to bedrock (2 ft depth) at marker 163-164, Area 4B-1
483	4-25-13	Excavation to bedrock (2 ft depth) at marker 163-164, Area 4B-1
491	4-26-13	Excavation to bedrock (2 ft depth) at marker 162-163, Area 4B-1
492	4-26-13	Excavation to bedrock (2 ft depth) at marker 162-163, Area 4B-1
493	4-26-13	Excavation to bedrock (2 ft depth) at marker 161-162, Area 4B-1
494	4-26-13	Excavation to bedrock (3 ft depth) at marker 160-161, Area 4B-1
496	4-26-13	Excavation to bedrock (4 ft depth) at marker 150-151, Area 4B-1
497	4-26-13	Excavation to bedrock (4 ft depth) at marker 150-151, Area 4B-1
498	4-26-13	Excavation to 4 ft depth at marker 156, Area 4B-50

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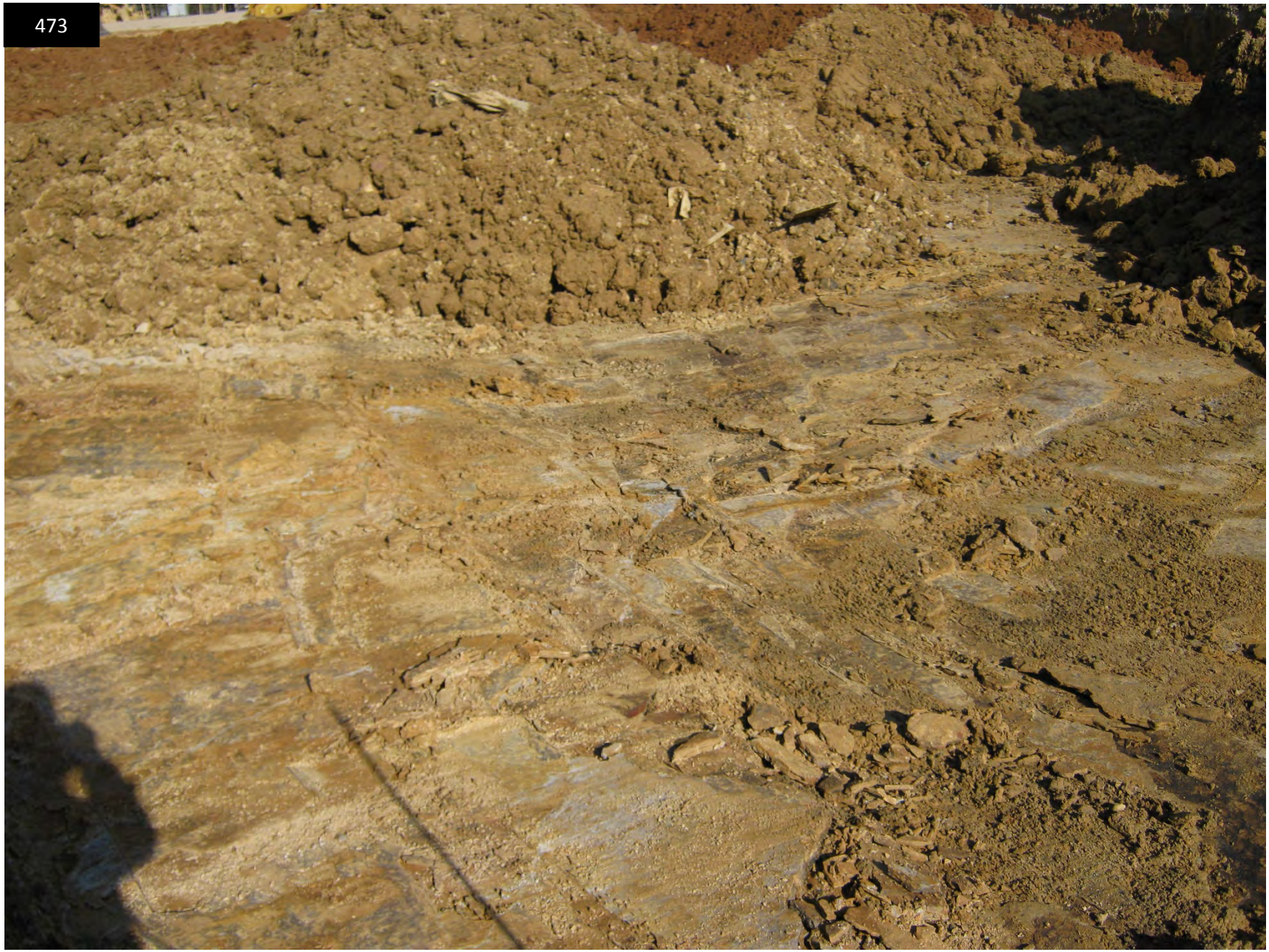

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Crane NSA SWMU 17
Phase 1 Photo Log

Week 3

Photo No.	Date	Description
503	4-29-13	Excavation at marker 174 in Area 4C to 2.5 ft depth (bedrock)
504	4-29-13	Excavation at marker 174 in Area 4C to 2 – 2.5 ft depth (bedrock)
505	4-29-13	Excavation at marker 174 in Area 4C to 2 – 2.5 ft depth (bedrock)
506	4-29-13	Excavation at marker 174 in Area 4C to 2 – 2.5 ft depth (bedrock)
508	4-29-13	Excavation to 2.5 ft depth at marker 173 to south 30 feet, Area 4C
509	4-29-13	Excavation to 2.5 ft depth at marker 173 to south 30 feet, Area 4C
511	4-29-13	Excavation to 2.5 ft depth between marker 172-173, Area 4C
513	4-30-13	Excavation to 2.5 ft depth at marker 176, Area 4C
514	4-30-13	Excavation to 2.5 ft depth at marker 176, Area 4C
515	4-30-13	Excavation to 2.5 ft depth at marker 177, Area 4C
516	4-30-13	Excavation to 2.5 ft depth at marker 177, Area 4C
881	5-1-13	Excavation to 2.5 ft depth, Area 4C
882	5-1-13	Excavation to 2.5 ft depth at marker 165-167, Area 4C
883	5-2-13	Excavation to 2.5 ft depth at marker 171-172, Area 4C
889	5-2-13	Excavation to 2.5 ft depth at marker 169-170, Area 4C
890	5-2-13	Excavation to bedrock (3 ft depth) at marker 137, Area 4A-8

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Crane NSA SWMU 17
Phase 1 Photo Log

Week 4

Photo No.	Date	Description
918	5-8-13	Excavation at marker 130 in Area 4A-8 to 6 ft depth
919	5-8-13	Excavation at marker 130 in Area 4A-8 to 6 ft depth
920	5-8-13	Excavation at marker 130 in Area 4A-8 to 6 ft depth
921	5-8-13	Excavation to 4 ft depth at markers 127-133, Area 4A-9
922	5-8-13	Excavation to 4 ft depth at markers 127-133, Area 4A-9
923	5-8-13	Excavation to 4 ft depth at markers 127-133, Area 4A-9
924	5-8-13	Excavation to 4 ft depth at markers 127-133, Area 4A-9
925	5-8-13	Excavation to 4 ft depth at markers 127,128,132,133, Area 4A-9
926	5-8-13	Excavation to 4 ft depth at markers 127,128,132,133, Area 4A-9
927	5-8-13	Excavation to 4 ft depth at markers 127,128,132,133, Area 4A-9
928	5-8-13	Excavation to 4 ft depth at markers 127,128,132,133, Area 4A-9

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Crane NSA SWMU 17
Phase 1 Photo Log

Week 5

Photo No.	Date	Description
952	5-13-2013	Excavation between markers 129 & 130 to 4 ft depth, Area 4A-9
953	5-13-2013	Excavation between markers 129 & 130 to 4 ft depth, Area 4A-9
954	5-13-2013	Excavation at markers 118, 127, 129 to 7 ft depth, Area 4A-9
955	5-13-2013	Excavation at markers 118, 127, 129 to 7 ft depth, Area 4A-9
956	5-13-2013	Excavation at markers 118, 127, 129 to 7 ft depth, Area 4A-9
957	5-13-2013	Excavation between markers 127 & 128 to 4 ft depth, Area 4A-9
958	5-13-2013	Excavation between markers 127 & 128 to 4 ft depth, Area 4A-9
960	5-14-2013	Excavation between markers 112 & 127 to 7 ft depth, Area 4A-7
962	5-14-2013	Excavation at marker 117 to 7 ft depth, Area 4A-7
964	5-14-2013	Excavation at marker 115 to 7 ft depth, Area 4A-7
965	5-14-2013	Excavation at marker 112 to 7 ft depth, Area 4A-7
966	5-14-2013	Excavation at marker 114 to 7 ft depth, Area 4A-7
967	5-14-2013	Excavation at marker 113 to 7 ft depth, Area 4A-7
973	5-16-2013	Excavation at marker 85 to bedrock (3 ft depth), Area 4A-6
975	5-16-2013	Excavation at marker 84 to bedrock (3 ft depth), Area 4A-6
977	5-16-2013	Excavation at marker 89 to bedrock (5 ft depth), Area 4A-6
978	5-16-2013	Excavation at marker 89 to bedrock (5 ft depth), Area 4A-6
979	5-16-2013	Excavation at marker 90 to bedrock (7.5 ft depth), Area 4A-6
981	5-16-2013	Excavation at marker 91 to bedrock (9.9 ft depth), Area 4A-6

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Crane NSA SWMU 17
Phase 1 Photo Log

Week 6

Photo No.	Date	Description
985	5-20-2013	Excavation at marker 99 in Area 4A-6 to bedrock (4.5 ft depth)
986	5-22-2013	Excavation to bedrock (10 ft depth) between markers 91 and 92, Area 4A-6
987	5-23-2013	Excavation to bedrock (12 ft depth) between markers 94 and 95, Area 4A-6
988	5-23-2013	Decontamination process of excavator, scraping
989	5-23-2013	Decontamination process of excavator, brushing
991	5-23-2013	Decontamination process of excavator, diesel wash
992	5-23-2013	Decontamination process of excavator, washed
993	5-24-2013	Excavation to bedrock (11 ft depth) between markers 92, Area 4A-6
994	5-24-2013	Excavation to bedrock (11 ft depth) between markers 92, Area 4A-6
995	5-24-2013	Excavation to bedrock (11 ft depth) between markers 92, Area 4A-6
996	5-24-2013	Transite pipe encountered in Area 4A-4 at 5.5 ft depth
997	5-24-2013	Tom Brent and Kevin Losekamp measuring assumed length of transite pipe

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Crane NSA SWMU 17
Phase 1 Photo Log

Week 7

Photo No.	Date	Description
1001	5-28-2013	Excavation in Area 4A-5 to 4 ft depth
1002	5-28-2013	Excavation in Area 4A-5 to 4 ft depth
1003	5-28-2013	Excavation in Area 4A-5 to 4 ft depth
1005	5-28-2013	Excavation to 4 ft depth between markers 117 and 118, Area 4A-5
1006	5-28-2013	Excavation to 4 ft depth between markers 117 and 118, Area 4A-5
1007	5-28-2013	Excavation to 4 ft depth at marker 114, Area 4A-5
1008	5-28-2013	Excavation to 4 ft depth at marker 114, Area 4A-5
1009	5-29-2013	Excavation to 4 ft depth at marker 110, Area 4A-5
1010	5-29-2013	Excavation to 4 ft depth at marker 118, Area 4A-5
1012	5-29-2013	Excavation to 4 ft depth at approximately 10 – 12 ft south of marker 119, Area 4A-5
1013	5-29-2013	Excavation to 4 ft depth at approximately 8 ft south of marker 108, Area 4A-5
1015	5-29-2013	Excavation to 4 ft depth at approximately 8 – 10 ft south of marker 119, Area 4A-5
1016	5-29-2013	Excavation to 4 ft depth at approximately 2 ft south of marker 108, Area 4A-5
1017	5-29-2013	Exposed transite pipe in Area 4A-4
1020	5-29-2013	Removed transite pipe on plastic
1021	5-29-2013	Smaller segment of transite pipe extending into corrugated steel pipe in Area 4A-4
1022	5-29-2013	Exposed corrugated steel pipe in Area 4A-4 into Area 4A-3
1023	5-29-2013	Smaller segment of transite pipe extending into corrugated steel pipe in Area 4A-4
1024	5-29-2013	Smaller segment of transite pipe extending into corrugated steel pipe in Area 4A-4
1025	5-29-2013	Removed corrugated steel pipe
1027	5-29-2013	Removed transite pipe on plastic
1029	5-29-2013	Covered transite pipe
1030	5-30-2013	Mavin staff sizing transite pipe in 3-ft sections
1033	5-30-2013	Transite pipe sections secured in plastic for off-site disposal
1034	5-30-2013	Excavation to 6 ft depth in Area 4A-4
1035	5-30-2013	Excavation to 6 ft depth in Area 4A-4
1036	5-30-2013	Excavation to 6 ft depth in Area 4A-4
1037	5-30-2013	Excavation to 6 ft depth in Area 4A-4
1038	5-30-2013	Excavation to 6 ft depth in Area 4A-4
1040	5-30-2013	Diesel wash to decontaminate excavator bucket

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Crane NSA SWMU 17
Phase 1 Photo Log

Week 8

Photo No.	Date	Description
1041	6-3-2013	Excavation to 4 ft depth at marker 100, Area 4A-2
1042	6-3-2013	Excavation to 4 ft depth at 20 feet east of marker 100, Area 4A-2
1043	6-3-2013	Excavation to 4 ft depth at 40 feet east of marker 100, Area 4A-2
1044	6-3-2013	Excavation to 4 ft depth between markers 95 and 99, Area 4A-2
1045	6-3-2013	Excavation to 4 ft depth between markers 95 and 99, Area 4A-2
1046	6-3-2013	Excavation to 4 ft depth between markers 95 and 99, Area 4A-2
1047	6-3-2013	Excavation to 8 ft depth at marker 95, Area 4A-3
1048	6-3-2013	Excavation to 8 ft depth at 5 feet east of marker 101, Area 4A-3
1049	6-3-2013	Excavation to 8 ft depth at 5 feet east of marker 95, Area 4A-3
1050	6-3-2013	Excavation to 8 ft depth at 5 feet east of marker 95, Area 4A-3
1051	6-4-2013	Excavation to 8 ft depth at marker 102, Area 4A-3
1052	6-4-2013	Excavation to 8 ft depth at marker 102, Area 4A-3
1058	6-4-2013	Excavation to 4 ft depth at marker 119, Area 4A-5
1059	6-4-2013	Broken concrete sewer pipe in excavation in Area 4A-5
1060	6-4-2013	Excavation to bedrock (7.5 ft depth), Area 4A-10
1061	6-4-2013	Soil sample collection from west wall of Area 4A-10.
1062	6-4-2013	Excavation to 8 ft depth along east wall, Area 4A-3
1063	6-4-2013	Excavation to 8 ft depth along east wall, Area 4A-3
1064	6-4-2013	Excavation to bedrock in Area 4A-1
1065	6-5-2013	Excavation to 2 ft depth at Area 4D
1066	6-5-2013	Excavation to bedrock (1.5 – 2.5 ft depth), Area 4A-1
1067	6-5-2013	Excavation to bedrock (1.5 – 2.5 ft depth), Area 4A-1
1068	6-5-2013	Excavation to 4 ft depth at markers 125 and 126, Area 4A-5
1069	6-5-2013	Excavation to 4 ft depth at markers 125 and 126, Area 4A-5
1070	6-5-2013	Excavation to 4 ft depth at markers 125 and 126, Area 4A-5
1071	6-5-2013	Excavation to 4 ft depth at markers 125 and 126, Area 4A-5
1072	6-5-2013	Excavation to 4 ft depth at markers 125 and 126, Area 4A-5
1073	6-5-2013	Cleaning of stormwater pipe in excavation in Area 4D
1075	6-5-2013	Excavation to 8 ft depth, Area 4A-3
1076	6-5-2013	Excavation to 8 ft depth, Area 4A-3
1077	6-5-2013	Excavation to 8 ft depth, Area 4A-3
1078	6-5-2013	Concrete plug in concrete pipe in Area 4D
1080	6-5-2013	Excavation to 8 ft depth, Area 4A-3
1081	6-6-2013	Excavation to 4 ft depth at markers 123 and 124, Area 4A-5
1082	6-6-2013	Excavation to 4 ft depth at markers 123 and 124, Area 4A-5
1086	6-7-2013	Excavation to 4 ft depth between markers 104 and 105, Area 4A-5
1087	6-7-2013	Excavation to 4 ft depth between markers 104 and 105, Area 4A-5
1088	6-7-2013	Excavation to 4 ft depth at markers 120, 121, and 122, Area 4A-5
1089	6-7-2013	Excavation to 4 ft depth at markers 120, 121, and 122, Area 4A-5

1090	6-7-2013	Excavation to 4 ft depth at markers 120, 121, and 122, Area 4A-5
1091	6-7-2013	Excavation to bedrock (8.2 ft depth) at marker 105, Area 4A-10
1092	6-7-2013	Excavation to 4 ft depth along road, Area 4A-5
1093	6-7-2013	Excavation to 4 ft depth at marker 119, Area 4A-5

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APPENDIX F-2

VRHK-Habilis DAILY FIELD REPORTS

(Production Reports, Quality Control Reports, Tailgate Safety Meetings Arranged by Day)

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II	001

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Sunny	45	18

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversite	VRHK	1	Superintendent	10
	SWMU 17 / Project safety oversite	VRHK	1	Site Health and Safety Specialist	1
	SWMU 17 / Perform clearing and grubbing	VRHK	2	Labor	20

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 31
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 0
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 31

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Initial Site Safety Brief performed by the Site Health and Safety Specialist.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (incl Make and Model)	Hours Used

Schedule Activity No.	REMARKS
	Commenced clearing and grubbing of the haul routes adjacent to Ditch 8, the Northwest Ditch and 800 feet of Ditch 3 from the gate 9 access road to the power line
	corridor. Felled the following approximate number and diameter of trees: (300) 2"-3", (175) 3"-5", (15) 8"-10", (1) 20".

Paul Baril — CONTRACTOR/SUPERINTENDENT

06 March 2014 — DATE

SWMU 17 Phase II - Contractor Daily Report Photographs 07 Mar 2014

Commence clearing & grubbing at SWMU 17

Felling trees in Ditch 3

Northwest Ditch facing southeast

Felled trees in Northwest Ditch facing southeast

Cleared haul route in Northwest Ditch facing SE

Felled trees in haul route along Ditch 3 facing E

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 06 March 2014
REPORT NO: 001

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☒ NO ☐

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
	Clearing and Grubbing	

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☒ NO ☐

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
	Clearing and Grubbing	

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☐ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☐ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description

Paul Baril — AUTHORIZED QC MANAGER AT SITE

06 March 2014 — DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

KEMRON
ENVIRONMENTAL SERVICES

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 3/6/2014

Location: CRANE IN **Presented by:** D. Patton

Check the Topics/Information Reviewed:

- ✓ Daily work scope reviewed
- ✓ safety is everyone=s responsibility
- ✓ site health and safety plan reviewed
- ✓ safety glasses, hard hat, safety boots
- ✓ employee Right-To- Know/MSDS location
- ✓ vehicle safety and driving/road conditions
- ✓ hazard analysis for all tasks or new technology
- ✓ chemical hazards
- ✓ first aid, safety, and PPE location
- ✓ sharp object, rebar, and scrap metal hazards
- ✓ latex gloves inner/nitrile gloves outer
- o open pits, excavations, and trenching hazards
- o excavation/trenching inspections/documentation
- o full face respirators with proper cartridges
- o upgrade to Level C at: Work in Level C
- o work stoppage at: _____
- o portable tool safety and awareness
- ✓ slips, trips, and falls
- ✓ strains and sprains
- o anticipated visitors
- o electrical ground fault
- o public safety and fences
- o excavator swing and loading
- ✓ orderly site and housekeeping
- ✓ smoking in designated areas
- ✓ leather gloves for protection
- ✓ effects of the night before? Rain or snow?
- ✓ vibration related injuries
- ✓ noise hazards
- o confined space entry
- o hot work permits
- o overhead utility locations cleared?
- o all underground utilities cleared?
- o equipment and machinery familiarization
- ✓ fire extinguisher locations
- ✓ eye wash station locations
- ✓ directions to hospital
- ✓ heat and cold stress
- o decontamination steps
- ✓ review emergency protocol
- ✓ parking and laydown area
- ✓ vehicle backing up hazards
- ✓ accidents can be costly
- ✓ no horse play
- o dust and vapor control
- ✓ refueling procedures
- o flying debris hazards
- o poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
David Patton		VRH
Paul Baker		VRH
Bryan Johnson		VRH
James A Reish		VRH

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	002

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	54	25

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10.5
	SWMU 17 / Perform clearing and grubbing of haul routes	VRHabilis	2	Labor	21

JOB SAFETY

			TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	31.5
WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO		
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	31
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO		
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION	62.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Site control established.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used

Schedule Activity No.	REMARKS
	Continued clearing and grubbing along Ditch 8 and Northwest Ditch. Removed and consolidated felled trees, cut debris and dead fall from haul routes.
	Felled the following approximate number and diameter of trees: (60) 1/2"-2", (10) 2"-4", (12) 6"-8", (14) 10"-14", (4) 16"-18".
	Installed marking tape to define the boundaries in TSCA and Non-TSCA areas along Ditch 8, the Northwest Ditch and the SE portion of Ditch 3.

Paul Baril — CONTRACTOR/SUPERINTENDENT

07 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07 March 2014
REPORT NO: 002

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of haul routes along Ditch 8 and the Northwest Ditch.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No discrepancies or safety violations noted.

Paul Baril — 07 March 2014

AUTHORIZED QC MANAGER AT SITE — DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7 March 2014

Location: Naval Support Activity Crane **Presented by:** Paul Baril

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [x] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [x] chemical hazards – PCB
- [x] first aid, safety, and PPE location
- [x] sharp object, rebar, and scrap metal hazards
- [x] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [x] portable tool safety and awareness
- [x] slips, trips, and falls
- [x] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [x] orderly site and housekeeping
- [x] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [x] vibration related injuries
- [x] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [x] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [x] fire extinguisher locations
- [x] eye wash station locations
- [x] directions to hospital
- [ ] heat and cold stress
- [x] decontamination steps
- [x] review emergency protocol
- [x] parking and laydown area
- [x] vehicle backing up hazards
- [x] accidents can be costly
- [x] no horse play
- [x] dust and vapor control
- [x] refueling procedures
- [x] flying debris hazards
- [ ] poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Paul Baril		URHC
James A Register		URHC
Bryan Johnson		URHC

Instructions:

Conduct a daily safety meeting prior to beginning each day=s site activities.
Complete form, obtain signatures, and file with the Daily Summary.
Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 07 Mar 2014

Marking TSCA and Non-TSCA areas in Ditch 3

Non-TSCA area boundary established in Ditch 3

Tag line applied to tree to assist in directional fall

Tree successfully felled

Cutting trees along haul route along NW Ditch

Felled trees in haul route along Ditch 3 facing E

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 10 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	003

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	62	36

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Perform clearing and grubbing	VRHabilis	2	Labor	20

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	30
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	31.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	92.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre operational PPE and equipment inspections.	
	Performed site safety inspection. Observed and noted trip hazards which were removed.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used

Schedule Activity No.	REMARKS
	Commenced clearing and grubbing in TSCA and No-TSCA areas in Ditch 8b, the Northwest Ditch haul route and Ditch 3-stream segment 2. Removed and consolidated felled trees and cut debris.
	Felled the following approximate number and diameter of trees: (20) 2"-4", (26) 5"-7", (14) 8"-10", (9) 11"-14", (2) 15"-18", (1) 20", (1) 24".

Paul Baril — CONTRACTOR/SUPERINTENDENT

10 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 10 March 2014
REPORT NO: 003

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of TSCA and Non-TSCA areas in Ditch 8b, Ditch 3-stream segment 2 near southeast culvert and the Northwest Ditch haul route.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan discrepancies noted. Minor trip hazards identified and removed.

Paul Baril — AUTHORIZED QC MANAGER AT SITE

10 March 2014 — DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 3/10/2014

Location: Naval Support Activity Crane **Presented by:** David O. Patton

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☑ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☑ orderly site and housekeeping
- ☑ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☑ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☑ decontamination steps
- ☑ review emergency protocol
- ☑ parking and laydown area
- ☑ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☑ dust and vapor control
- ☑ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
David O. Patton		VRHK
[illegible]		VRHK
James A Reynolds		VRHK
Bryan Johnson		VRHK

Instructions:

- # Conduct a daily safety meeting prior to beginning each day=s site activities.
- # Complete form, obtain signatures, and file with the Daily Summary.
- # Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 10 Mar 2014

Conducting pre-operational equipment checks

Use of drip pan while refueling

Felled trees in Non TSCA area of Ditch 8b

Trees felled along haul route of the NW Ditch

Felled trees in Non TSCA area of Ditch 3 facing E

Felled trees in Non TSCA area of Ditch 3 facing W

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 11 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	004

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	72	39

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Perform clearing and grubbing	VRHabilis	2	Labor	20

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	30
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	31.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	122.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Personnel performed pre operational PPE and equipment inspections.
	Performed site safety inspection. No discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	Bobcat 320 skidsteer	0
	VRHabilis	Bobcat 300 skidsteer	0

Schedule Activity No.	REMARKS
	Recommenced felling trees in Ditch 3-stream segment 2 primarily using tag lines to control the descent path of the cut trees. Removed and consolidated felled trees and cut debris.
	Felled the following approximate number and diameter of trees: (40) 1"-2", (5) 5"-10", (9) 11"-14", (6) 15"-18".

Paul Baril — CONTRACTOR/SUPERINTENDENT

11 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 11 March 2014
REPORT NO: 004

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of TSCA and Non-TSCA areas in Ditch 3-stream segment 2.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril — 11 March 2014

AUTHORIZED QC MANAGER AT SITE — DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 11 March 2012

Location: Naval Support Activity Crane **Presented by:** Paul Baril

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☑ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☑ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☑ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☑ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☑ orderly site and housekeeping
- ☑ smoking in designated areas
- ☑ leather gloves for protection
- ☑ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☑ heat and cold stress
- ☑ decontamination steps
- ☑ review emergency protocol
- ☑ parking and laydown area
- ☑ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☑ dust and vapor control
- ☑ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BARIL		URHK
James A. Register		VRHK
Bryan Johnson		VRHK

Instructions:

Conduct a daily safety meeting prior to beginning each day=s site activities.
Complete form, obtain signatures, and file with the Daily Summary.
Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 11 Mar 2014

Receiving additional forestry equipment from HQ

Transferring forestry equipment to SWMU 17

Preparing to commence work in Ditch 3

Removing limbs from felled trees

Using tag lines to control felled tree descent path

Post operational equipment maintenance

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	12 March 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	005	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul Baril	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Light rain	Overcast	62	34

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Perform clearing and grubbing	VRHabilis	2	Labor	20

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	30
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	122.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	152.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	Bobcat 320 skidsteer	0
	VRHabilis	Bobcat 300 skidsteer	0

Schedule Activity No.	REMARKS
	Commenced tree felling on Boggs Creek. Removed and consolidated felled trees and cut debris.
	Felled the following approximate number and diameter of trees: (117) 1"-5", (23) 6"-10", (13) 11"-15", (7) 15"-20, (1) 26".

Paul Baril — CONTRACTOR/SUPERINTENDENT

12 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 12 March 2014
REPORT NO: 005

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of Non-TSCA areas in Boggs Creek.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril — 12 March 2014

AUTHORIZED QC MANAGER AT SITE — DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 03/12/14

Location: Naval Support Activity Crane **Presented by:** PAUL BAZER

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [x] chemical hazards -PCB's
- [x] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [x] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [x] fire extinguisher locations
- [ ] eye wash station locations
- [x] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [x] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BAZER	Paul Bazer	URHK
James A Register	James A Register	URHK
Bryan Johnson	Bryan Johnson	URHK

Instructions:

Conduct a daily safety meeting prior to beginning each day=s site activities.
Complete form, obtain signatures, and file with the Daily Summary.
Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 12 Mar 2014

Pre operational equipment checks

CARDNO restoration consultants on site

Trees felled at Boggs Creek

Felled trees near southern culvert

Overview of Boggs Creek

Preparing to fell 26” tree at Boggs Creek

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	13 March 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	006	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul Baril	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	45	22

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Perform clearing and grubbing	VRHabilis	2	Labor	20

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	30
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	152.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	182.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	Bobcat 320 skidsteer	0
	VRHabilis	Bobcat 300 skidsteer	0

Schedule Activity No.	REMARKS
	Resumed tree felling on Boggs Creek. Resumed tree felling in Ditch 3 to power line corridor west of the EOD building. Removed and consolidated felled trees and cut debris.
	Felled the following approximate number and diameter of trees: (45) 1”-5”, (12) 6”-10”, (8) 11”-15”, (4) 15”-20, (2) 26”, (1) 28”.

Paul Baril — CONTRACTOR/SUPERINTENDENT

13 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 13 March 2014
REPORT NO: 006

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of Non-TSCA areas in Boggs Creek and Ditch 3 up to the power line corridor west of the EOD building..

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril — 13 March 2014

AUTHORIZED QC MANAGER AT SITE — DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 13 MARCH 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BAKER

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☑ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☑ sharp object, rebar, and scrap metal hazards
- ☑ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☑ orderly site and housekeeping
- ☑ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☑ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☑ parking and laydown area
- ☑ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☑ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BAKER		VRHK
James A Register		VRHK
Bryan Johnson		VRHK

Instructions:

Conduct a daily safety meeting prior to beginning each day=s site activities.
Complete form, obtain signatures, and file with the Daily Summary.
Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 13 Mar 2014

Pre operational site safety inspection

Resumed tree felling operations on Ditch 3.

Installing tag line to control tree fall descent

Tree felling in Boggs Creek

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	14 March 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	007	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul Baril	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Overcast	62	37

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Perform clearing and grubbing	VRHabilis	2	Labor	20

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	30
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	182.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	212.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Personnel performed pre operational PPE and pre op equipment inspections on chainsaws and the Bobcat 300 skid steer..
	Performed site safety inspection. No discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	Bobcat 320 skidsteer	0
	VRHabilis	Bobcat 300 skidsteer	0

Schedule Activity No.	REMARKS
	Clearing and grubbing of TSCA area west of the power line corridor from highway 5 and the Non-TSCA ox bow area west of the EOD building.
	Felled the following approximate number and diameter of trees: (300) 1”-5”, (2) 6”-10”, (1) 11”-15”.

Paul Baril — 14 March 2014

CONTRACTOR/SUPERINTENDENT — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 14 March 2014
REPORT NO: 007

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of TSCA area west of the power line corridor from highway 5 and the Non-TSCA ox bow area west of the EOD building.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril — AUTHORIZED QC MANAGER AT SITE

14 March 2014 — DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 14 MAR 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BAKER

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☑ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☑ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☑ orderly site and housekeeping
- ☑ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☑ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☑ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☑ review emergency protocol
- ☑ parking and laydown area
- ☑ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☑ dust and vapor control
- ☑ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BAKER		VRHK
James A Reyna		VRHK
Bryan Johnson		VRHK

Instructions:

- # Conduct a daily safety meeting prior to beginning each day=s site activities.
- # Complete form, obtain signatures, and file with the Daily Summary.
- # Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 14 Mar 2014

Reinstalling stakes following winter freeze

TSCA area west of power line taped off

Extremely dense brush encountered in “ox bow”

Cutting dense brush in ox bow Non TSCA area

Dense brush set aside for transit to next area

Pre op checks on Bobcat prior to brush cutting

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 17 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	008

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Overcast	41	24

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Perform clearing and grubbing	VRHabilis	2	Labor	20

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	30
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	212.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	242.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	Bobcat 320 skidsteer	0

Schedule Activity No.	REMARKS
	Clearing and grubbing of the Non-TSCA ox bow area and the 3N Non-TSCA area west of the EOD building.
	Felled the following approximate number and diameter of trees: (375) 1”-5”, (2) 6”-10”, (3) 11”-15”, (1) 26”.
	Installed 200 feet of erosion control measures along the haul road on Ditch 3 east of the power line corridor.

Paul Baril — CONTRACTOR/SUPERINTENDENT

17 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 17 March 2014
REPORT NO: 008

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of the Non-TSCA ox bow area and the 3N Non-TSCA area west of the EOD building.
	Felled the following approximate number and diameter of trees: (375) 1”-5”, (2) 6”-10”, (3) 11”-15”, (1) 26”.
	Installed 200 feet of erosion control measures along the haul road on Ditch 3 east of the power line corridor.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril
AUTHORIZED QC MANAGER AT SITE — 17 March 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 17 MAR 2014

Location: Naval Support Activity Crane **Presented by:**

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☑ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☑ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☑ excavator swing and loading
- ☑ orderly site and housekeeping
- ☑ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☑ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☑ all underground utilities cleared? YES
- ☑ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☑ review emergency protocol
- ☐ parking and laydown area
- ☑ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☑ dust and vapor control
- ☐ refueling procedures
- ☑ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BAKER		VRHK
James Reidy		VRHK
Bryan Johnson		VRHK

Instructions:

Conduct a daily safety meeting prior to beginning each day=s site activities.
Complete form, obtain signatures, and file with the Daily Summary.
Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 17 Mar 2014

Performing pre op checks on chainsaws

Removing dense brush in the ox bow area

Extremely dense brush ox bow felled

Haul route brush felled facing west along ox bow

26” tree felled in plain area 3N

Post op maintenance performed on chainsaw

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 18 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	009

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Partly cloudy	49	27

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Perform clearing and grubbing	VRHabilis	2	Labor	20

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	30
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	242.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	272.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	Bobcat 320 skidsteer	0

Schedule Activity No.	REMARKS
	Clearing and grubbing of the flood plains 3J, 3N.
	Felled the following approximate number and diameter of trees: (300) 1”-5”, (2) 6”-10”, (8) 11”-15”, (1) 24”.

Paul Baril — CONTRACTOR/SUPERINTENDENT

18 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 18 March 2014
REPORT NO: 009

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of the flood plains 3J, 3N.
	Felled the following approximate number and diameter of trees: (300) 1”-5”, (2) 6”-10”, (8) 11”-15”, (1) 24”.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril
AUTHORIZED QC MANAGER AT SITE — 18 March 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 18 MARCH 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BAKER

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☑ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☑ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☑ orderly site and housekeeping
- ☑ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☑ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☑ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☑ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☑ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☑ dust and vapor control
- ☑ refueling procedures
- ☑ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BAKER	P. Baker	VRHK
Bryan Johnson	Bryan Johnson	VRHK
James A Register	James A Register	VRHK

Instructions:

- # Conduct a daily safety meeting prior to beginning each day=s site activities.
- # Complete form, obtain signatures, and file with the Daily Summary.
- # Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 18 Mar 2014

Performing pre op checks on chainsaws

Dense brush removed from flood plain 3J-Ditch 3

Last tree standing in ox bow area

Flood plain 3N-Ditch 3, segment 5

Installed boundary tape in flood plain 3K

TSCA flood plain 3L

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 19 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	010

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Overcast with light rain	53	38

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Perform clearing and grubbing	VRHabilis	2	Labor	20

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	30
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	272.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	302.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	Bobcat 320 skidsteer	1

Schedule Activity No.	REMARKS
	Clearing and grubbing of the haul routes and stream segment 6 south of the EOD building.
	Felled the following approximate number and diameter of trees: (225) 1”-5”, (4) 6”-10”, (5) 11”-15”, (2) 18”.

Paul Baril — CONTRACTOR/SUPERINTENDENT

19 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 19 March 2014
REPORT NO: 010

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of the haul routes and stream segment 6 south of the EOD building.
	Felled the following approximate number and diameter of trees: (225) 1”-5”, (4) 6”-10”, (5) 11”-15”, (2) 18”.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril
AUTHORIZED QC MANAGER AT SITE — 19 March 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 19 MARCH 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BARIL

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☑ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☑ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☑ orderly site and housekeeping
- ☑ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☑ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☑ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☑ dust and vapor control
- ☑ refueling procedures
- ☑ flying debris hazards
- ☑ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BARIL		VRHK
Bryan Johnson		VRHK
James A. Register		VRHK

Instructions:

Conduct a daily safety meeting prior to beginning each day=s site activities.
Complete form, obtain signatures, and file with the Daily Summary.
Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 19 Mar 2014

Performing pre op checks on chainsaws

Equipment staged to commence grubbing

Haul path grubbed via mechanical forestry head

Cleared and grubbed area south of EOD building

Cleared and grubbed area south of EOD building(1)

EOD building visible in distance through route

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	20 March 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	011	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul Baril	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear to partly cloudy	59	29

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Supervise clearing and grubbing of trees/brush	VRHabilis	1	Staff Arborist	10
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	2	Labor	20

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☒ YES	☐ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	40
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	302.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	342.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Personnel performed pre-operational PPE and equipment inspections. Performed safety inspection on tree climbing equipment and rescue equipment.
	Performed site safety inspection. No discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	Bobcat 320 skidsteer	3

Schedule Activity No.	REMARKS
	Clearing and grubbing of the haul routes and stream segment 6 south of the EOD building.
	Felled the following approximate number and diameter of trees: (400) 1”-5”, (24) 6”-10”, (4) 11”-15”, (4) 16”-20”.
	Track Truck high work performed by authorized tree removal subcontractor.
	High work performed for tree top removal at Boggs Creek.

Paul Baril — CONTRACTOR/SUPERINTENDENT

20 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 20 March 2014
REPORT NO: 011

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of the haul routes and stream segment 6 south of the EOD building.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril — AUTHORIZED QC MANAGER AT SITE — 20 March 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 20 MARCH 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BAUER

Check the Topics/Information Reviewed:

- ☐ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☐ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☐ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☐ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BAUER		URS
James A Register		URS
Bryan Schnese		URS
Scott Allegra		URS

Instructions:

- # Conduct a daily safety meeting prior to beginning each day=s site activities.
- # Complete form, obtain signatures, and file with the Daily Summary.
- # Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 20 Mar 2014

Subcontractor felling trees near power lines –D8

Tree removal complete at Ditch 8a

Haul path grubbed via mechanical forestry head

Cleared and grubbed area south of EOD building

Performing high tree work at Boggs Creek

Post operational equipment maintenance

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 21 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	012

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	68	45

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Supervise clearing and grubbing of trees/brush	VRHabilis	1	Staff Arborist	10
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	3	Labor	25.25

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☒ YES	☐ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	45.25
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	342.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	387.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	Bobcat 320 skidsteer	1

Schedule Activity No.	REMARKS
	Clearing and grubbing of the haul routes and stream segment 6 south of the EOD building.
	Felled the following approximate number and diameter of trees: (10) 1"-5", (5) 6"-10", (4) 11"-15", (8) 16"-20", (4) 21"-25"
	Logsdon & Son, LLC, tree removal sub-contractor removed trees adjacent to power lines using a boom truck.

Paul Baril — CONTRACTOR/SUPERINTENDENT

21 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 21 March 2014
REPORT NO: 012

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of the haul routes and stream segment 6 south of the EOD building.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril — 21 March 2014

AUTHORIZED QC MANAGER AT SITE — DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 21 MARCH 2014

Location: Naval Support Activity Crane **Presented by:** PINL BMR

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [x] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [x] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [x] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [x] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PINL BMR		VRHK
James A Rogers		VRHK
Bryan Schwan		VRHK
Scott Alegna		VRHK
Max O'Mera		VRH
Ron Madden		VRH

Instructions:

- # Conduct a daily safety meeting prior to beginning each day=s site activities.
- # Complete form, obtain signatures, and file with the Daily Summary.
- # Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 21 Mar 2014

VRH tree removal crew working at NW Ditch

CARDNO stream restoration consultants on site

CARDNO personnel converse at Boggs Creek

Logsdon contractor felling trees near power lines

Logsdon contractor felling trees near power lines

Felling 28 inch tree across from ox bow at Ditch 3

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 24 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	013

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	39	20

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Staff Arborist	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☒ YES	☐ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	20
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	387.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	407.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED
	All personnel attended Site Safety meeting.
	Personnel performed pre-operational PPE and equipment inspections.
	Performed site safety inspection. No discrepancies noted.

☒ SAFETY REQUIREMENTS HAVE BEEN MET.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	John Deere 50D Excavator	2

Schedule Activity No.	REMARKS
	Clearing and grubbing of trees and brush at the haul route at Boggs Creek.
	Logsdon & Son, LLC, tree removal sub-contractor removed one dead tree in Boggs Creek using boom truck and felled one partially dead shag bark hickory in Ditch 3-segment 6.
	Tetra Tech Representative conducted clearing and grubbing site inspection. No discrepancies noted and all work completed was IAW the work Plan.

Paul Baril — CONTRACTOR/SUPERINTENDENT

24 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 22 March 2014
REPORT NO: 013

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of trees and brush at the haul route at Boggs Creek.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	Logsdon & Son, LLC, tree removal sub-contractor removed one dead tree in Boggs Creek using boom truck and felled one partially dead shag bark hickory in Ditch 3-segment 6.
	Tetra Tech Representative conducted clearing and grubbing site inspection. No discrepancies noted and all work completed was IAW the work Plan.

Paul Baril — AUTHORIZED QC MANAGER AT SITE — 24 March 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 24 MARCH 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BAKER

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☑ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☑ excavator swing and loading
- ☑ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☑ parking and laydown area
- ☐ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☑ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BAKER		URHK
Scott Alogna	S. T. Alogna	URHK

Instructions:

Conduct a daily safety meeting prior to beginning each day=s site activities.
Complete form, obtain signatures, and file with the Daily Summary.
Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 24 Mar 2014

Logsdon contractor felling tree top at Boggs Creek

Logsdon contractor stripping dead tree

Final felling of dead tree Boggs Creek

Logsdon contractor felling tree at NW Ditch

Logsdon felling partially dead tree at Ditch 3-S6

VRH clearing haul route at Boggs Creek

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 25 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	014

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Light snow	Mostly cloudy	36	28

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Staff Arborist	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	20
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	407.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	427.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	John Deere 50D Excavator	6

Schedule Activity No.	REMARKS
	Clearing and grubbing of felled trees and brush at the haul routes at Boggs Creek, Ditch 3-segment 6 south of the EOD building and installed an ATV path above the haul route south of the power line corridor.

Paul Baril — CONTRACTOR/SUPERINTENDENT

25 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 25 March 2014
REPORT NO: 014

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Clearing and grubbing of felled trees and brush at the haul routes at Boggs Creek, Ditch 3-segment 6 south of the EOD building and installed an ATV path above the haul route south of the power line corridor.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril
AUTHORIZED QC MANAGER AT SITE — 25 March 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 25 MARCH 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BARR

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☑ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☑ excavator swing and loading
- ☑ orderly site and housekeeping
- ☑ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☑ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☑ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☑ heat and cold stress
- ☐ decontamination steps
- ☑ review emergency protocol
- ☑ parking and laydown area
- ☑ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☑ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BARR	Paul Barr	VRHK
Scott Alagna	J. J. Alagna	VRHK

Instructions:

- # Conduct a daily safety meeting prior to beginning each day=s site activities.
- # Complete form, obtain signatures, and file with the Daily Summary.
- # Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 25 Mar 2014

Clearing access path at Boggs Creek

Examining dead tree at Ditch 3 segment 6

Felling dead tree

Clearing dead wood at Ditch 3 segment 6

Removing stump in haul route at segment 6 D-3

Installing ATV path above haul route at Ditch 3 S2

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 26 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	015

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	43	17

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Staff Arborist	10
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Equipment Operator	3.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☒ YES	☐ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	23.5
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	427.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	451.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	John Deere 50D Excavator	3

Schedule Activity No.	REMARKS
	Logsdon & Son, LLC, tree removal sub-contractor removed one dead tree and felled four trees adjacent to power lines directly behind the EOD building on Ditch 3-segment 6.
	VRH conducted clearing and grubbing of the haul routes located on CARDNO Work Plan drawing 2.6 from 40+00 to 42+.50.
	Felled the following approximate number and diameter of trees: (3) 8", (1) 18".

Paul Baril — CONTRACTOR/SUPERINTENDENT

26 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 26 March 2014
REPORT NO: 015

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	VRH conducted clearing and grubbing of the haul routes located on CARDNO Work Plan drawing 2.6 from 40+00 to 42+.50.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril
AUTHORIZED QC MANAGER AT SITE — 26 March 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 26 MARCH 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BARIL

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☑ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☑ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☑ orderly site and housekeeping
- ☑ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☑ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☑ parking and laydown area
- ☑ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☐ dust and vapor control
- ☑ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BARIL		VRHK
Scott Alagna		VRHK
John Snyder		VRHK

Instructions:

- # Conduct a daily safety meeting prior to beginning each day=s site activities.
- # Complete form, obtain signatures, and file with the Daily Summary.
- # Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 26 Mar 2014

Logsdon contractor booming to tree top

60 feet above the ground behind the EOD BLDG

Remains of topped and felled tree

Clearing dead wood and dead tree

VRH felling trees in the haul path of Ditch 3 - S2

Stock piling brush and logs from haul path

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 27 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	016

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Overcast	58	33

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Staff Arborist	10
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Equipment Operator	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	30
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	451.25
TOTAL WORK HOURS FROM START OF CONSTRUCTION	481.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	John Deere 50D Excavator	9

Schedule Activity No.	REMARKS
	VRH conducted clearing and grubbing of the haul routes located on CARDNO Work Plan drawing 2.6 from 42+00 to 47+.50.
	Felled the following number and diameter of trees: (2) 5”-10”, (3) 11”-15”, (3) 20”-26”.

Paul Baril — CONTRACTOR/SUPERINTENDENT

27 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 27 March 2014
REPORT NO: 016

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	VRH conducted clearing and grubbing of the haul routes located on CARDNO Work Plan drawing 2.6 from 42+00 to 47+.50.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril — AUTHORIZED QC MANAGER AT SITE — 27 March 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 27 MARCH 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BAKER

Check the Topics/Information Reviewed:

- ☐ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☐ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☐ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☐ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BAKER		VRHK
John Snyder		VRHK
Scott Bloyer		VRHK

Instructions:

- # Conduct a daily safety meeting prior to beginning each day=s site activities.
- # Complete form, obtain signatures, and file with the Daily Summary.
- # Follow-up on any noted items and document resolution of any action items.

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 28 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	017

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Clear	55	45

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	11
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Staff Arborist	11
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Equipment Operator	11

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	33
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	481.25
TOTAL WORK HOURS FROM START OF CONSTRUCTION	514.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	John Deere 50D Excavator (final hours – 2962.6)	8.5

Schedule Activity No.	REMARKS
	VRH conducted clearing and grubbing of the haul route at the Northwest Ditch.
	Felled the following number and diameter of trees: (10) 1”-5”

Paul Baril — CONTRACTOR/SUPERINTENDENT

28 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 28 March 2014
REPORT NO: 017

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	VRH conducted clearing and grubbing of the haul route at the Northwest Ditch.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril
AUTHORIZED QC MANAGER AT SITE — 28 March 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 28 MARCH 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BARTL

Check the Topics/Information Reviewed:

- ☐ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☐ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☐ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☐ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BARTL		VR+A
Scott Alagna		VR+A
John Snyder		VRHK

Instructions:

- # Conduct a daily safety meeting prior to beginning each day=s site activities.
- # Complete form, obtain signatures, and file with the Daily Summary.
- # Follow-up on any noted items and document resolution of any action items.

SWMU 17 Phase II - Daily Contractor Report Photographs - 28 Mar 2014

Performing Pre op maintenance on Mini-Ex

Removing brush at roadside portion of NW Ditch

Transporting brush for final consolidation

Clearing brush from the NW Ditch haul route

Consolidated brush at NW Ditch haul route

Northwest Ditch brush remaining at COB

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 29 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	018

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Rain	Light Rain	44	37

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	7
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Equipment Operator	7

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	14
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	514.25
TOTAL WORK HOURS FROM START OF CONSTRUCTION	528.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	John Deere 50D Excavator	6.5

Schedule Activity No.	REMARKS
	VRH conducted clearing and grubbing of Ditch 8a and 8b. Clearing and grubbing is complete on Ditch 8.
	Felled the following number and diameter of trees: (3) 1"-5"

Paul Baril — CONTRACTOR/SUPERINTENDENT

29 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 29 March 2014
REPORT NO: 018

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	VRH conducted clearing and grubbing of Ditch 8a and 8b. Clearing and grubbing is complete on Ditch 8.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril — AUTHORIZED QC MANAGER AT SITE — 29 March 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 3/29/14

Location: Naval Support Activity Crane **Presented by:** PAUL BARTH

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☐ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☑ excavator swing and loading
- ☑ orderly site and housekeeping
- ☑ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☑ no horse play
- ☑ dust and vapor control
- ☐ refueling procedures
- ☑ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BARTH		VRHK
John Snyder		VRHK

SWMU 17 Phase II - Daily Contractor Report Photographs - 29 Mar 2014

Sawing logs for consolidation via mini-x

Consolidating felled and sawed trees

Effects of heavy rain at Ditch 9 nearby to Ditch 8

Sawing logs for consolidation via mini-x

Removing felled brush next to power line-Ditch 8

Ditch 8a and 8b complete

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 31 March 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	019

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	68	34

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	11
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Staff Arborist	11
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Equipment Operator	9

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☒ YES	☐ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	31
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	528.25
TOTAL WORK HOURS FROM START OF CONSTRUCTION	559.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	John Deere 50D Excavator	8.5
	VRHabilis	Bobcat T320 Skidsteer	0

Schedule Activity No.	REMARKS
	Logsdon & Son, LLC, tree removal sub-contractor felled three trees adjacent to power lines at stake number 43.
	VRH conducted clearing and grubbing adjacent to flood plain 3G on Ditch 3 and flood plain 3B at Boggs Creek.
	Felled the following number and diameter of trees: (3) 1"-5", (1) 10", (3) 18"-26". All tree felling has been completed.

Paul Baril — CONTRACTOR/SUPERINTENDENT

31 March 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 31 March 2014
REPORT NO: 019

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Logsdon & Son, LLC, tree removal sub-contractor felled three trees adjacent to power lines at stake number 43.
	VRH conducted clearing and grubbing adjacent to flood plain 3G on Ditch 3 and flood plain 3B at Boggs Creek.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril
AUTHORIZED QC MANAGER AT SITE — 31 March 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 31 MARCH 2014

Location: Naval Support Activity Crane **Presented by:** PHIL BAIL

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☑ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☑ public safety and fences
- ☐ excavator swing and loading
- ☑ orderly site and housekeeping
- ☑ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☑ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☑ review emergency protocol
- ☑ parking and laydown area
- ☐ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☑ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PHIL BAIL		VRHK
Scott Alogna		VRHK
John Snyder		VRHK

SWMU 17 Phase II - Daily Contractor Report Photographs - 31 Mar 2014

Logsdon removing tree top next to power lines

Tree in process of falling after final saw through

Ditch 3 following weekend rain storm

Performing pre-op maintenance on mini-x

Removing felled trees adjacent to flood plain 3G

Removing felled trees adjacent to flood plain 3B

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 1 April 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	020

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	67	50

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	11.5
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Staff Arborist	10.5
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Equipment Operator	8.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	30.5
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	559.25
TOTAL WORK HOURS FROM START OF CONSTRUCTION	589.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	John Deere 50D Excavator	8
	VRHabilis	Bobcat T320 Skidsteer	0

Schedule Activity No.	REMARKS
	VRH conducted clearing and grubbing adjacent to the Northwest Ditch and flood plain 3B at Boggs Creek. Clearing and grubbing on the Northwest Ditch is complete.

Paul Baril — CONTRACTOR/SUPERINTENDENT

1 April 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 1 April 2014
REPORT NO: 020

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	VRH conducted clearing and grubbing adjacent to the Northwest Ditch and flood plain 3B at Boggs Creek.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Paul Baril — 1 April 2014

AUTHORIZED QC MANAGER AT SITE — DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 1 APRIL 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BARIL

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☑ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☑ excavator swing and loading
- ☑ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☑ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☑ review emergency protocol
- ☑ parking and laydown area
- ☐ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☑ dust and vapor control
- ☐ refueling procedures
- ☑ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BARIL		VRHK
John Snyder		VRHK
Scott Alegra		VRHK

SWMU 17 Phase II - Daily Contractor Report Photographs - 1 April 2014

Conducting final grubbing and clearing-NW Ditch

Haul Route 95% complete at Boggs Creek

Consolidated debris at Boggs Creek

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 2 April 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	021

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Thunderstorms	Thunderstorms	55	45

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	3
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Staff Arborist	3
	SWMU 17 / Perform clearing and grubbing of trees/brush	VRHabilis	1	Equipment Operator	3

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	9
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	589.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	598.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	
	Performed site safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	John Deere 50D Excavator	0
	VRHabilis	Bobcat T320 Skidsteer	0

Schedule Activity No.	REMARKS
	VRH conducted clearing and grubbing adjacent to flood plain 3B at Boggs Creek and installed temporary silt fence along the Northwest Ditch.
	Heavy thunderstorms with lightning observed within 5 miles. Work activities suspended at 0830 and 1300 until COB.

Paul Baril — CONTRACTOR/SUPERINTENDENT

2 April 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 2 April 2014
REPORT NO: 021

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	VRH conducted clearing and grubbing adjacent to flood plain 3B at Boggs Creek and installed temporary silt fence along the Northwest Ditch.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	Heavy thunderstorms with lightning observed within 5 miles. Work activities suspended at 0830 and 1300 until COB.

Paul Baril — AUTHORIZED QC MANAGER AT SITE — 2 April 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 2 APR 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BAKER

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☑ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☑ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☑ excavator swing and loading
- ☑ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☑ effects of the night before? (Rain) or snow?
- ☑ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☑ equipment and machinery familiarization
- ☑ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☑ review emergency protocol
- ☑ parking and laydown area
- ☑ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☑ dust and vapor control
- ☐ refueling procedures
- ☑ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BAKER		URHK
Scott Alagna		URHK
John Snyder		URHK

Instructions:

Conduct a daily safety meeting prior to beginning each day=s site activities.
Complete form, obtain signatures, and file with the Daily Summary.
Follow-up on any noted items and document resolution of any action items.

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	3 April 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	022	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul Baril	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Thunderstorms	Thunderstorms	62	52

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	2
	SWMU 17 / Remove consolidated debris blocking culvert	VRHabilis	1	Staff Arborist	2
	SWMU 17 / Remove consolidated debris blocking culvert	VRHabilis	1	Equipment Operator	1

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	3
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	598.75
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO		
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION	601.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Personnel performed pre-operational PPE and equipment inspections.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRHabilis	John Deere 50D Excavator	.5
	VRHabilis	Bobcat T320 Skidsteer	0

Schedule Activity No.	REMARKS
	At approximately 1035 Mr. Tom Brent, NSA Crane Environmental Restoration Site Manager, contacted Mr. Paul Baril, SWMU 17 VRHK Site Superintendent. Mr. Brent stated that while touring the SWMU 17 site in Zone 9, he observed the water level at the south western most portions of Boggs Creek quickly rising above an installed culvert. Mr. Brent stated that due to extremely heavy rains, a large amount of vegetative matter consisting of leaves and branches was preventing unimpeded water flow through the mouth of the culvert. Mr. Baril contacted the VRHK SWMU 17 site team to assembly at the site to render assistance. The VRHK site team arrived at 1130 and following a safety brief and equipment inspections, deployed the John Deere 50D excavator to unblock the culvert. The vegetative debris was quickly removed and the Boggs Creek water flow was restored. Mr. Paul Baril contacted Mr. Tom Brent and Mr. Tim Sears, the NSA Crane FEAD Construction Manager, to inform them the creek was now draining and that a large amount of the adjacent culvert road had been washed out. The VRHK site team erected a barrier and traffic cone at each end of the road depression and restaged the excavator. The equipment operator was released and the Site Superintendent and Staff Arborist conducted a site inspection. The subsequent site inspection revealed that 90% of the SWMU 17 work area was intact with no major concerns noted. However, four excavation plain areas had marking stakes uprooted and several excavation plain areas had additional debris or uprooted trees deposited within the excavation boundaries; most notably TSCA excavation flood plain 3H. None of the consolidated and staged debris that was a byproduct of clearing and grubbing was observed to have been effected. Additionally, all boundary stakes have a large metal pin next to them. These pins were installed by VRHK in the event of an occurrence such as this and so reestablishment of any missing stakes can be accomplished quickly with the aid of an onsite metal detector.

Paul Baril — 3 April 2014

CONTRACTOR/SUPERINTENDENT — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 3 April 2014

Pre storm event shot. Culvert/road in background

Boggs Creek 13 March facing southwest

Initial site photo of Boggs Creek facing southwest

Initial site photo of Boggs Creek facing northeast

Initial site photo of overrun culvert

Initial site photo of overrun culvert (2)

SWMU 17 Phase II - Daily Contractor Report Photographs – 3 April 2014

Initial site photo of overrun culvert (3)

Removing debris from mouth of culvert

Blockage removed from mouth of culvert

Initial water burst following blockage removal

Water flow returning to acceptable condition

Removing debris from road

SWMU 17 Phase II - Daily Contractor Report Photographs – 3 April 2014

Visible road damage facing north

Post salvage photo facing north

Boggs Creek water level dropping noticeably

Large debris field & uprooted stake-Ditch 3 south

Pre storm: Excavation Flood Plain 3H - 14 March

Post storm: Excavation Flood Plain 3H - 3 April

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 3 APRIL 2014

Location: Naval Support Activity Crane **Presented by:** PAUL BARIL

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☑ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☑ public safety and fences
- ☑ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☑ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☑ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☑ no horse play
- ☑ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BARIL		URHK
Scott Alogna		URHK
John Sayde		URHK

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	10 June 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	023	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Ronald S. Madden	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Rain	74	63

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	8.5
	SWMU 17 / Performed site surveys/pre-op checks on equipment	VRHabilis	1	Equipment Operator	8.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	17
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	601.75
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION	618.75
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO		

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Personnel performed pre-operational PPE and equipment inspections.

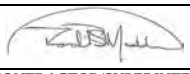
EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
		Kubota UTV Model RTV900 – 1 each
		Kubota UTV Model RTV1140 – 2 each
		Case CX225 excavator – 1 each
		Silt fence – 500 feet

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	Sunbelt Rentals	Kubota RTV900 UTV	1
	Sunbelt Rentals	Kubota RTV1140 UTV (2)	0
	ATCO	Case CX225 excavator	0
	VRHabilis	Bobcat T300 Skidsteer	0
	VRHabilis	John Deere 50D mini-excavator	0

Schedule Activity No.	REMARKS
	Received Kubota Utility Terrain Vehicles (UTV) and Case CX 225 excavator. Performed preoperational equipment inspections and maintenance on all construction equipment.
	Conducted silt fence pre-installation surveys at the North West Ditch and Ditch 8.
	Conducted vegetation removal and pipe around dam pre-installation surveys at Ditch 3, segments 1 through 3.



CONTRACTOR/SUPERINTENDENT — 10 June 2014 DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 10 June 2014
REPORT NO: 023

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Feature of Work: Mobilization/Setup

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

AUTHORIZED QC MANAGER AT SITE — DATE: 10 June 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

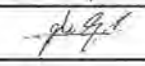
Project Name: SWMU 17 Phase II **Date:** 10 June 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☑ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☑ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☑ hazard analysis for all tasks or new technology
- ☑ chemical hazards -PCB's
- ☑ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☑ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☑ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☑ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☑ eye wash station locations
- ☑ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☑ review emergency protocol
- ☑ parking and laydown area
- ☐ vehicle backing up hazards
- ☑ accidents can be costly
- ☑ no horse play
- ☐ dust and vapor control
- ☑ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Ron Madden		VRHK
John Synder		VRHK

SWMU 17 Phase II - Daily Contractor Report Photographs – 10 June 2014

VRHK equipment staged for use

Case CX225 excavator

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 11 June 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	024

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Rain	Rain	79	64

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	2
	SWMU 17 / Work Plan overview and site familiarization	VRHabilis	1	Equipment Operator	2
	SWMU 17 / Work Plan overview and site familiarization	VRHabilis	1	Laborer	2
	SWMU 17 / Work Plan overview	VRHabilis	1	Equipment Operator	1

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	7
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	618.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	625.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	Sunbelt Rentals	Kubota UTV Model RTV900 – 1 each	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – 2 each	0
	ATCO Eq	Case CX225 excavator – 1 each	0
	VRH Logistics	Bobcat T300 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	0

Schedule Activity No.	REMARKS
	Early morning intermittent rain showers postponed operations from commencing at the regularly scheduled duty hours and the team was notified to not report to work.
	Mid-day, the Site Superintendent Ron Madden met with Mr. Tim Sears to discuss project objectives and site logistics for start up operations.
	Early afternoon the team met to review the Work Plan, discuss operations and logistics and then conducted site familiarization.

CONTRACTOR/SUPERINTENDENT — 11 June 2014 DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 11 June 2014
REPORT NO: 024

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Feature of Work: Mobilization/Setup continuation

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

AUTHORIZED QC MANAGER AT SITE — DATE: 11 June 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 11 JUNE 2014

Location: Naval Support Activity Crane **Presented by:** RON MADDEN

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [x] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [x] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [x] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac

Other Discussion Items/Comments/Follow-up Actions: TICKS, CHIGGERS

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RICK YETMAN		VRHK
JOHN SNYDER		VRHK
DEN BROCK		VRHK
RON MADDEN		VRHK

SWMU 17 Phase II - Daily Contractor Report Photographs – 11 June 2014

Zone 9 road looking east during rain event

Across from Building 354 during rain event

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	12 June 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	025	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Ronald S. Madden	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Partly Cloudy	Partly Cloudy	83	66

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Work Plan overview and site familiarization	VRHabilis	1	Equipment Operator	10
	SWMU 17 / Work Plan overview and site familiarization	VRHabilis	1	Laborer	10
	SWMU 17 / Work Plan overview	VRHabilis	1	Equipment Operator	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	40
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	625.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	665.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Site vehicles inspected for fire extinguishers, first aid kits, and roadside emergency equipment.	
	Personnel were spot checked multiple times for wearing Personal Protective Equipment appropriate for the activity at hand.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	Sunbelt Rentals	Kubota UTV Model RTV900 – 1 each	0.1
	Sunbelt Rentals	Kubota UTV Model RTV1140 – 2 each	0.5
	ATCO Eq	Case CX225 excavator – 1 each	0.1
	VRH Logistics	Bobcat T300 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	1.7

Schedule Activity No.	REMARKS
	Mr. Tim Sears arranged Crane's "Call before you dig" procedures for areas identified in Zone 9 and also initiated the process for a dig permit for the SWMU-71 project.
	Silt fence installation in Zone 9 at the construction entrance as well as installation at Ditch 8 was performed.
	All site personnel participated in project area familiarization and discussions of approach and techniques for execution of the remediation and restoration efforts.

CONTRACTOR/SUPERINTENDENT — 12 June 2014 DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 12 June 2014
REPORT NO: 025

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☒ NO ☐

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
	Mobilization/Setup	
	Field Tasks	
	Establish Temporary Erosion Controls	

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☒ NO ☐

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
	Field Tasks	
	Establish Temporary Erosion Controls	

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Feature of Work: Mobilization/Setup continuation

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

AUTHORIZED QC MANAGER AT SITE — 12 June 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUNE 12, 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [x] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [x] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [x] work stoppage at: ALL HAVE AUTHORITY
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [x] orderly site and housekeeping
- [x] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RONALD S. MADDEN		VRHK
Rick Yetman		VRHK
Don Brock		VRHK
John Snyder		VRHK

SWMU 17 Phase II - Daily Contractor Report Photographs – 12 June 2014

Excavation for silt fence installation, Zone 9

Installing silt fence for construction entrance, zone 9

Zone 9 construction entrance silt fence

Ditch 8 excavation for silt fence installation

Installation of distance markers in Ditch 8

Silt fence installed in Ditch 8 looking southwest

SWMU 17 Phase II - Daily Contractor Report Photographs – 12 June 2014

Continuation of silt fence installation excavation

Ditch 8 silt fence installed looking due north

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	13 June 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	026	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Ronald S. Madden	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Partly Cloudy	Partly Cloudy	76	53

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Silt fence installation and felled tree log removal from haul paths in Ditch 3	VRHabilis	1	Equipment Operator	10
	SWMU 17 / Silt fence installation and felled tree log removal from haul paths in Ditch 3	VRHabilis	1	Laborer	10
	SWMU 17 / Silt fence installation and felled tree log removal from haul paths in Ditch 3	VRHabilis	1	Equipment Operator	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	40
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	665.75
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO		
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION	705.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Site vehicles inspected for fire extinguishers, first aid kits, and roadside emergency equipment.	
	Personnel were spot checked multiple times for wearing Personal Protective Equipment appropriate for the activity at hand.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	Sunbelt Rentals	Kubota UTV Model RTV900 – 1 each	2.8
	Sunbelt Rentals	Kubota UTV Model RTV1140 – 2 each	1.5
	ATCO Eq	Case CX225 excavator – 1 each	4.7
	VRH Logistics	Bobcat T300 Skid Steer	1.4
	VRH Logistics	John Deere 50D Compact Excavator	2.6

Schedule Activity No.	REMARKS
	Heavily vegetated areas of Ditch 3 Segment P were mowed.
	Haul routes of Ditch 3 were cleared of felled tree logs, brush and undergrowth.
	Silt fence installation was completed in Ditch 8.

CONTRACTOR/SUPERINTENDENT — 13 June 2014 DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 13 June 2014
REPORT NO: 026

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☒ NO ☐

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
	Field Tasks – EMM operations	

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☒ NO ☐

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
	Field Tasks – EMM Operations	

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Feature of Work: Field Tasks
	Establishment of Erosion Controls

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

AUTHORIZED QC MANAGER AT SITE — DATE: 13 June 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 13 JUN 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [x] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [x] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [x] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [x] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Rick Yetman		
John Snyder		
Don Brock		
Ron Madden		

SWMU 17 Phase II - Daily Contractor Report Photographs – 13 June 2014

Vegetation removal, Ditch 3 Segment P

Felled tree log removal, haul paths, Ditch 3

Continued log removal, Ditch 3

Ditch 3 log removal looking east, EOD building visible

Silt fence installation, Ditch 8

VRHK employees installing silt fence, Ditch 8

SWMU 17 Phase II - Daily Contractor Report Photographs – 13 June 2014

Ditch 8 Silt fence termination point at Ditch 9

Ditch 8 silt fence installed looking due south

Tamping of silt fence excavation soils against fence

Ditch 8 completed silt fence

Felled tree log removal, Boggs Creek, looking east

Boggs Creek, removing felled tree logs

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 16 June 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	027

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Thunderstorms; intermittent	Partly Cloudy to Partly Sunny; Humid	87	73

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent/Safety	10
	SWMU 17 / Project oversight	VRHabilis	1	Quality Control	5
	SWMU 17 / Silt fence installation and felled tree log removal from haul paths in Ditch 3, Construction Entrance Zone 9	VRHabilis	1	Equipment Operator	10
	SWMU 17 / Silt fence installation and felled tree log removal from haul paths in Ditch 3	VRHabilis	1	Equipment Operator	10
	SWMU 17 / Silt fence installation and felled tree log removal from haul paths in Ditch 3	VRHabilis	1	Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	45
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	705.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	750.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Site vehicles inspected for fire extinguishers, first aid kits, and roadside emergency equipment.
	Personnel were observed throughout the day for proper driving of UTV's and Earth Moving Machinery (EMM) to include entering and exiting to avoid injury.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
		Komatsu CD60 Crawler Dump – AT01
		Komatsu CD60 Crawler Dump – AT02

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T300 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	4.1
	ATCO Eq	Case CX225 excavator	1.4
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0
	Sunbelt Rentals	Kubota UTV Model RTV900 – #30	1.0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – #40	.5
	Sunbelt Rentals	Kubota UTV Model RTV1140 – #91	1.4

Schedule Activity No.	REMARKS
	Zone 9 Construction Entrance was built; in a day.
	Silt fence installation continued in Ditch 3; segments 6, 5, 4
	Flood plains and TSCA/non-TSCA areas marking stakes and boundary ribbons were repaired were found deficient from storm events.

CONTRACTOR/SUPERINTENDENT — DATE: 16 June 2014

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 16 June 2014
REPORT NO: 027

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Feature of Work: Field Tasks
	Establishment of Erosion Controls

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

AUTHORIZED QC MANAGER AT SITE — DATE: 16 June 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUNE 16, 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [x] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [x] work stoppage at: ALL EMPLOYEES STOP WORK
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [x] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [x] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [x] review emergency protocol
- [x] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Rick Yetman		VRHK
DON BROCK		VRHK
John Snyder		VRHK
RONALD MADDEN		VRHK
Ryan Lane		Vernon

SWMU 17 Phase II - Daily Contractor Report Photographs – 16 June 2014

Silt fence installed, Ditch 3 Segment P

Silt fence installation continuing downstream, Ditch 3

Construction entrance built; in a day… Zone 9

#2 stone received for Zone 9 culvert and entrance

Transporting #2 stone to culvert, Zone 9

Reinforcing culvert crossing area with #2 stone, Zone 9

SWMU 17 Phase II - Daily Contractor Report Photographs – 16 June 2014

2 Crawler Dump Trucks arrive for project

Downloading Crawler Dump Trucks, Zone 9

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 17 June 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	028

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Thunderstorms; intermittent	Partly Cloudy to Partly Sunny; Humid	87	73

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent/Safety	10
	SWMU 17 / Project oversight	VRHabilis	1	Quality Control	10
	SWMU 17 / Silt fence installation and felled tree log removal from haul paths in Ditch 3 and Boggs Creek	VRHabilis	1	Equipment Operator	10
	SWMU 17 / Silt fence installation and felled tree log removal from haul paths in Ditch 3	VRHabilis	1	Equipment Operator	10
	SWMU 17 / Silt fence installation and felled tree log removal from haul paths in Ditch 3	VRHabilis	1	Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	50
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	750.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	800.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Site vehicles inspected for fire extinguishers, first aid kits, and roadside emergency equipment.
	Personnel were observed throughout the day for proper driving of UTV's and Earth Moving Machinery (EMM) to include entering and exiting to avoid injury.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
		Site Trailer
		Bobcat T320 Skid Steer

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0
	VRH Logistics	Bobcat T300 Skid Steer	.5
	VRH Logistics	John Deere 50D Compact Excavator	3.6
	ATCO Eq	Case CX225 excavator	4.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.2
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0.2
	Sunbelt Rentals	Kubota UTV Model RTV900 – #30	1.0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – #40	1.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – #91	2.4

Schedule Activity No.	REMARKS
	Silt fence installation continued in Ditch 3; segments 5, 4, 3
	Site trailer arrived and was secured.
	Flood plains and TSCA/non-TSCA areas marking stakes and boundary ribbons were repaired were found deficient from storm events.
	VRH Logistics delivered a T320 Skid Steer with attachments for use on the project.

CONTRACTOR/SUPERINTENDENT — DATE: 17 June 2014

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 17 June 2014
REPORT NO: 028

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Feature of Work: Field Tasks
	Establishment of Erosion Controls

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

AUTHORIZED QC MANAGER AT SITE — DATE: 17 June 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUNE 17, 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [x] work stoppage at: STOP WORK AUTHORITY
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [x] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [x] hot work permits – BREAK DOWN INSIDE ARC
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [x] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [x] accidents can be costly – EMR
- [x] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RONALD MADDEN		VRHK
DON BROCK		VRH
Ryan Lowe		
Rick Yetman		VRH
John Snyder		VRHK

SWMU 17 Phase II - Daily Contractor Report Photographs – 17 June 2014

Dry decontamination procedures of felled trees

Completing felled tree removal from Boggs Creek

Boggs Creek with felled tree removal complete

Ditch 3 silt fence installation complet at corridor

EMM refueling operations in Zone 9

VRHK site trailer received and secured on site

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	18 June 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	029	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Ronald S. Madden	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Partly sunny - humid	Partly sunny – high humidity	90	71

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Project oversight	VRHabilis	1	Quality Control	10
	SWMU 17 / Project oversight	VRHabilis	1	Safety	10
	SWMU 17 / Silt fence installation and site prep	VRHabilis	1	Equipment Operator	10
	SWMU 17 / Silt fence installation and site prep	VRHabilis	1	Equipment Operator	10
	SWMU 17 / Silt fence installation and site prep	VRHabilis	1	Laborer	10
	SWMU 17 / Silt fence installation and site prep	VRHabilis	1	Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	50
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	800.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	870.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Site vehicles inspected for fire extinguishers, first aid kits, and roadside emergency equipment.
	Personnel were observed throughout the day for proper driving of UTV's and Earth Moving Machinery (EMM) to include entering and exiting to avoid injury.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0
	VRH Logistics	Bobcat T300 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	3.7
	ATCO Eq	Case CX225 excavator	1.4
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0
	Sunbelt Rentals	Kubota UTV Model RTV900 – #30	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – #40	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – #91	1.1

Schedule Activity No.	REMARKS
	Silt fence installation continued in Ditch 3; segments 4, 3
	VRHK team members from Cardno JFNew visited the site to discuss project objectives and review sequence of events for restoration.
	Received sand and stone for transfer pads / lay-down areas.
	Continued silt fence installation and site prep.

CONTRACTOR/SUPERINTENDENT — 18 June 2014 DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 18 June 2014
REPORT NO: 029

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Feature of Work: Field Tasks
	Establishment of Erosion Controls

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

AUTHORIZED QC MANAGER AT SITE — DATE: 18 June 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUNE 18, 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards-PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [x] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [x] hot work permits BREAK DOWNS IN ARC
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [x] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RONALD S. MADDEN		VRHK
John Snyder		VRHK
Rick Yetman		VRH
E Adler		VRH
Ryan Lane		Kiewit
DON BROCK		VRH
Scott Alogna	S. J. Alogna	VRH

SWMU 17 Phase II - Daily Contractor Report Photographs – 18 June 2014

Site walk with Cardno JFNew team members

Continuation of silt fence installation

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	19 June 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	030	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Ronald S. Madden	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Partly sunny - humid	Partly sunny – high humidity	90	72

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Project oversight	VRHabilis	1	Quality Control	10
	SWMU 17 / Project oversight	VRHabilis	1	Safety	10
	SWMU 17 / Silt fence installation and site prep	VRHabilis	1	Equipment Operator	10
	SWMU 17 / Silt fence installation and site prep	VRHabilis	1	Equipment Operator	10
	SWMU 17 / Silt fence installation and site prep	VRHabilis	1	Laborer	10
	SWMU 17 / Silt fence installation and site prep	VRHabilis	1	Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	70
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	870.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	940.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Site vehicles inspected for fire extinguishers, first aid kits, and roadside emergency equipment.
	Personnel were observed throughout the day for proper driving of UTV's and Earth Moving Machinery (EMM) to include entering and exiting to avoid injury.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	1.2
	VRH Logistics	Bobcat T300 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	0
	ATCO Eq	Case CX225 excavator	4.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.4
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	3.1
	Sunbelt Rentals	Kubota UTV Model RTV900 – #30	1.5
	Sunbelt Rentals	Kubota UTV Model RTV1140 – #40	1.6
	Sunbelt Rentals	Kubota UTV Model RTV1140 – #91	1.5

Schedule Activity No.	REMARKS
	Silt fence installation continued in Ditch 3; segments 4, 3
	VRHK team members from Cardno JFNew visited the site to discuss project objectives and review sequence of events for restoration.
	Received sand and stone for transfer pads / lay-down areas.
	Continued silt fence installation and site prep.

CONTRACTOR/SUPERINTENDENT — DATE: 19 June 2014

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 19 June 2014
REPORT NO: 030

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Feature of Work: Field Tasks
	Establishment of Erosion Controls

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

AUTHORIZED QC MANAGER AT SITE — DATE: 19 June 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 19 JUN 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

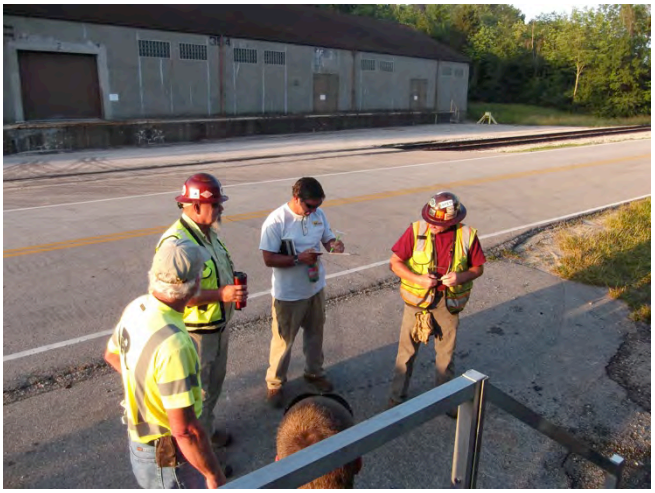
- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [x] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [x] work stoppage at: STOP WORK AUTHORITY
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [x] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [x] overhead utility locations cleared? POWERLINES
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [x] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RONALD S. MADDEN		VRHK
Rick Yetman		VRH
E. Adler		VRH
Scott Alsna		VRH
Don Brock		VRH
John Shyda		VRH
Ryan Lance		VRH

SWMU 17 Phase II - Daily Contractor Report Photographs – 19 June 2014

Daily Safety Meeting



Daily Operations Briefing

EPA Site Visit – Ditch 3 Segment 5

EPA Site Visit – Ditch 3 Segment 4

EPA Site Visit – Ditch 3 Segment 3

EPA Site Visit – Boggs Creek

SWMU 17 Phase II - Daily Contractor Report Photographs – 19 June 2014

Zone 9 – Old Rail Road Bed – Pad 1 Location

Zone 9 – Old Rail Road Bed – Pad 1 Layout

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	20 June 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	031	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Ronald S. Madden	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Partly sunny - humid	Partly sunny – high humidity	90	72

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	5
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10
	SWMU 17 / Silt fence installation and site prep - RY	VRHabilis	1	Equipment Operator	7
	SWMU 17 / Silt fence installation and site prep - JS	VRHabilis	1	Equipment Operator	6.5
	SWMU 17 / Silt fence installation and site prep - DB	VRHabilis	1	Laborer	8
	SWMU 17 / Silt fence installation and site prep - EA	VRHabilis	1	Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 56.5
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 940.75
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 997.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Site vehicles inspected for fire extinguishers, first aid kits, and roadside emergency equipment.
	All site personnel were observed during multiple operations for proper wearing of PPE; no violations were witnessed.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
	MacAllister	D4 Bulldozer

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0
	VRH Logistics	Bobcat T300 Skid Steer	1.9
	VRH Logistics	John Deere 50D Compact Excavator	2.6
	ATCO Eq	Case CX225 excavator	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0
	Sunbelt Rentals	Kubota UTV Model RTV900 – #30	1.0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – #40	0.1
	Sunbelt Rentals	Kubota UTV Model RTV1140 – #91	1.2
	MacAllister	D4 Bulldozer	2.9

Schedule Activity No.	REMARKS
	Silt fence installation continued in Ditch 3; segments 3, 2
	Pad preparation for soils.

CONTRACTOR/SUPERINTENDENT — DATE: 20 June 2014

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 20June 2014
REPORT NO: 031

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Feature of Work: Field Tasks
	Establishment of Erosion Controls

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

AUTHORIZED QC MANAGER AT SITE — DATE: 20June 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 20 JUN 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone-s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [x] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [x] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RON MADDEN		VRIK
E. Adler		VRIK
DON BROCK		VRH
SCOTT ALOCNA		VRH
John Snyder		VRH
Rick Yetman		VRH
Ryan Lane		VRH

SWMU 17 Phase II - Daily Contractor Report Photographs – 20 June 2014

Pad 1 Installation – Zone 9

Pad 1 Initial Grade – Zone 9

Pad 1 Grading – Zone 9

Pad 1 Grading – Zone 9

Installation of Silt Fence – Ditch 3

VRHK site trailer, UTV's and EMM

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	23 June 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	032	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Ronald S. Madden	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Partly sunny - humid	Partly cloudy – thunderstorms	90	69

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent/Safety	10
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	9.5
	SWMU 17 / Project oversight - EA	VRHabilis	1	Safety	10
	SWMU 17 / Containment Pad erection and site prep - RY	VRHabilis	1	Equipment Operator	9.5
	SWMU 17 / Containment Pad erection and site prep - JS	VRHabilis	1	Equipment Operator	9.5
	SWMU 17 / Containment Pad erection and site prep - DB	VRHabilis	1	Laborer	9.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	58.0
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	997.75
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO		
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION	1055.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Emergency procedures and hospital route reviewed.
	Vehicles were inspected for proper safety equipment and gear.

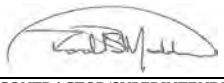
EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	2.5
	VRH Logistics	Bobcat T300 Skid Steer	2.7
	VRH Logistics	John Deere 50D Compact Excavator	0.8
	ATCO Eq	Case CX225 excavator	0.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0.1
	Sunbelt Rentals	Kubota UTV Model RTV900 – #30	1.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – #40	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – #91	0.8
	MacAllister	D4 Bulldozer	0.2

Schedule Activity No.	REMARKS
	Building Pads 1 & 2
	Continued site preparations



CONTRACTOR/SUPERINTENDENT

23 June 2014
DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 23 June 2014
REPORT NO: 032

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Feature of Work: Field Tasks

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

AUTHORIZED QC MANAGER AT SITE — 23 June 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUN 23, 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [x] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [x] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

TREE LIMBS

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RON MADDEN		VRHK
Ryan Lane		KEnvon
Rick Yetman		VRH
John Snyder		KH
DON BROCK		VRH
E. Adler		VRH

SWMU 17 Phase II - Daily Contractor Report Photographs – 23 June 2014

Zone 9 – Containment Pad 1 Erection

Continued Pad 1 Erection

Pad 1 berms built, sand bottom installation

Zone 9 - Ditch runoff preparation

Pad 2 erection, berms built

Pad 2, sand bottom being installed

SWMU 17 Phase II - Daily Contractor Report Photographs – 23 June 2014

Pad 2, sand distribution over berms and pad bottom

Pad 2, 30-mil liner installation

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 24 June 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	033

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Cloudy	Possible Rain	68	82

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent	10
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10
	SWMU 17 / Project oversight - EA	VRHabilis	1	Safety	10
	SWMU 17 / Containment Pad erection and site prep - RY	VRHabilis	1	Equipment Operator	7.5
	SWMU 17 / Containment Pad erection and site prep - JS	VRHabilis	1	Equipment Operator	7.5
	SWMU 17 / Containment Pad erection and site prep - DB	VRHabilis	1	Laborer	8.0
	SWMU 17 / Containment Pad erection and site prep - KH	VRHabilis	1	Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	63.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1055.25
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1118.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Lifting techniques observed during restoration material staging and receiving of tarps.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.7
	VRH Logistics	Bobcat T300 Skid Steer	0.4
	VRH Logistics	John Deere 50D Compact Excavator	2.8
	ATCO Eq	Case CX225 excavator	2.9
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	0.3
	Sunbelt Rentals	Kubota UTV Model RTV900 – S01 (#30)	0.9
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.2
	MacAllister	D4 Bulldozer	1.5

Schedule Activity No.	REMARKS
	Complete construction of Containment Pads 1 & 2
	Receive restoration materials
	Receive tarps.

CONTRACTOR/SUPERINTENDENT

24 June 2014
DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 24 June 2014
REPORT NO: 033

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Feature of Work: Field Tasks

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

AUTHORIZED QC MANAGER AT SITE — 24 June 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUN 24, 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [x] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [x] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading
- [ ] orderly site and housekeeping
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- [ ] confined space entry
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- [ ] overhead utility locations cleared?
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- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [x] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [x] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RON MADDEN		VRHK
E. Adler		VRHK
DON BROCK		VRH
Ryan Lane		Kemron
Kim Heinhansen		VRH
Rick Yetman		VRH
John Snyder		VRH

SWMU 17 Phase II - Daily Contractor Report Photographs – 24 June 2014

Receiving Super Sacks for water diversion

Restoration materials received and staged

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 25 June 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	034

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Cloudy	Cloudy	69	84

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent	11.5
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	11
	SWMU 17 / Project oversight - EAd	VRHabilis	1	Safety	11.5
	SWMU 17 / Containment Pad erection and site prep - RY	VRHabilis	1	Equipment Operator	11.5
	SWMU 17 / Containment Pad erection and site prep - JS	VRHabilis	1	Equipment Operator	11.5
	SWMU 17 / Containment Pad erection and site prep - DB	VRHabilis	1	Laborer	11.5
	SWMU 17 / Containment Pad erection and site prep - KH	VRHabilis	1	Laborer	11.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	80.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1118.25
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1198.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Observe exiting EMM for 3 points of contact and proper wear of PPE for work area.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	2.4
	VRH Logistics	Bobcat T300 Skid Steer	0.2
	VRH Logistics	John Deere 50D Compact Excavator	5.2
	ATCO Eq	Case CX225 excavator	0.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	1.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	1.2
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	2.2
	Sunbelt Rentals	Kubota UTV Model RTV900 – S01 (#30)	0.8
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	2.3
			0

Schedule Activity No.	REMARKS
	Begin Excavation and Restoration of Ditch 8

CONTRACTOR/SUPERINTENDENT — DATE: 25 June 2014

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 25 June 2014
REPORT NO: 034

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☒ NO ☐

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
	Excavation of non-TSCA material	
	Restoration of stream bed	

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☒ NO ☐

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
	Excavation of non-TSCA material	
	Restoration of stream bed	

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☐ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☐ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

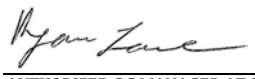
Schedule Activity No.	Description
	No rework items identified

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.



AUTHORIZED QC MANAGER AT SITE — DATE: 25 June 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

Stream Segment Ditch 8a & 8b

Date Excavated 6-25-14

SWPPP Station Number 0+00 - 2+00, 3+50 - 5+98

Date Restored 6-25-14

TSCA or NON-TSCA

Prepared By Ryan Lane

only first 150ft of 8a completed

Pre-Excavation

Have all of the excavation nodes been located and staked?
Yes, only in stream work at this location from stake to stake.
New segment is from (175W/50127 → 175W/34)

What is the estimated depth of excavation in this segment per IMWP?
1.5ft 8a = 6"-12" upstream seg. 4' wide Bank to Bank
8b = 3"-5" downstream seg.

What is the defining factor for proposed excavation depth in this section per IMWP? Bedrock, specific depth, discretionary, etc.
Bedrock & Bank to Bank

Are there any additional downstream erosion controls necessary?
Straw Bales are anchored in downstream confluence to keep any silt within excavation footprint

Are there sufficient quantities of restoration materials on-site to complete segment?
Yes, two SP of gravel Peagravel = 2 loads
2"-6" = 3 loads

Does the stockpile area have enough capacity for the anticipated excavation volume?
Yes, SP is empty

Are required Exclusion Zone and Contamination Reduction Zone signs in place?
Yes, Signs in place other safety equipment ready

Is there decontamination equipment and supplies at the excavation location?
Yes, Rags & cans are ready

Are the dams in place and stable enough for the duration of excavation?
no dams to be used at this location

What is the weather report for today?
Clear 10% chance of showers

Are contingencies in place for rain events (stockpile cover, excavation cover-up)?
Plastic is staged at SP

Stream Segment 8a 1st 150' Date Excavated 6-25-14

SWPPP Station Number 6+50 - on Rocks Stakes to 5+00 Date Restored 6-25-14

TSCA or NON-TSCA Prepared By Klane

During Excavation

Is soil being transported safely to the stockpile without spillage?
Yes, Kevin did request careful loading of trucks

What are the estimated depths of excavations? Indicate by 25 ft intervals related to the station marker or a sketch. 50

Width:

5-point depths across width: (e.g. 0, 1.0, 1.5, 1.0, 0); visual or measured.
(5+00) 1.2 ft deep 2' wide (5+50) 2' deep 2' wide (6+00) 1.5' deep 2' wide
(6+50) 1' deep 2' wide

Average depth: (e.g.: 2.5/5= 0.5)
(1.5')(150')(2'w)

Does the estimated depth or width vary significantly from the IMWP cross-sectional computations for this reach or segment. No, seems to be slightly less.

Is sediment traveling downstream? Are additional check dams or controls needed?
no, all material is dry, the stream has no flow

What is the general composition of material being excavated? What is the estimated soil density in this segement? Stone, sand, soil, etc.
clayey top soil.

Were we directed to dig below the estimated final excavation depth per IMWP? What was the soil type at the excavation bottom? Hardpacked clay, bedrock, broken stone, a specific depth?
Digging was in accordance with plan. Bedrock was found at the bottom. Soft, sandy mudstone

Are boulders being set aside for cleaning? How many boulders are being cleaned?
No Boulders in this area

Is wash water remaining in the contamination footprint? Is there any runoff that needs to be contained with straw bales or another engineering control?
No washing

Stream Segment 8a first 150' Date Excavated 6-25

SWPPP Station Number 8a 1st 150' Date Restored 6-25

TSCA or ~~NON-TSCA~~ Prepared By [illegible]

8 total loads of soil

Post Excavation

Are similar restoration materials being replaced as were excavated?
~~No~~, weave using a mixture of pea gravel & the laveger 4-6" stone with matting

Does the restoration grade blend into the existing landscape?
JF New has requested a 3:1 slope from the excavation walls to be knocked down & stone with mat to be overlayed

Is coir mat being installed properly with plenty of stakes, downstream overlap, etc?

Has Cardno JF New commented specifically on this stream segment?
yes, 3:1 soil slope, mat, stone & seed required

a) Are there any adjustments we can make to speed up restoration and save material? Could we use gravel instead of topsoil in this location to save on seed and plantings or use gravel under a 4"-6" layer of topsoil to ease placement?
Slopes being created with existing soil in footprint

Are there any concerns that would justify a delay in placement of restoration backfill (topsoil, gravel, riffles); or rain event pending?
~~Yes~~ NO, Rain is not forecasted. 17:10 work on sloping & other restoration beginning now

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUN 25 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [x] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
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- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RON MADDEN		VRHK
Ryan Lavine		VRHK
John Snyder		VRHK
DON BROCK		VRH
E Adler		VRHK
KIM HECKNAUSEN		VRH
Rick Yetman		VRH
RYAN TEMPLETON		CARDNO

SWMU 17 Phase II - Daily Contractor Report Photographs – 25 June 2014

Ditch 8 excavation of contaminated soil

Contaminated soil staged on Containment Pad 1

Decontamination of excavator bucket

Ditch 8 restoration; sowing seeds

Ditch 8 restoration; coconut matting

Ditch 8 restoration; installing matting

SWMU 17 Phase II - Daily Contractor Report Photographs – 25 June 2014

Ditch 8 restoration; staking down matting

Ditch 8 restoration; bank stabilization matting

Ditch 8 restoration; sediment placement

Ditch 8 restoration; clean backfill materials

Ditch 8 restoration continued

Ditch 8 restoration; continued sediment installation

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 26 June 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	035

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Mostly Cloudy	64	87

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent	10.25
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	9.5
	SWMU 17 / Project oversight - EA	VRHabilis	1	Safety	4.5
	SWMU 17 / Ditch 8 Excavation and Restoration - RY	VRHabilis	1	Equipment Operator	10.25
	SWMU 17 / Ditch 8 Excavation and Restoration - JS	VRHabilis	1	Equipment Operator	10.25
	SWMU 17 / Ditch 8 Excavation and Restoration - DB	VRHabilis	1	Laborer	10.25
	SWMU 17 / Ditch 8 Excavation and Restoration - BR	VRHabilis	1	Laborer	10.25

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

	HRS
TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	65.25
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1198.25
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1263.50

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Observed contamination control procedures at control zone; no discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	2.0
	VRH Logistics	Bobcat T300 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	3.1
	ATCO Eq	Case CX225 excavator	7.3
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.3
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	3.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	3.4
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	0.4
	Sunbelt Rentals	Kubota UTV Model RTV900 – S01 (#30)	1.0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.9
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.0
			0

Schedule Activity No.	REMARKS
	Continue and complete excavation of Ditch 8. Continue restoration of Ditch 8.

CONTRACTOR/SUPERINTENDENT — DATE: 26 June 2014

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 26 June 2014
REPORT NO: 035

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☐ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☐ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

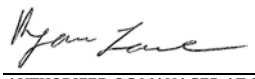
Schedule Activity No.	Description
	No rework items identified

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.



AUTHORIZED QC MANAGER AT SITE — DATE: 26 June 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUN 26, 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

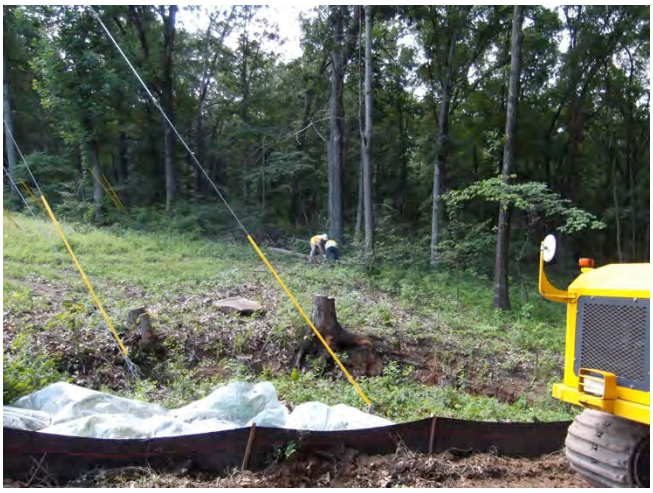
- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [x] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [x] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [x] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [x] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RON MADDEN		VRHK
DON BROCK		VRHK
John Snyder		VHHK
Ryan Lane		VRHKenron
Ben Roberts		VRHK
Rick Yetman		VRH
E Adler		VRHK
RYAN TEMPLETON		CARDNO
Larry Emerson		KENRON

SWMU 17 Phase II - Daily Contractor Report Photographs – 26 June 2014

Continued excavation and restoration; Ditch 8



Ditch 8 excavation under utility pole guide wire

Excavation of Ditch 8

Load out of non-TSCA soils, Ditch 8

Restoration of Ditch 8

Installation of stream stabilization matting

SWMU 17 Phase II - Daily Contractor Report Photographs – 26 June 2014

Ditch 8 restoration; matting and cobble in place

Ditch 8 non-TSCA soil transportation to Pad 1

Crawler dump truck in transit to containment Pad 1

Non-TSCA soil staging in containment Pad 1

Ditch 8 stump removal

Ditch 8 excavation complete

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 27 June 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	036

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Scattered Clouds	65	87

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent/Safety	10
	SWMU 17 / Project oversight - LE	VRHabilis	1	Quality Control	9
	SWMU 17 / Ditch 8 Excavation and Restoration - RY	VRHabilis	1	Equipment Operator	9.5
	SWMU 17 / Ditch 8 Excavation and Restoration - JS	VRHabilis	1	Equipment Operator	9.5
	SWMU 17 / Ditch 8 Excavation and Restoration - DB	VRHabilis	1	Laborer	10
	SWMU 17 / Ditch 8 Excavation and Restoration - BR	VRHabilis	1	Laborer	9.5

JOB SAFETY

			TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	57.5
WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO		
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1263.50
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO		
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION	1321

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Inspected proper lifting techniques while improving containment Pad 1 berm.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.3
	VRH Logistics	Bobcat T300 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	3.3
	ATCO Eq	Case CX225 excavator	2.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	3.0
	Sunbelt Rentals	Kubota UTV Model RTV900 – S01 (#30)	0.4
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.5
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	2.2

Schedule Activity No.	REMARKS
	Continue restoration of Ditch 8; 95% complete at days end.

CONTRACTOR/SUPERINTENDENT — DATE: 27 June 2014

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 27 June 2014
REPORT NO: 036

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☐ NO ☒

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☐ NO ☒

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

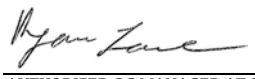
Schedule Activity No.	Description
	No rework items identified

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.



AUTHORIZED QC MANAGER AT SITE — DATE: 27 June 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUN 27 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

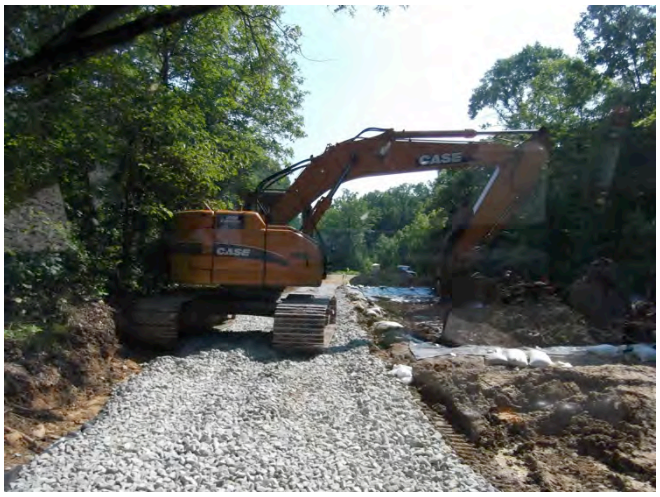
- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [x] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [x] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at: STOP WORK AUTHORITY
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [x] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [x] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

CONTAMINATION CONTROL

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RON MADDEN		VRHK
DON BROCK		URHK
John Snyder		VRHK
Rick Yetman		VRH
Ben Roberts		VRH
RYAN TEMPLETON		CARDNO

SWMU 17 Phase II - Daily Contractor Report Photographs – 27 June 2014



Zone 9 – Pad 1 soil management

Ditch 8 restoration feature

Ditch 8 restoration feature

Ditch 8 restoration nearing completion

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 30 June 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	037

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Mostly Cloudy	70	87

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent/Safety	10.25
	SWMU 17 / Project oversight - LE	VRHabilis	1	Quality Control	9.5
	SWMU 17 / NW Ditch Excavation - RY	VRHabilis	1	Equipment Operator	10.25
	SWMU 17 / NW Ditch Excavation - JS	VRHabilis	1	Equipment Operator	10.25
	SWMU 17 / NW Ditch Excavation - DB	VRHabilis	1	Laborer	10.25
	SWMU 17 / NW Ditch Excavation - BR	VRHabilis	1	Laborer	10.25
	SWMU 17 / NW Ditch Excavation – JM	VRHabilis	1	Laborer	7

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	67.75
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1321.00
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1388.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Observed personnel working in, around and on Earth Moving Machinery (EMM). EM385-1-1 procedures being adhered to.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	1.5
	VRH Logistics	Bobcat T300 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	4.0
	ATCO Eq	Case CX225 excavator	7.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	4.9
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	4.9
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	4.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	0
	Sunbelt Rentals	Kubota UTV Model RTV900 – S01 (#30)	1.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.5
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.8

Schedule Activity No.	REMARKS
	Complete restoration on Ditch 8 and begin excavation on NW Ditch.

CONTRACTOR/SUPERINTENDENT — DATE: 30 June 2014

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 30 June 2014
REPORT NO: 037

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☐ NO ☒

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☐ NO ☒

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

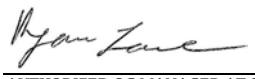
Schedule Activity No.	Description
	No rework items identified

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.



AUTHORIZED QC MANAGER AT SITE — DATE: 30 June 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUN 30, 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [x] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [x] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RONALD S. MADDEN		VRHK
John Snyder		VRHK
Rick Yetman		VRH
Ben Roberts		VRH
Ryan Lane		VRHK
DON BROCK		VRHK
JOSH MADDEN		VRHK
RYAN TEMPLETON		CARDNO

SWMU 17 Phase II - Daily Contractor Report Photographs – 30 June 2014

Ditch 8 contaminated soil being shipped from Pad 1

Ditch 8 load out of non-TSCA soil

Ditch 8 non-TSCA soil load out

Over-the-road haul truck receiving soil for transport

Load out of soil for transport

Beginning excavation NW Ditch

SWMU 17 Phase II - Daily Contractor Report Photographs – 30 June 2014

NW Ditch Excavation

View of NW Ditch Excavation from Boggs Creek

Upper portion of NW Ditch during excavation

Rule 5 Inspection Site Visit

NW Ditch step out work initial excavation

Pad 1 staged soils covered at days end

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 01 July 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	038

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Partly Cloudy	67	88

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent/Safety	10
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	9.5
	SWMU 17 / NW Ditch Excavation - RY	VRHabilis	1	Equipment Operator	8.5
	SWMU 17 / NW Ditch Excavation - JS	VRHabilis	1	Equipment Operator	6.5
	SWMU 17 / NW Ditch Excavation - DB	VRHabilis	1	Laborer	10
	SWMU 17 / NW Ditch Excavation - BR	VRHabilis	1	Laborer	10
	SWMU 17 / NW Ditch Excavation – JM	VRHabilis	1	Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

	HRS
TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	64.50
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1388.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1453.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Observed personnel working in, around and on Earth Moving Machinery (EMM). EM385-1-1 procedures being adhered to.
	Inspected EMM for fire extinguishers; no discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	1.6
	VRH Logistics	Bobcat T300 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	4.3
	ATCO Eq	Case CX225 excavator	6.4
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	1.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	3.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	3.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	0
	Sunbelt Rentals	Kubota UTV Model RTV900 – S01 (#30)	1.1
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.8
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.8

Schedule Activity No.	REMARKS
	Continue excavation on NW Ditch.
	Excavation halted at 1045 to resolve flood plain depth..
	Meeting at 1:00pm with Tom Brent, Tim Sears, Kevin Losekamp, Ron Madden, Ryan Templeton; resolution was agreed to excavate to bedrock.

CONTRACTOR/SUPERINTENDENT — DATE: 01 July 2014

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 01 July 2014
REPORT NO: 038

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☐ NO ☒

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☐ NO ☒

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

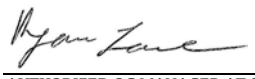
Schedule Activity No.	Description
	No rework items identified

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.



AUTHORIZED QC MANAGER AT SITE — DATE: 01 July 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUL 1, 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [x] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [x] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading
- [x] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [x] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
DON BROCK		VRHK
RYAN TEMPLETON		CARDNO
Ben Roberts		VRHK
JOSHUA MADDEN		VRHK
Rick Yetman		VRH
John Snyder		VRHK

SWMU 17 Phase II - Daily Contractor Report Photographs – 01 July 2014

NW Ditch – Initial stream excavation to bedrock

Rick Yetman surveying excavation depth

NW Ditch "New Area" flood plain survey

Rod man John Snyder assisting NW Ditch survey

Up stream beginning of NW Ditch "New Area"

Staged soil at Pad 1 covered and secured at days end

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 02 July 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	039

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Partly Cloudy	67	88

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent/Safety	10
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10
	SWMU 17 / NW Ditch Excavation - RY	VRHabilis	1	Equipment Operator	10
	SWMU 17 / NW Ditch Excavation - JS	VRHabilis	1	Equipment Operator	10
	SWMU 17 / NW Ditch Excavation - DB	VRHabilis	1	Laborer	10
	SWMU 17 / NW Ditch Excavation - BR	VRHabilis	1	Laborer	10
	SWMU 17 / NW Ditch Excavation – JM	VRHabilis	1	Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

	HRS
TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	70
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1453.25
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1523.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Inspected EMM refueling procedures; no discrepancies noted.	
	Observed contamination control and decontamination procedures at Pad 1; no discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.8
	VRH Logistics	Bobcat T300 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	4.7
	ATCO Eq	Case CX225 excavator	6.3
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	4.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	4.4
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	5.2
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	0.1
	Sunbelt Rentals	Kubota UTV Model RTV900 – S01 (#30)	0.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.5
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.1

Schedule Activity No.	REMARKS
	Continued excavation on NW Ditch in the morning and completed in the afternoon.
	Conducted decontamination procedures on EMM in preparation for scheduled restoration activities tomorrow.

CONTRACTOR/SUPERINTENDENT — DATE: 02 July 2014

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 02 July 2014
REPORT NO: 039

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
1	Measured length of sidewalls at flood plain of NW Ditch.	
2	Topsoil being staged in larger quantities to fill in the larger excavation area.	

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
1	Excavation of flood plain completed to bedrock. Easily definable as a red sandy silt stone.	
	NW Ditch was excavated in the deep V using caution not to disturb too much of the sidewall vegetation.	

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☐ NO ☒

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☐ NO ☒

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Measurements taken in flood plain. Area sectioned off in grids for a definitive estimation. Average depth was 4.5 feet.
2	Low NW Ditch excavation was 2- to 3-feet above the streambed. All streambed soil excavated to bedrock.
3	NW Ditch lower end is completed to a sufficient depth and sidewall height per Kevin Losekamp. Many stumps on the top of the bank were left in place to stabilize the soil.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — 02 July 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUL 2, 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [X] Daily work scope reviewed
- [X] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [X] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [X] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [X] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [X] work stoppage at: STOP WORK AUTHORITY
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [X] excavator swing and loading
- [X] orderly site and housekeeping
- [ ] smoking in designated areas
- [X] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [X] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [X] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [X] poison ivy/oak/sumac
- [X] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RON MADDEN		VRHK
Rick Yetman		VRH
JOSHUA MADDEN		VRHK
Ryan Lange		VRHK
Ben Roberts		VRHK
John Snyder		VRHK
DON BROCK		VRHK 730
RYAN TEMPLETON		CARDNO

SWMU 17 Phase II - Daily Contractor Report Photographs – 02 July 2014

NW Ditch new area excavation

NW Ditch new area soil load out

NW Ditch excavation down stream segment

NW Ditch excavation viewed from Boggs Creek

NW Ditch excavation

NW Ditch soil arriving at Containment Pad 1

SWMU 17 Phase II - Daily Contractor Report Photographs – 02 July 2014

Crawler dump truck positioning to unload

Crawler dump truck turret rotation for 90 degree dumping

Unloading NW Ditch non-TSCA soil into Pad 1

Compact excavator managing soils

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	03 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	040	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Ronald S. Madden	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Partly Cloudy	67	88

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent	10.5
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	8.5
	SWMU 17 / Project oversight - EA	VRHabilis	1	Safety	10.5
	SWMU 17 / NW Ditch Excavation - RY	VRHabilis	1	Equipment Operator	10.5
	SWMU 17 / NW Ditch Excavation - JS	VRHabilis	1	Equipment Operator	10.5
	SWMU 17 / NW Ditch Excavation - DB	VRHabilis	1	Laborer	10.5
	SWMU 17 / NW Ditch Excavation - BR	VRHabilis	1	Laborer	10.5
	SWMU 17 / NW Ditch Excavation – JM	VRHabilis	1	Laborer	10.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 82
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 1523.25
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 1605.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Observed personnel entering and exiting NW Ditch to ensure safe techniques and principles are being adhered to with regard to slips, trips and falls.
	Inspected Containment Pad 1 for nitrile gloves and booties and observed proper use of PPE.

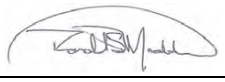
EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	1.0
	VRH Logistics	Bobcat T300 Skid Steer	0.0
	VRH Logistics	John Deere 50D Compact Excavator	2.4
	ATCO Eq	Case CX225 excavator	6.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	3.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	4.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	4.4
	Sunbelt Rentals	Kubota UTV Model RTV900 – S01 (#30)	1.2
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.2
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.7

Schedule Activity No.	REMARKS
	Commence NW Ditch restoration at 700AM.
	NW Ditch restoration completed at 600PM.



CONTRACTOR/SUPERINTENDENT — DATE: 04 July 2014

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 03 July 2014
REPORT NO: 040

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
1	Completed calculations for backfill material in NW Ditch floodplain area and ordered the needed material and amounts.	
2	Commenced with final restoration design methods in upper and lower stretches of NW Ditch.	

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
1	Started backfilling, created step-downs for water to gradually fall over logs and down stream.	
	Laid coir mat in ditch base and coconut matting on side walls.	

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☐ NO ☒

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☐ NO ☒

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	One log placed in stream channel before the deep V where the NW Ditch narrows.
2	Coir anchored well, coconut mat crimped at top.
3	All areas seeded prior to mat installation.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — DATE: 03 July 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUL 3, 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [x] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at: STOP WORK AUTHORITY
- [x] portable tool safety and awareness
- [x] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [x] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [x] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
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- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
John Snyder		VRHK
JOSHUA MADDEN		VRHK
Rick Yetman		VRH
E Adler		VRH
DON BROCK		VRH
Ben Roberts		VRH
Ryan Lane		VRHK
RYAN TEMPLETON		CARollo

SWMU 17 Phase II - Daily Contractor Report Photographs – 03 July 2014

Installing coir matting, NW Ditch, lower segment

Continuation of coir matting installation

NW Ditch from Boggs Creek, looking upstream

Installation of coconut matting to the banks of NW Ditch

NW Ditch, water deceleration step downs

Seeding prior to mat installation

SWMU 17 Phase II - Daily Contractor Report Photographs – 03 July 2014

NW Ditch, flood plain restoration

Preparing installation of log check vane

Upper portion of NW Ditch soil compaction

NW Ditch downstream segment restored

NW Ditch restoration looking towards Boggs Creek

NW Ditch restoration complete with seed and straw

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	07 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	041	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Overcast	70	82

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.0
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	6.0
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.0
	SWMU 17 / Ship NW Ditch soil; Ditch 3 excavation prep - RY	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ship NW Ditch soil; Ditch 3 excavation prep - JS	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ship NW Ditch soil; Ditch 3 excavation prep - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ship NW Ditch soil; Ditch 3 excavation prep - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ship NW Ditch soil; Ditch 3 excavation prep – JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ship NW Ditch soil; Ditch 3 excavation prep - KH	VRHabilis	1	Laborer	10.0
	SWMU 17 / Ship NW Ditch soil; Ditch 3 excavation prep – EA	VRHabilis	1	Laborer	10.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 96
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 1605.25
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 1701.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Observed earth moving machinery operations during soil load out; all personnel were diligent with communication, awareness and wearing of high visibility PPE.
	Inspected vehicles for hospital directions and map.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	5.8
	VRH Logistics	Bobcat T300 Skid Steer	3.6
	VRH Logistics	John Deere 50D Compact Excavator	1.5
	ATCO Eq	Case CX225 excavator	5.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	0.0
	Sunbelt Rentals	Kubota UTV Model RTV900 – S01 (#30)	1.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.2
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.6

Schedule Activity No.	REMARKS
	Began the day with non-TSCA soil load-out from Containment Pad 1 to over-the-road dump trucks for transport to the landfill.
	Commenced vegetation removal and stump reduction in flood plain areas of Ditch 3 in preparation of excavation.
	Completed soil load out and shipping at 1530.
	Located sewer pipe and fiber optic cable in power line corridor of Ditch 3, Segments O & P. Notified the client.

Paul Baril — CONTRACTOR/SUPERINTENDENT

07 July 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 07 July 2014
REPORT NO: 041

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
1	Cleared vegetation in flood plain areas of expected Ditch 3 excavations.	

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
1	Observed soil load out operations.	

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☐ NO ☒

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☐ NO ☒

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Inspected soil load area and found no spillage.
2	Covered Pad 1 to control water accumulation with expected rainfall.
3	

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — DATE: 07 July 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7 July 2014

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [X] Daily work scope reviewed
- [X] safety is everyone=s responsibility
- [X] site health and safety plan reviewed
- [X] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [X] chemical hazards -PCB's
- [X] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [X] orderly site and housekeeping
- [ ] smoking in designated areas
- [X] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [X] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [X] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BAER		VRHK
SCOTT ALOGNA		VRH
Ben Roberts		VRH
JOSHUA MADDEN		VRHK
DON BROCK		VRHK
John Snyder		VRHK
Rick Yetman		VRH
E Adler		VRH
KIM HECKHAUSEN		VRH
Ryan Lane		VRHK

SWMU 17 Phase II - Daily Contractor Report Photographs – 07 July 2014

Containment Pad 1 – preparing for soil shipment

Preparing NW Ditch non-TSCA soil for transport to landfill

NW Ditch non-TSCA soil load out for transport

Crawler Dump Truck inspection prior to use

Performing daily checkout of SWMU-17 Equipment

Vegetation removal / maintenance of haul routes

SWMU 17 Phase II - Daily Contractor Report Photographs – 07 July 2014

Bagging excavator bucket for relocation to Ditch 3

Securing tarps on Containment Pad 1 until next excavation

Receiving Native Class 2 stone for stream restoration

VRHK discussing buried utilities with Tetra Tech

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	10 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	044	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	81	58

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.0
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.0
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.0
	SWMU 17 / Ditch 3, Segment 6 excavation - RY	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ditch 3, Segment 6 excavation - JS	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ditch 3, Segment 6 excavation - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3, Segment 6 excavation - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3, Segment 6 excavation - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3, Segment 6 excavation - KH	VRHabilis	1	Laborer	10.0
	SWMU 17 / Ditch 3, Segment 6 excavation - EA	VRHabilis	1	Laborer	0.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 90
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 1797.5
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 1887.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Conducted weekly training on Scope of Work (TSCA verses Non TSCA) and contamination control.
	Performed Site Safety inspection. No discrepancies noted. Conducted Heat Stress monitoring with checklist. All personnel worked within acceptable parameters.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.2
	VRH Logistics	Bobcat T300 Skid Steer	2.7
	VRH Logistics	John Deere 50D Compact Excavator	5.1
	ATCO Eq	Case CX225 excavator	1.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	1.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	3.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	3.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	4.2
	Sunbelt Rentals	Kubota UTV Model RTV900 – S01 (#30)	1.2
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.2
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.8

Schedule Activity No.	REMARKS
	Commenced initial TSCA soil removal and transfer of the upstream TSCA sediment to contamination staging pad 2. Following the final soil lift to bedrock, a dark oily pungent substance was observed to be on top of and within the bedrock. The Base Environmental Site Restoration Manager and Tetra Tech were notified and both responded to the site. A sample was removed by Tetra Tech for analysis and no further work was conducted at the site. All Earth Moving Machinery (EMM) used to transfer TSCA soils were lined with disposable liners and decontaminated before moving on to non TSCA soil excavation activities.
	Commenced initial soil removal and transfer of the non TSCA soil from Flood Plains 3O and 3P and transferred the soil to contamination staging pad 1. Approximately 4 hours of excavation delay were encountered to locate and remove by hand, soil around a sewer line, telephone line and fiber optic cable that were running through the flood plains. The sewer and telephone lines were located with the assistance of the NAVFAV utilities department and both lines were observed to be intact and undamaged. The fiber optic cable was not located and excavations were resumed along Ditch 3 to the south.
	Staged super sacks adjacent to Ditches 11 and 12 to prepare for the installation of dam works to support the transfer of rain water around excavation sites during storm events.

Paul Baril — 10 July 2014

CONTRACTOR/SUPERINTENDENT — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 10 July 2014
REPORT NO: 043

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Feature of Work – soil excavation.
	Performed QC inspection of TSCA soil excavation to verify final lift depths; No discrepancies noted. All excavations were completed to bedrock as required.
	Performed QC inspection of decontamination procedures of excavator bucket. No discrepancies noted.
	Observed hand digging performed at Flood Plain 3O and 3P to locate and identify a sewer line, telephone line and fiber optic cable running through the excavation site. The sewer and telephone lines were located and were observed to be intact.
	Performed calculations on the following excavated soil quantities beyond the specified amounts identified in the soil excavation quantity tables listed in the Work Plan and the IMWP: North West Ditch – 143.5 cubic yards; Ditch 3upstream TSCA sediment bed – 6.67 cubic yards; Ditch 3 Flood Plains 3O and 3P – 14.5 cubic yards.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

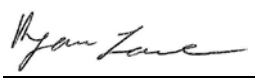
Schedule Activity No.	Description
	No rework items identified

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	Observed a dark oily substance on top of and within the bedrock following the removal of the TSCA soil located at the upstream TSCA sediment location. The Crane Environmental Restoration Site Manager was notified and Tetra Tech removed a sample for analysis.



AUTHORIZED QC MANAGER AT SITE — DATE: 10 July 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/10/14 Thursday.

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [x] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [x] chemical hazards -PCB's TSCA - Non Tosca
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Ryan Lane		VRHK
Joshua Madden		VRH
Don Brock		VRH
Kim Heckhausen		VRH
John Snyder		VRH
Ben Roberts		VRH
Rick Yetman		VRH
Paul Bair		VRH

WEEKLY SAFETY MEETING AND PLANNING FORM

Project Name: SWMU-17
Contract:
Range: NA

Project Location: Crane, IN
Task Order: 006

- Review previous shift's work including safety concerns, near misses or unrecognized hazards
- Review scope of work for the current work shift
- Review safety hazards for the activities planned for the work shift (check appropriate boxes)

	Chemical		Electrical		Eye
	Biological		Heat / Cold Stress		Hearing (noise)
	Confined Space		Fall protection		Emergency procedures
	Ladder		Protective clothing (PPE)		Pinch points
	Scaffolds		Respirators		Knife use
	Overhead obstructions		Equipment & machinery		Slip, Trip, Fall, Cut, and Puncture
	Work Plan		Site Safety & Health Plan		UXO
*	Other: TSCA NON	x	Other: CONTAMINATION CONTROL		Reference attachment

- Review tools, equipment and procedures to be used (i.e., safety, maintenance or inspection requirements)
- Review pre-work inspections to be conducted
- Review emergency plan
- Review end-of-shift work area(s) condition requirements (i.e., cleanup, tools, staging for next shift, etc.)

Name Printed / Initial	Name Printed / Initial
1. Scott Alagna SA	8. Ryan Lane RL
2. Rick VeTowN	9. John Snyder JS
3. Kim Heckhausen KAH	10.
4. ~~John Snyder~~	11.
5. Dan Brock DRB	12.
6. Josh Madden ~~JM~~	~~13.~~
7. Ben Roberts ~~BR~~	~~14~~ BHR

NOTE: Field Supervisors are to upload forms to Sharefile weekly.

Site Safety Officer: ~~Ron Madden~~, Paul Bail, Scott Alagna
Date/Day/Time 7/16/14 Thursday 0730
Signature: S. J. Alagna

* Discussed Scope of Work, defined TSCA, non TSCA contamination, requirements, containment. Outlined 3 personnel

VR Habillis

HEAT STRESS CHECKLIST

Work Analysis: Moderate, and Heavy work

Work Location: Ditch J, Segment 6 **Date:** 7/10/14 Thursday

Description of Work: Excavating, hauling TSCA, non-TSCA soil & Pads

Names of All Persons Working the Job: Rich Ketzman, John Snyder, Don Beech, Josh Maddox, Don Roberts, Paul Baird, Kris Hendrickson, Scott Alegna

Type of Work to be Performed (Check One):

☐	Light	Sitting. desk work, walking
☒	Moderate	Standing, light or moderate arm work, welding
☐	Heavy	Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- ☒ Regular work clothes
- ☐ Regular Anti C's/Coveralls
- ☐ Impermeable clothing (paper or plastic)
- ☐ Other (explain) _____

Respiratory Protection to be Worn (Check One):

- ☐ SCBA
- ☐ Respirator
- ☐ Other

Work Area Monitoring

WBGT Temperature 75° °F Date/Time Taken 0800, 7/10/14

Work Requirements

Administrative Category (Circle One): I (II) III IV

Recommended Stay Time Is: 2 hrs

Recommended RestTime Is: 10 min.

Yes	No	
☐	☒	Personal cooling garment to be used
☐	☒	Shielding
☐	☒	Fans/blowers provided
☒	☐	Fluid/electrolyte available
☒	☐	Cool area identified
☒	☐	Two-men required
☒	☐	All personnel trained within the past year

Approval to Commence Work

S. J. Alegna
Site Safety and Health Specialist

Paul Baird
Site Supervisor's Signature

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	✓	
Hot Work Permit	N/A	
Trenching & Excavation Permit	✓	
Lifting & Carring	—	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	—	
Compacting	—	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	✓	
Ear Protection	✓	
Tyvek	✓	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	—	
Temporary Fencing	—	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer		

ITEM: **NOTES:**

Inspected Reinstalled S.F. Fence. Inspected completed areas for grade adjust & restoration.

SIGNITURE: J. J. Alay **DATE:** 7/10/14

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

SWMU 17 Phase II - Daily Contractor Report Photographs – 10 July 2014

Installing bucket thumb on Case 225 excavator

Performing hand soil removal around sewer line

Installing bed liner to support TSCA soil removal

TSCA soil removal-Ditch 3 upstream sediment

Performing QC inspection on TSCA soil lifts

Tetra Tech/NAVFAV observing TSCA soil lift

SWMU 17 Phase II - Daily Contractor Report Photographs – 10 July 2014

Conducting depth inspection on TSCA soil lifts

Tetra Tech investigates oily substance on bedrock

Spreading TSCA soil in pad 2 to promote drying

Straw crimper staged for use during restoration

Performing non-TSCA soil lift in Flood Plain 3P

Staging super sacks for use as rain water barrier

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	11 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	045	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	84	56

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.0
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.0
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation - RY	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation - JS	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation - KH	VRHabilis	1	Laborer	10.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 90
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 1887.5
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 1977.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. No discrepancies noted.
	Conducted Heat Stress monitoring with checklist. All personnel worked within acceptable parameters.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
		Caterpillar 308 excavator
		500 ft. of lay flat hose and 30 ft. of semi-rigid hose

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0
	VRH Logistics	Bobcat T300 Skid Steer	0.2
	VRH Logistics	John Deere 50D Compact Excavator	7.1
	ATCO Eq	Case CX225 excavator	2.6
	MacAllister	Caterpillar 308 excavator	2.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	2.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	6.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	5.7
	Sunbelt Rentals	Kubota UTV Model RTV900 – S01 (#30)	0.6
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.2
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	2

Schedule Activity No.	REMARKS
	Excavated additional TSCA soils upstream and east of Flood Plains 3O and 3P to an exposed concrete drain pipe.
	Removed all additional oily soils documented and described in VRHK Daily Production Report dated 10 July 2014. Received authorization from the Base Environmental Site Restoration Manager to backfill Flood Plains 3O, 3P and the upstream TSCA sediment bed.
	Completed final excavation of the utilities running through Flood Plains 3O and 3P. The sewer line, telephone line and fiber optic cable were intact and undamaged following the removal of all impacted soils. Approximately 4 additional man-hours were expended to locate and hand remove soil from the utilities. The two day total was 7.5 hours. Following the reintroduction of 1 foot of clean soils, marking tape was applied above the telephone and fiber optic lines and the flood plain was backfilled.
	Approximately 24 cubic yards of TSCA soil and 105 cubic yards of non-TSCA soil were transported to the contamination pads to await final transportation for disposal.

Paul Baril — 11 July 2014

CONTRACTOR/SUPERINTENDENT — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 11 July 2014
REPORT NO: 045

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Features of Work – Excavation of impacted soils; Backfilling and restoration activities.
	Performed QC inspection of TSCA soil excavation to verify final lift depths; No discrepancies noted. All excavations were completed to bedrock as required.
	Performed QC inspection of decontamination procedures of Earth Moving Equipment. Changed equipment decontamination procedures to include less diesel fuel and the use of more cloths to remove soil contamination.
	Observed hand digging performed at Flood Plain 3O and 3P to locate and identify a sewer line, telephone line and fiber optic cable running through the excavation site. The fiber optic cable was located and was intact and undamaged.
	Performed calculations on the following excavated soil quantities to date beyond the specified amounts identified in the soil excavation quantity tables listed in the Work Plan and the IMWP: Ditch 3 upstream TSCA sediment bed – 17 cubic yards; Ditch 3 Flood Plains 3O additional depth – 37.5 cubic yards.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — 11 July 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/11/14 Friday

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Focus Four (OSHA)

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Don Brock		VRM
Joshua Madden		VRH
Ryan Lane		VRHK
Kim Heckhausen		VRH
Rick Yetman		VRH
Paul Bartel		VRH
Larry Emerson		VRH Kemron
Ben Roberts		VRH
John Snyder		VRH
Ryan Templeton		Cardno

Form B

Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	✓	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	✓	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	—	
Compacting	—	
Trenching	—	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	—	
Ear Protection	✓	
Tyvek	—	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	—	
Temporary Fencing	—	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

Watched excavation of TSCA, NON-TSCA and Shoveling wearing boots, Gloves.

SIGNITURE: J. J. Alagna **DATE:** 7/11/14 1130

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VRabilis

HEAT STRESS CHECKLIST

Work Analysis: Moderate - Heavy

Work Location: Ditch 3 Seg. 6 **Date:** 7/11/14

Description of Work: Shoveling, Excavating, hauling TSCA + NON-TSCA

Names of All Persons Working the Job: Rich Peterson, John Snyder, Josh Madden, Ben Roberts, Kris Heckhausen, Paul Baril, Scott Alogna

Type of Work to be Performed (Check One):

☐	Light	Sitting. desk work, walking
☒	Moderate	Standing, light or moderate arm work, welding
☒	Heavy	Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- ☒ Regular work clothes
- ☐ Regular Anti C's/Coveralls
- ☐ Impermeable clothing (paper or plastic)
- ☐ Other (explain) _____

Respiratory Protection to be Worn (Check One):

- ☐ SCBA
- ☐ Respirator
- ☐ Other

Work Area Monitoring

WBGT Temperature 81° °F Date/Time Taken 7/11/14, 1120

Work Requirements

Administrative Category (Circle One): I (II) III IV

Recommended Stay Time Is: 2 Hrs

Recommended RestTime Is: 15 min

Yes	No	
☐	☒	Personal cooling garment to be used
☐	☒	Shielding
☐	☒	Fans/blowers provided
☒	☐	Fluid/electrolyte available
☒	☐	Cool area identified
☒	☐	Two-men required
☒	☐	All personnel trained within the past year

Approval to Commence Work

J. Alogna
Site Safety and Health Specialist

Paul Baril
Site Supervisor's Signature

SWMU 17 Phase II - Daily Contractor Report Photographs – 11 July 2014

Conducting the VRHK morning safety meeting

Removing soil adjacent to utility lines

Performing hand soil removal around utilities

Performing QC checks on Flood Plains 3O & 3P

Performing DECON on crawler dumps

Installing stone behind Flood Plains 3O and 3P

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	12 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	046	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Scattered clouds	Light rain	82	66

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	7.75
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	7.75
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	7.75
	SWMU 17 / Ditch 3 Segment 6 excavation; restoration - RY	VRHabilis	1	Equipment Operator	7.75
	SWMU 17 / Ditch 3 Segment 6 excavation; restoration - JS	VRHabilis	1	Equipment Operator	7.75
	SWMU 17 / Ditch 3 Segment 6 excavation; restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	7.75
	SWMU 17 / Ditch 3 Segment 6 excavation; restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	7.75
	SWMU 17 / Ditch 3 Segment 6 excavation; restoration - JM	VRHabilis	1	Crawler Dump Driver/Laborer	7.75
	SWMU 17 / Ditch 3 Segment 6 excavation; restoration - KH	VRHabilis	1	Laborer	7.75
	SWMU 17 / Ditch 3 Segment 6 excavation; restoration - EA	VRHabilis	1	Laborer	7.75

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 77.5
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 1977.5
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 2055

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. No discrepancies noted.
	Conducted Heat Stress monitoring with checklist. All personnel worked within acceptable parameters.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	3.2
	VRH Logistics	Bobcat T300 Skid Steer	1.5
	VRH Logistics	John Deere 50D Compact Excavator	2
	ATCO Eq	Case CX225 excavator	2.4
	MacAllister	Caterpillar 308 excavator	8.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	3.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	3.3
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	3.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	4.2
	Sunbelt Rentals	Kubota UTV Model RTV900 – S01 (#30)	2.1
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.8
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.9

Schedule Activity No.	REMARKS
	Completed the restoration of the upstream TSCA sediment bed and Flood Plains 3O and 3P including additional step outs and approximately 180 cubic yards of approved backfill was installed into same. The restored areas were seeded and erosion control blankets applied where required.
	Removed approximately 18 cubic yards of non-TSCA soil from Ditch 3 segment 6 west of Flood Plains 3O and 3P. The slopes of the ditch were seeded and approximately 300 feet of erosion control blankets were applied along the entire bank.

Paul Baril — CONTRACTOR/SUPERINTENDENT

12 July 2014 — DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 12 July 2014
REPORT NO: 046

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
	Definable Features of Work – Excavation of impacted soils; Backfilling and restoration activities.
	Performed QC inspection on silt fence in support of upcoming rain events.
	Performed QC inspection on stop point at Ditch 3 segment 6 using hay bales and logs to prevent erosion during rain events.
	Preformed QC inspection on the installation of approved backfill soils.
	Preformed QC inspection on the restoration of Flood Plains 3O and 3P; seeding and erosion control blankets.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

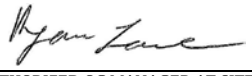
Schedule Activity No.	Description
	No rework items identified

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.



AUTHORIZED QC MANAGER AT SITE — DATE: 12 July 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/12/14 Saturday

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Focus Four (osha)

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Ben Roberts		VRH
John Snyder		VRH
DON BROCK		VRH
JOSHUA MADDEN		VRH
Rick Yetman		VRH
Ed Adler		VRH
PAUL BARTL		VRH
KIM HECKHAUSEN		VRH
Ryan Lane		VRHK
ETHAN TEMPLETON		CARDNO

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	SAFE	UNSAFE
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	SAFE	UNSAFE
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	SAFE	UNSAFE
HWP (Hazardous Work Permit)	✓	
Hot Work Permit	✓	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	✓	
Dust Control	✓	
Silt Fence Installation	✓	
WWTP	✓	
Grading	✓	
Compacting	✓	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	SAFE	UNSAFE
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	SAFE	UNSAFE
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	✓	
Ear Protection	✓	
Tyvek	✓	
GENERAL OBSERVATION:	SAFE	UNSAFE
Surveying	✓	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

Restoration of Ditch 3 Segment 6, TSCA + ovw-TSCA

SIGNITURE: J. J. Alex DATE: 7/12/14

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VRabilis

HEAT STRESS CHECKLIST

Work Analysis: Moderate

Work Location: Ditch 3, Segment 6 **Date:** 7/12/14 Saturday

Description of Work: Excavation, Restoration, Hauling

Names of All Persons Working the Job: Rick Yetsaw, John Snyder, Josh Hadden, Ben Roberts, Don Brock, Paul Bacil

Type of Work to be Performed (Check One):

- ☐ Light — Sitting. desk work, walking
- ☑ Moderate — Standing, light or moderate arm work, welding
- ☐ Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- ☑ Regular work clothes
- ☐ Regular Anti C's/Coveralls
- ☐ Impermeable clothing (paper or plastic)
- ☐ Other (explain) _____

Respiratory Protection to be Worn (Check One):

- ☐ SCBA
- ☐ Respirator
- ☐ Other

Work Area Monitoring

WBGT Temperature 75° °F Date/Time Taken 7/12/14 0730

Work Requirements

Administrative Category (Circle One): I (II)* (III) IV

Recommended Stay Time Is: 2 Hours

Recommended RestTime Is: 15 minutes

Yes	No	
☐	☑	Personal cooling garment to be used
☐	☑	Shielding
☐	☑	Fans/blowers provided
☑	☐	Fluid/electrolyte available
☑	☐	Cool area identified
☑	☐	Two-men required
☑	☐	All personnel trained within the past year

Approval to Commence Work

J. J. Alag
Site Safety and Health Specialist

Paul Bacil
Site Supervisor's Signature

SWMU 17 Phase II - Daily Contractor Report Photographs – 12 July 2014

Flood Plains awaiting approved backfill

Installing approved backfill in Flood Plain 3O/3P

Crawler dump truck receiving backfill

Preparing to remove large stump in Ditch 3 SEG 6

Removing Non-TSCA soils from Ditch 3 Segment 6

Removing stumps from Ditch 3 Segment 6 west

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	15 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	046
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN		
CONTRACTOR	VRHabilis-KEMRON, LLC	SUPERINTENDENT	Elliott J. Adler
AM WEATHER	Clear	PM WEATHER	Scattered Clouds
MAX TEMP (F)	71	MIN TEMP (F)	57

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - EA	VRHabilis	1	Site Superintendent	10.5
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.5
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.5
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - RY	VRHabilis	1	Equipment Operator	10.5
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - JS	VRHabilis	1	Equipment Operator	10.5
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.5
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.5
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration – JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.5
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - KH	VRHabilis	1	Laborer	10.5
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration –	VRHabilis	0	Laborer	0.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	94.50
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1701.25
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1795.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Extensive safety briefing and frequent discussions and safety talks throughout the day regarding slips, trips, and falls due to wet, slippery site conditions.
	Inspected EMM floors, steps, and all ingress / egress points to ensure tidy and free of dirt / mud buildup. All operators are maintaining clean, safe equipment.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	1.5
	VRH Logistics	Bobcat T300 Skid Steer	0.4
	VRH Logistics	John Deere 50D Compact Excavator	0.1
	MacAllister	Caterpillar 308 Excavator	1.2
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	1.2
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	1.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	1.1
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	2.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.5
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	2.5

Schedule Activity No.	REMARKS
	Began the day with chainsaw work for stump reduction to 12-inches ABL and vegetation removal in Ditch 3, segments 1 & 2 due to slippery conditions upstream.
	Additional areas in Ditch 8 were seeded along with a few areas reseeded and straw was applied accordingly.
	Due to heavy rainfall, a restored area of the NW Ditch was washed out from a feeding tributary. VRHK personnel repaired / restored this area.
	Once site conditions dried out, approximately 09 cubic yards of non-TSCA soil was excavated from Ditch 3 segment 6.
	Layout the excavation area (located pins) in 17SD105.

CONTRACTOR/SUPERINTENDENT — 15 July 2014 DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 15 July 2014
REPORT NO: 046

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Personnel used proper PPE while cutting tree stumps.
2	Trucks using liners to haul wet waste from Ditch 3.
3	Crawler dump truck tailgate failure on haul route. Team cleaned up all non-TSCA soil spillage.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — 15 July 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

KEMRON
ENVIRONMENTAL SERVICES

Accident/Incident Report

MUST BE COMPLETED WITHIN 24 HOURS OF THE INCIDENT

GENERAL INFORMATION

SITE INFORMATION

Job Name: SWMU 17

Physical Address: 300 Hwy 361, B. 2516
Crane, IN 47522

EMPLOYEE INFORMATION

Employee Name:

Home Address:

SS#:

Age and Gender:

Length of Employment:

Length of Time at Current Job:

INCIDENT INFORMATION

Location of Injury/Illness/Incident: Soil Spill

Date and Time of Incident: 3:00pm 7-15-14

Date Investigated: 7-15-14

Witnessed By: R Lane

Project Manager: Ron Madden

Type of PPE Worn

(if inadequate, explain)

CLASSIFICATION (circle all that apply)

INJURY/ILLNESS

No Injury	Irritation
Abrasion	Laceration
Bruise	Noise
Chemical Burn	Physical Agent
Cumulative Trauma	Puncture
Dislocation	Sprain/Strain
Foreign Body	Thermal Burn
Fracture	Death
Inhalation	Other (explain below)

INCIDENT

Auto	(Leak/Spill)
Client's Property	Near Miss (explain)
Equipment	Subcontractor (explain)
Fire/Explosion	Other (explain)

Equipment Involved in Incident: Tracked Dump Truck

PART OF BODY

Eye	L	R
Ear	L	R
Head	L	R
Neck	L	R
Shoulder	L	R
Arm	L	R
Elbow	L	R
Wrist	L	R
Hand	L	R
Fingers	L	R
Chest	L	R
Abdomen	L	R
Back	L	R
Leg	L	R
Knee	L	R
Ankle	L	R
Foot	L	R
Other		

KEMRON
ENVIRONMENTAL SERVICES

Accident/Incident Report

MUST BE COMPLETED WITHIN 24 HOURS OF THE INCIDENT

DESCRIBE THE INCIDENT IN DETAIL

Include photographs, drawings, diagrams, and any other pertinent information

Ryan Lane noticed a tailgate failure on a truck Dump crossing Ditch 12. Once the truck was stopped it had traveled to Station 50+00 Tetra Tech was onsite & notified the Navy. All Soil was Scraped and loaded into off Road dumps for piling at Pad 1. Tetra Tech was satisfied with the removal and plans to sample haul route after its use has completed, All Soil and other tree debris were taken to the pad for disposal. Rick Yetman & team inspected tailgate functionality and determined it was in working order.

IMMEDIATE CORRECTIVE ACTION DESCRIPTION

Assigned To: Rick Yetman Completion Date: 7-15-14

SAFETY RULES AND PROCEDURES

None Established	None Recommended	Lack of Training	(Adequate)
Inadequate	Unsafe Condition	Other (describe)	

FIRST AID/MEDICAL INFORMATION

Was First Aid Provided?	Y	N	Bloodborne Pathogens Incident?	Y	N
Type of Treatment Given:			Did Kemron Respond?	Y N	N/A
			Employee Exposed to		
Who Gave the Treatment?			blood or infectious material?	Y	N
Medical Treatment Given?	Y	N	Hospital Name/Address:		
(attach medical report					
if available)					
Physician Name:			Work Limitation Given?	Y	N
Physician Address:			Describe Any Work Limitation:		
Phone:			Return To Work Date:		

ACCIDENT REVIEW BOARD INFORMATION

Completed By: Ryan Lane Date: 7-15-14

Approved By: _____ Date: _____

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/15/14 Tuesday

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [x] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
DON BROCK		VRH
JOSHUA MADDEN		VRH
John Snyder		VRH
Rick Yeatman		VRH
E Adler		VRH
KIM HECKHAUSEN		VRH
Ryan Lane		VRHK
Ben Roberts		VRH

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	16 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	047	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Ronald S. Madden	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Partly Cloudy	53	74

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent	10.0
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.0
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - RY	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - JS	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration – JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - KH	VRHabilis	1	Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration – EA	VRHabilis	1	Laborer	10.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	100.00
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1795.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1895.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Contamination control and awareness was discussed along with proper wear and use of PPE.
	Inspected use of engineering controls to minimize or reduce the spread of TSCA contamination. All work plan and accident prevention plan procedures in adherence.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.5
	VRH Logistics	Bobcat T300 Skid Steer	0.0
	VRH Logistics	John Deere 50D Compact Excavator	5.5
	MacAllister	Caterpillar 308 Excavator	5.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	6.3
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	1.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	3.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	2.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	6.3
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.4

Schedule Activity No.	REMARKS
	Excavations of non-TSCA and TSCA materials continue in Ditch 3, segment 6.
	A water diversion pipe around system was installed in Ditch 3 redirecting water to Ditch 11
	Removed approximately 30 cuyds of non-TSCA and 6 cuyds of TSCA from Ditch 3 Segment 6.

CONTRACTOR/SUPERINTENDENT — DATE: 16 July 2014

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	*
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	✓	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	—	
Compacting	—	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	✓	
Ear Protection	✓	
Tyvek	✓	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

* Jerk madden Track Dump, broken hand grab (railing)

SIGNITURE: T. J. Alsop **DATE:** 7/16/14 Wednesday

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VRabilis

HEAT STRESS CHECKLIST

Work Analysis: Moderate - Heavy

Work Location: Crane, District 3 Seg. 6 **Date:** 7/16/14 Wednesday

Description of Work: Excavating, hauling, Chainsaw work.

Names of All Persons Working the Job: Rick Y., John S., Josh M., Dan R., Dan Baeck, Kris H.

Type of Work to be Performed (Check One):

- ☐ Light — Sitting. desk work, walking
- ☑ Moderate — Standing, light or moderate arm work, welding
- ☑ Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- ☑ Regular work clothes
- ☐ Regular Anti C's/Coveralls
- ☐ Impermeable clothing (paper or plastic)
- ☐ Other (explain) _____

Respiratory Protection to be Worn (Check One):

- ☐ SCBA
- ☐ Respirator
- ☐ Other

Work Area Monitoring

WBGT Temperature 76 °F Date/Time Taken 7/16/14 | 1400

Work Requirements

Administrative Category (Circle One): I II (III) IV

Recommended Stay Time Is: 2 Hrs.

Recommended RestTime Is: 15 Min.

Yes	No	
☐	☑	Personal cooling garment to be used
☐	☑	Shielding
☐	☑	Fans/blowers provided
☑	☐	Fluid/electrolyte available
☑	☐	Cool area identified
☑	☐	Two-men required
☑	☐	All personnel trained within the past year

Approval to Commence Work

Scott Alog
Site Safety and Health Specialist

Site Supervisor's Signature

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 16 July 2014
REPORT NO: 047

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☐ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☐ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Decommissioned crawler dump truck with faulty tailgate.
2	Inspected roadway and pad to verify cleanup of spillage was adequate.
3	Upstream non-TSCA soil excavated to bedrock up to TSCA area.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — 16 July 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

KEMRON
ENVIRONMENTAL SERVICES

Accident/Incident Report

MUST BE COMPLETED WITHIN 24 HOURS OF THE INCIDENT

GENERAL INFORMATION

SITE INFORMATION

Job Name: SWMU-17

Physical Address: 300 Hwy 361, B2516
Crane, IN 47522

EMPLOYEE INFORMATION

Employee Name: Ryan Lane

Home Address:

SS#:

Age and Gender:

Length of Employment:

Length of Time at Current Job:

INCIDENT INFORMATION

Location of Injury/Illness/Incident: Soil Spill

Date and Time of Incident: 8:40 AM 7-16-14

Date Investigated: 7-16-14

Witnessed By: Ryan Lane

Project Manager: Ron Madden

Type of PPE Worn

(if inadequate, explain)

CLASSIFICATION (circle all that apply)

INJURY/ILLNESS

No Injury	Irritation
Abrasion	Laceration
Bruise	Noise
Chemical Burn	Physical Agent
Cumulative Trauma	Puncture
Dislocation	Sprain/Strain
Foreign Body	Thermal Burn
Fracture	Death
Inhalation	Other (explain below)

INCIDENT

Auto	(Leak/Spill)
Client's Property	Near Miss (explain)
Equipment	Subcontractor (explain)
Fire/Explosion	Other (explain)

Equipment Involved in Incident: Tractor Dump Truck

PART OF BODY

Eye	L	R
Ear	L	R
Head	L	R
Neck	L	R
Shoulder	L	R
Arm	L	R
Elbow	L	R
Wrist	L	R
Hand	L	R
Fingers	L	R
Chest	L	R
Abdomen	L	R
Back	L	R
Leg	L	R
Knee	L	R
Ankle	L	R
Foot	L	R
Other		

KEMRON
ENVIRONMENTAL SERVICES

Accident/Incident Report

MUST BE COMPLETED WITHIN 24 HOURS OF THE INCIDENT

DESCRIBE THE INCIDENT IN DETAIL

Include photographs, drawings, diagrams, and any other pertinent information

Tracked dump had a tailgate failure traversing uphill to Pad 1. Gate was checked earlier and stayed latched until the end of the trip. Soil was scraped from the gravel on the haul route & removed from the pad 1 location. The truck was taken out of service until the gate can be repaired or the truck switched out.

IMMEDIATE CORRECTIVE ACTION DESCRIPTION

Truck taken out of service. Maintenance procedures to tailgate proved to be inadequate.

Assigned To: Ryan Lane Completion Date: 7-16-14

SAFETY RULES AND PROCEDURES

None Established	None Recommended	Lack of Training	Adequate
(Inadequate)	Unsafe Condition	Other (describe)	

FIRST AID/MEDICAL INFORMATION

Was First Aid Provided?	Y	N	Bloodborne Pathogens Incident?	Y	N
Type of Treatment Given:			Did Kemron Respond?	Y N	N/A
			Employee Exposed to		
Who Gave the Treatment?			blood or infectious material?	Y	N
Medical Treatment Given?	Y	N	Hospital Name/Address:		
(attach medical report					
if available)					
Physician Name:			Work Limitation Given?	Y	N
Physician Address:			Describe Any Work Limitation:		
Phone:			Return To Work Date:		

ACCIDENT REVIEW BOARD INFORMATION

Completed By: Klane Date: 7-16-14

Approved By: _____ Date: _____

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/16/14

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards - PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [x] latex gloves inner/nitrile gloves outer
- [x] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading
- [x] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
R. CK Yetman		VRH
John Snyder		VRH
JOSHUA MADDEN		VRH
DON BROCK		VRH
Ben Roberts		VRH
Ryan Lane		VRHK
ROB MADDEN		VRHK
KIM NECKHAUSEN		VRH
E Adler		VRH

SWMU 17 Phase II - Daily Contractor Report Photographs – 16 July 2014

Ditch 3, segment 6, non-TSCA stream excavation

Ditch 3, segment 6, crawler dump loading of non-TSCA

Ditch 3, segment 6, water diversion installation

Ditch 3, segment 6, pump around water diversion installation

Ditch 3, segment 6, TSCA stream excavation

Ditch 3, segment 6, crawler dump loading of TSCA

SWMU 17 Phase II - Daily Contractor Report Photographs – 16 July 2014

Ditch 3 TSCA timber size reduction for load out

Tetra Tech and VRHK personnel observing operations

Crawler dump with bed liner at Pad 2 (TSCA containment)

Crawler dump emptying TSCA sediment into Pad 2

Ditch 3 segment 6 upstream restoration

Ditch 3 segment 6 upstream restoration

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 17 July 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	048

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Clear	53	78

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent	10.0
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.0
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - RY	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - JS	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration – JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration - KH	VRHabilis	1	Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6 excavation & restoration – EA	VRHabilis	1	Laborer	10.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	100.00
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1895.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	1995.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Hydration and heat stress training conducted.
	Inspected EMM hand hold devices and found one hand hold broken. Item is scheduled for repair first thing in the morning.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.2
	VRH Logistics	Bobcat T300 Skid Steer	0.2
	VRH Logistics	John Deere 50D Compact Excavator	1.5
	MacAllister	Caterpillar 308 Excavator	7.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	8.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	4.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	2.9
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	7.0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.4

Schedule Activity No.	REMARKS
	Excavations of non-TSCA and TSCA materials continue in Ditch 3, segment 6.
	Restoration efforts remain on the heels of the excavation and removal of contaminated soils.
	Removed approximately 54 cuyds of non-TSCA, 39 cuyds of TSCA, and 18 cuyds of non-TSCA and stump mixture from Ditch 3 Segment 6.

CONTRACTOR/SUPERINTENDENT — DATE: 17 July 2014

Form B

Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	○	*
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	✓	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	✓	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	✓	
Compacting	✓	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	—	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment		
Ear Protection	✓	
Tyvek	✓	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	✓	
Seeding	—	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	—	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

* Hand rail (grab) backer on the bottom, Josh Modified machine.

SIGNITURE: J. J. Alby **DATE:** 7/17/14

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VHabilis

HEAT STRESS CHECKLIST

Work Analysis: Moderate - Heavy

Work Location: Ditch 3 Segment 5 + 6 **Date:** 7/17/14 Thursday

Description of Work: Excavating, hauling, Decontaminating

Names of All Persons Working the Job: Rick Peterson, John Snyder, Josh Maddox, Ben Jones, Dan Brock, Elliott Bolton, Ron Maddox, Scott Alegna

Type of Work to be Performed (Check One):

- ☐ Light — Sitting. desk work, walking
- ☒ Moderate — Standing, light or moderate arm work, welding
- ☒ Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- ☒ Regular work clothes
- ☐ Regular Anti C's/Coveralls
- ☐ Impermeable clothing (paper or plastic)
- ☐ Other (explain) _____

Respiratory Protection to be Worn (Check One):

- ☐ SCBA
- ☐ Respirator
- ☐ Other

Work Area Monitoring

WBGT Temperature 82 °F Date/Time Taken 7/17/14 1235

Work Requirements

Administrative Category (Circle One): I II (III) IV

Recommended Stay Time Is: 2 Hrs

Recommended RestTime Is: 15 minutes

Yes	No	
☐	☑	Personal cooling garment to be used
☐	☑	Shielding
☐	☑	Fans/blowers provided
☑	☐	Fluid/electrolyte available
☑	☐	Cool area identified
☑	☐	Two-men required
☑	☐	All personnel trained within the past year

Approval to Commence Work

Scott Alegna
Site Safety and Health Specialist

_____
Site Supervisor's Signature

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 17 July 2014
REPORT NO: 048

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☐ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☐ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Crawler dump truck with faulty tailgate put back into service only with use of a mechanical block of the tailgate. Cargo strap is cinched tight to hold tailgate closed. Even though only one crawler dump of the two with tailgates failed, both crawler dumps with tailgates are now using straps to ensure load security.
2	Checked depths in TSCA area. Total of 13 loads of TSCA today and 2 loads yesterday.
3	Checked depths of excavation in upstream non-TSCA area and in 3N. Both areas were at 1-foot depth.
4	Pad 1 is secure and no spillage noted or observed.
	EXTRA VOLUME TOTALS: TSCA = 54 CUYD. NON-TSCA = 377 CUYD.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — 17 July 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

KEMRON
ENVIRONMENTAL SERVICES

Accident/Incident Report

MUST BE COMPLETED WITHIN 24 HOURS OF THE INCIDENT

GENERAL INFORMATION

SITE INFORMATION

Job Name: SWMU-17

Physical Address: 300 Hwy 361, Bld 2516
Crane, IN 47522

EMPLOYEE INFORMATION

Employee Name:

Home Address:

SS#:

Age and Gender:

Length of Employment:

Length of Time at Current Job:

INCIDENT INFORMATION

Location of Injury/Illness/Incident: Zone 9, Rd 1 Area

Date and Time of Incident: July 17, 3:30 pm

Date Investigated: July 17,

Witnessed By: Tom Tetra Tech

Project Manager: Ron Madden

Type of PPE Worn

(if inadequate, explain)

CLASSIFICATION (circle all that apply)

INJURY/ILLNESS

No Injury	Irritation
Abrasion	Laceration
Bruise	Noise
Chemical Burn	Physical Agent
Cumulative Trauma	Puncture
Dislocation	Sprain/Strain
Foreign Body	Thermal Burn
Fracture	Death
Inhalation	Other (explain below)

INCIDENT

Auto	(Leak/Spill)
Client's Property	Near Miss (explain)
Equipment	Subcontractor (explain)
Fire/Explosion	Other (explain)

Equipment Involved in Incident: Tracked Dump Truck

PART OF BODY

Eye	L	R
Ear	L	R
Head	L	R
Neck	L	R
Shoulder	L	R
Arm	L	R
Elbow	L	R
Wrist	L	R
Hand	L	R
Fingers	L	R
Chest	L	R
Abdomen	L	R
Back	L	R
Leg	L	R
Knee	L	R
Ankle	L	R
Foot	L	R
Other		

Kemron
ENVIRONMENTAL SERVICES

Accident/Incident Report

MUST BE COMPLETED WITHIN 24 HOURS OF THE INCIDENT

DESCRIBE THE INCIDENT IN DETAIL

Include photographs, drawings, diagrams, and any other pertinent information

When traversing up the steep hill onto the roadway to pad, a small amount of liquid which had vibrated to the top of the truck bed splashed out of the side of the truck. VRHK crew members cleaned up the spill immediately.

IMMEDIATE CORRECTIVE ACTION DESCRIPTION

All drivers will inspect loads throughout the travel to offload. loads will be filled less. Decanting on floodplain area will be enforced.

Assigned To: Completion Date:

SAFETY RULES AND PROCEDURES

None Established	None Recommended	Lack of Training	Adequate
Inadequate	Unsafe Condition	Other (describe)	

FIRST AID/MEDICAL INFORMATION

Was First Aid Provided?	Y	N	Bloodborne Pathogens Incident?	Y	N
Type of Treatment Given:			Did Kemron Respond?	Y N	N/A
			Employee Exposed to		
Who Gave the Treatment?			blood or infectious material?	Y	N
Medical Treatment Given?	Y	N	Hospital Name/Address:		
(attach medical report					
if available)					
Physician Name:			Work Limitation Given?	Y	N
Physician Address:			Describe Any Work Limitation:		
Phone:			Return To Work Date:		

ACCIDENT REVIEW BOARD INFORMATION

Completed By: A. Lane Date: 7-17-14

Approved By: _____ Date: _____

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/17/14 Thursday

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [X] Daily work scope reviewed
- [X] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [X] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [X] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [X] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Chainsaw use

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Ben Roberts		VRH
Ryan Lane		VRHK
RON MADDEN		VRHK
DON BROCK		VRH
Rick Yetman		VRH
John Snyder		VRH
JOSHUA MADDEN		VRH
RYAN TEMPLETON		CARDNO

SWMU 17 Phase II - Daily Contractor Report Photographs – 17 July 2014

Pad 2 (TSCA), post dump, securing tailgate with cargo strap

Driver secures the strap to a bracket on one side of bed

Driver secures other end of strap to the opposing bracket

Driver uses ratchet handle to tighten strap to secure tailgate

Driver ensures both sides are secure in the brackets

Driver coils up remaining unused portion of cargo strap

SWMU 17 Phase II - Daily Contractor Report Photographs – 17 July 2014

Driver secures coiled up strap to the tightened cargo strap

Completed cargo strap securing of tailgate

Crawler dump with cargo strap installed to secure tailgate

Both crawler dumps with cargo straps installed

Ditch 3 segment 6 TSCA stream excavation

Ditch 3 segment 6 TSCA stream excavation

SWMU 17 Phase II - Daily Contractor Report Photographs – 17 July 2014

Ditch 3 segment 6 TSCA stream excavation

Ditch 3 segment 6 non-TSCA stream excavation

Ditch 3 segment 6 non-TSCA stream excavation

Ditch 3 segment 6 non-TSCA stream excavation

Non-TSCA stream sediment load out into crawler dump

Non-TSCA stream sediment load out into crawler dump

SWMU 17 Phase II - Daily Contractor Report Photographs – 17 July 2014

Ditch 3 segment 6 stream restoration coir mat installation

Ditch 3 segment 6 stream restoration coir mat installation

Simultaneous restoration and excavation activities

Simultaneous restoration and excavation activities

Ditch 3 segment 6 stream restoration

Ditch 3 segment 6 timber selection for ditch crossing

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	18 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	049
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN		
CONTRACTOR	VRHabilis-KEMRON, LLC	SUPERINTENDENT	Ronald S. Madden
AM WEATHER	Clear	PM WEATHER	Mostly Cloudy
MAX TEMP (F)	54	MIN TEMP (F)	79

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent	10.0
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.0
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.0
	SWMU 17 / Ditch 3 Segment 6/5 excavation & restoration - RY	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ditch 3 Segment 6/5 excavation & restoration - JS	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ditch 3 Segment 6/5 excavation & restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6/5 excavation & restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6/5 excavation & restoration – JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6/5 excavation & restoration - KH	VRHabilis	1	Laborer	10.0
	SWMU 17 / Ditch 3 Segment 6/5 excavation & restoration – EA	VRHabilis	1	Laborer	10.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	100.00
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	1995.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	2095.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Lifting and carrying techniques were inspected during site operations and witnessed as having safe work practices being implemented.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.6
	VRH Logistics	Bobcat T300 Skid Steer	0.5
	VRH Logistics	John Deere 50D Compact Excavator	5.2
	MacAllister	Caterpillar 308 Excavator	4.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	6.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	2.9
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	3.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	4.3
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	4.6
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.4
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	2.2

Schedule Activity No.	REMARKS
	Excavation and restoration of non-TSCA material continued in Ditch 3, segment 6 and excavation commenced in segment 5.
	Pad-2 area was prepped for non-TSCA soil load out and transportation on Monday, July 21.
	Removed approximately 105 cuyds of non-TSCA soil sediments from Ditch 3 Segment 6.

CONTRACTOR/SUPERINTENDENT — 18 July 2014 DATE

Form B

Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	✓	
Compacting	✓	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	—	
Ear Protection	✓	
Tyvek	✓	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

SIGNITURE: T. J. Calog **DATE:** 7/18/14 Friday

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VHabilis

HEAT STRESS CHECKLIST

Work Analysis: Moderate

Work Location: Crane, IN Ditch 3 Sy. 5 **Date:** 7/18/14 Friday

Description of Work: Excavating, Hauling, Silt Fence Installation & Shoveling

Names of All Persons Working the Job: Scott A, Elliott A, Dan Madden, Rich Yetman, Josh Madden, Dan B., Dan Roberts, Kim H.

Type of Work to be Performed (Check One):

- [x] Light — Sitting. desk work, walking
- [x] Moderate — Standing, light or moderate arm work, welding
- [x] Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- [x] Regular work clothes
- [ ] Regular Anti C's/Coveralls
- [ ] Impermeable clothing (paper or plastic)
- [ ] Other (explain) _____

Respiratory Protection to be Worn (Check One):

- [ ] SCBA
- [ ] Respirator
- [ ] Other

Work Area Monitoring

WBGT Temperature 75 °F Date/Time Taken 7/18/14 / 0918

Work Requirements

Administrative Category (Circle One): I (II) (III) IV

Recommended Stay Time Is: 2 Hrs.

Recommended RestTime Is: 15 MIN.

Yes	No	
[ ]	[x]	Personal cooling garment to be used
[ ]	[x]	Shielding
[ ]	[x]	Fans/blowers provided
[x]	[ ]	Fluid/electrolyte available
[x]	[ ]	Cool area identified
[x]	[ ]	Two-men required
[x]	[ ]	All personnel trained within the past year

Approval to Commence Work

S. J. Alg
Site Safety and Health Specialist

_____
Site Supervisor's Signature

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 18 July 2014
REPORT NO: 049

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☐ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☐ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Excavation in ditch near break point for segment 6 and segment 5 depths are at 0.8 feet.
2	Excavated all of area 3M to 0.5 feet
3	Began excavations at 3J floodplain to 0.5 feet.
4	All trucks completed round-trips from Ditch 3 segments 6 and 5 to Pad-2 with zero spillage.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

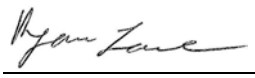
Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	ADDITIONAL VOLUME TOTALS: TSCA = 54 CUYD NON-TSCA = 377 CUYD



AUTHORIZED QC MANAGER AT SITE — 18 July 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/18/14 Friday

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- ☒ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☐ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☐ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☐ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Track Truck, Swing Loader

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Rick Yetman		VRH
RONALD MADDEN		VRHK
DON BROCK		VRH
E Adler		VRHK
Ben Roberts		VRH
John Sydo		VRH
Kim HECKHAUSEN		VRH
Joshua Madden		VRH
Ryan Lane		VRHK

SWMU 17 Phase II - Daily Contractor Report Photographs – 18 July 2014

Zone 9 – Pad 1 Non-TSCA soil management

Zone 9 – Pad 1 crawler dump departing after dumping

Zone 9 – Pad 1 Young Trucking delivering top soil

Zone 9 – Pad 1 crawler dump waiting to unload non-TSCA

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	19 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	050
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN		
CONTRACTOR	VRHabilis-KEMRON, LLC	SUPERINTENDENT	Ronald S. Madden
AM WEATHER	Clear	PM WEATHER	Mostly Cloudy
MAX TEMP (F)	54	MIN TEMP (F)	79

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent	5.0
	SWMU 17 / Project oversight - RL	VRHabilis	0	Quality Control	0.0
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	5.0
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - RY	VRHabilis	1	Equipment Operator	3.5
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - JS	VRHabilis	0	Equipment Operator	0.0
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - DB	VRHabilis	0	Crawler Dump Driver/Laborer	0.0
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - BR	VRHabilis	0	Crawler Dump Driver/Laborer	0.0
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration – JM	VRHabilis	1	Crawler Dump Driver/Laborer	3.5
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - KH	VRHabilis	1	Laborer	5.0
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration – EA	VRHabilis	1	Laborer	5.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 27.00
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 2453.25
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 2480.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Falls, Caught-in or –Between, Struck-By and Electrocution were discussed and where those types of accidents can occur on our work site.
	Inspected use of PPE during EMM refueling and greasing operations.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.0
	VRH Logistics	Bobcat T300 Skid Steer	0.0
	VRH Logistics	John Deere 50D Compact Excavator	0.0
	MacAllister	Caterpillar 308 Excavator	2.2
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	0.0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0.0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.0

Schedule Activity No.	REMARKS
	Earth Moving Machinery was fueled, greased and maintenance performed where needed.
	Silt fence repair was conducted as appropriate.
	Site preparation and organization was conducted for TSCA soil excavation and non-TSCA load out and transport, both scheduled for Monday.

CONTRACTOR/SUPERINTENDENT — DATE: 19 July 2014

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** JUL 19. 2014

Location: Naval Support Activity Crane **Presented by:** ~~Scott Alogna~~ RON MADDEN

Check the Topics/Information Reviewed:

- ☒ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☒ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☒ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☒ slips, trips, and falls
- ☒ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☒ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☒ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☒ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RONALD S. MADDEN		VRHK
JOSHUA MADDEN		VRH
Rick Yetman		VRH
Kim HEICKHAUSEN		VRH
E Adler		VRH
J Caley	Scott Alogna	VRHK

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	21 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	051	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Ronald S. Madden	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	57	85

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.0
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.0
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.0
	SWMU 17 / Project oversight - RM	VRHabilis	1	Project Manager	10.0
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - RY	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - JS	VRHabilis	1	Equipment Operator	10.0
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - DB	VRHabilis	0	Crawler Dump Driver/Laborer	0.0
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration – JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - KH	VRHabilis	1	Laborer	10.0
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration – EA	VRHabilis	1	Laborer	10.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 100.00
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 2480.25
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 2580.25

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Inspected cargo straps and found two straps requiring removal from service. Both straps were removed and destroyed.

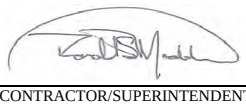
EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.0
	VRH Logistics	Bobcat T300 Skid Steer	0.7
	VRH Logistics	John Deere 50D Compact Excavator	6.0
	MacAllister	Caterpillar 308 Excavator	5.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	6.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.3
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	6.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	4.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	6.8
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	2.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	2.2
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.9

Schedule Activity No.	REMARKS
	Load out of non-TSCA soil into tri-axle dump trucks for transportation to the authorized landfill was conducted at Pad-1. Young Trucking delivered 7 of 10 the trucks, which were ordered, and only 6 trucks returned for round two.
	Excavation and restoration of Ditch 3 segment 5, TSCA and non-TSCA continued.
	Stump loosening and vegetation removal continue downstream of the excavator in segment 5 to aid in expediting excavation.



CONTRACTOR/SUPERINTENDENT — DATE: 21 July 2014

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓*	✓
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	✓	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	—	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	—	
Compacting	—	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment		
Ear Protection	✓	
Tyvek	✓	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	—	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

Inspected cargo straps and found two straps requiring Renewal Tech Services. Both straps removed and destroyed. JJA

SIGNITURE: J. J. Alegria **DATE:** 7/21/14 Monday

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VRHabilis

HEAT STRESS CHECKLIST

Work Analysis: Light - Moderate

Work Location: Crane, IN Ditch 3 Sq. 5 **Date:** 7/21/14 Monday

Description of Work: Excavating TBCA, Hauling non-TSCA To Dump Site

Names of All Persons Working the Job: Scott A. Elliott A. Kim H., Ron M., Paul O., Josh M, Ben R., Rich Yeoman, John Snyder

Type of Work to be Performed (Check One):

- [x] Light — Sitting. desk work, walking
- [x] Moderate — Standing, light or moderate arm work, welding
- [ ] Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- [x] Regular work clothes
- [ ] Regular Anti C's/Coveralls
- [ ] Impermeable clothing (paper or plastic)
- [ ] Other (explain) _____

Respiratory Protection to be Worn (Check One):

- [ ] SCBA
- [ ] Respirator
- [ ] Other

Work Area Monitoring

WBGT Temperature 76° °F Date/Time Taken 7/21/14 0920

Work Requirements

Administrative Category (Circle One): I (II) III IV

Recommended Stay Time Is: 2 HRS

Recommended RestTime Is: 15 MIN.

Yes	No	
[ ]	[x]	Personal cooling garment to be used
[ ]	[x]	Shielding
[ ]	[x]	Fans/blowers provided
[x]	[ ]	Fluid/electrolyte available
[x]	[ ]	Cool area identified
[x]	[ ]	Two-men required
[x]	[ ]	All personnel trained within the past year

Approval to Commence Work

J. J. Alg
Site Safety and Health Specialist

Site Supervisor's Signature

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 21 Jul 2014
REPORT NO: 051

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Inspected silt fence as part of the weekly Rule 5 SWPPP inspection.
2	Measured the excavation depths at Area 3L TSCA soil. The entire section was excavated to bedrock.
3	Ensured load out procedures at Pad 1 were completed without spillage.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	ADDITIONAL VOLUME TOTALS: TSCA = 96 CUYD NON-TSCA = 377 CUYD

Ryan Lane

AUTHORIZED QC MANAGER AT SITE — 7-21-2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/21/14

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading Safe Stand off distances
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.) Swarm Bee's

Other Discussion Items/Comments/Follow-up Actions:
Hear notification of arrival

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Rick Tretman		VRH
E Adler		VRH
Ryan Lane		VRH
John Snyder		VRH
Ben Roberts		VRH
KIM HECKHAUSEN		VRH
PAUL BAKER		VRH
RON MADDEN		VRHK
JOSHUA MADDEN		VRH

SWMU 17 Phase II - Daily Contractor Report Photographs – 21 July 2014

Pad-1 non-TSCA soil load out for transport to landfill

Pad-2 TSCA operations; soil management and soil delivery

` 3L TSCA soil excavation w/ spill pad in place for load out

South bank of 3L TSCA area excavated to bedrock

Ditch 3 Area 3L topsoil backfill for restoration

Stumps from segment 5 non-TSCA area 3J arriving Pad-1

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 22 July 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	052

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	60	87

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.25
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.25
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.25
	SWMU 17 / Project oversight - RM	VRHabilis	1	Project Manager	10.25
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - RY	VRHabilis	1	Equipment Operator	10.25
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - JS	VRHabilis	1	Equipment Operator	10.25
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	9.25
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	9.25
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration – JM	VRHabilis	1	Crawler Dump Driver/Laborer	9.25
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - KH	VRHabilis	1	Crawler Dump Driver/Laborer	10.25
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration – EA	VRHabilis	1	Laborer	10.25

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	109.75
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2580.25
TOTAL WORK HOURS FROM START OF CONSTRUCTION	2690.00

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Completed web slings, cargo straps failure criteria and inspection procedures training.

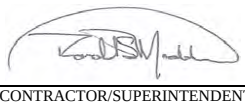
EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
		CAT 308 Excavator bucket with footer bar

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.2
	VRH Logistics	Bobcat T300 Skid Steer	0.1
	VRH Logistics	John Deere 50D Compact Excavator	2.4
	MacAllister	Caterpillar 308 Excavator	7.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	7.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	7.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	6.3
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	6.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	7.0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.6
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.9
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.1

Schedule Activity No.	REMARKS
	Load out of non-TSCA soil into tri-axle dump trucks for transportation to the authorized landfill was conducted at Pad-1. Young Trucking delivered 7 of 10 the trucks, which were ordered, and only 6 trucks returned for round two.
	Excavation and restoration of Ditch 3 segment 5, TSCA and non-TSCA continued.
	Additional volume excavated in area 3K.



CONTRACTOR/SUPERINTENDENT — 22 July 2014 DATE

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	*	—
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	—	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	—	
Compacting	—	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	—	
Ear Protection	✓	
Tyvek	✓	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer		

ITEM: **NOTES:**

Reinforced Web Slings, cargo straps failure criteria and Inspection procedures Training.

SIGNITURE: T. J. Clay **DATE:** 7/11/17 Tuesday

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VRHabilis

HEAT STRESS CHECKLIST

Work Analysis: Light – Moderate

Work Location: Crane, IN Ditch 3 Seg. 5 **Date:** 7/22/14 Tuesday

Description of Work: Excavating Oxbow + Floodplain + Hauling.

Names of All Persons Working the Job: Rich Y., John S., Josh M., Don R., Don B., Kris H., Elliott A., Paul B., Ron M., Scott A.

Type of Work to be Performed (Check One):

- [x] Light — Sitting. desk work, walking
- [ ] Moderate — Standing, light or moderate arm work, welding
- [ ] Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- [x] Regular work clothes
- [ ] Regular Anti C's/Coveralls
- [ ] Impermeable clothing (paper or plastic)
- [ ] Other (explain) _____

Respiratory Protection to be Worn (Check One):

- [ ] SCBA
- [ ] Respirator
- [ ] Other

Work Area Monitoring

WBGT Temperature 89° °F Date/Time Taken 7/22/14, 11:30

Work Requirements

Administrative Category (Circle One): I (II) (III) IV

Recommended Stay Time is: 1 Hr

Recommended RestTime Is: 10 min.

Yes	No	
[ ]	[x]	Personal cooling garment to be used
[ ]	[x]	Shielding
[ ]	[x]	Fans/blowers provided
[x]	[ ]	Fluid/electrolyte available
[x]	[ ]	Cool area identified
[x]	[ ]	Two-men required
[x]	[ ]	All personnel trained within the past year

Approval to Commence Work

J. J. Alg
Site Safety and Health Specialist

Site Supervisor's Signature

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	22-Jul-2014
REPORT NO	052

PHASE	CONTRACT NO	CONTRACT TITLE
	N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Measured depths at 3J Oxbow to maintain the 1.5ft prescribed depth per contract.
2	Measured the excavation depths to bedrock at Area 3K Non-TSCA soil. This area was only partially excavated today to depth up to 6 ft. Total volume estimates for the entire area will be given tomorrow.
3	Ensured load out procedures at Pad 1 were completed without spillage.
4	Haul routes are free of excavated material and no spillage observed. All soil is very dry and no issues with transit have been noted.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	ADDITIONAL VOLUME TOTALS: TSCA = 96 CUYD NON-TSCA = 377 CUYD

Ryan Zare — 22-Jul-2014

AUTHORIZED QC MANAGER AT SITE — DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/22/14 Tuesday

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [x] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Web Strap Inspections

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Rick Yetman		VRH
John Snyder		VRH
Scott Alegna		VRH
Pilot Brett		VRH
Ryan Lane		VRH
Ronald Madden		VRHK
Kim Heckhausen		VRH
Don Brock		VRH
Joshua Madden		VRH
Ben Roberts		VRH

SWMU 17 Phase II - Daily Contractor Report Photographs – 22 July 2014

Web slings and cargo straps training

Ditch 3, segment 5, restoration

Ditch 3, segment 5, excavation – additional volume

Site Supervisor Baril discussing additional volume with operator

Ditch 3, segment 5, restoration seeding

Ditch 3, segment 5, restoration seeding

SWMU 17 Phase II - Daily Contractor Report Photographs – 22 July 2014

Receiving additional equipment from MacAllister Rental

Ditch 3 area 3K additional volume excavation and measuring

Measuring additional volume depth in area 3K

Restoration of Ditch 3 area 3L

Ditch 3 area 3K additional volume excavation

Silt fence reinstallation at the end of the day

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	23 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	053	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Ronald S. Madden	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Scattered Clouds	Heavy Thunderstorms	71	62

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	2.5
	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	1.5
	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	2.0
	SWMU 17 / Project oversight - RM	VRHabilis	1	Project Manager	2.5
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - RY	VRHabilis	1	Equipment Operator	1.5
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - JS	VRHabilis	1	Equipment Operator	1.5
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	1.5
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	1.5
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration – JM	VRHabilis	1	Crawler Dump Driver/Laborer	1.5
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration - KH	VRHabilis	1	Crawler Dump Driver/Laborer	1.5
	SWMU 17 / Ditch 3 Segment 5 excavation & restoration – EA	VRHabilis	1	Laborer	1.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	19.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2690.00
TOTAL WORK HOURS FROM START OF CONSTRUCTION	2709.00

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.

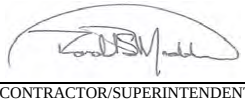
EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
		CAT 308 Excavator bucket with footer bar

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.0
	VRH Logistics	Bobcat T300 Skid Steer	0.0
	VRH Logistics	John Deere 50D Compact Excavator	0.0
	ATCO Eq	Case CX225 Excavator	1.0
	MacAllister	Caterpillar 308 Excavator	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	0.0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0.0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.0

Schedule Activity No.	REMARKS
	Load out of non-TSCA soil into tri-axle dump trucks for transportation to the authorized landfill was conducted at Pad-1. Young Trucking delivered 5 trucks, which were loaded and departed with no intended return due to rain and thunderstorms.
	No other work was conducted due to thunderstorms.



CONTRACTOR/SUPERINTENDENT — 23 July 2014 DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/23/14 Wednesday

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Rick Yetman		VRH
Joshua Madden		VRH
PAUL BAETZ		VRH
E Adler		VRH
Don Brock		VRH
Kim Heckhausen		VRH
Ben Roberts		VRH
Ronald S. Madden		VRHK
John Snyder		VRH

Within its range it occupies a variety of different habitats. In most of its range favoring deciduous forest and mixed woodlands. They are often associated with rock outcroppings and ledges, but are also found in low-lying swampy regions. In the southern parts it can also be found in pine forests in. In the dry areas of West Texas and Mexico it is often found around watercourses.

It prefers to live in wooded areas, among rocks, or near streams or ponds because prey is more plentiful in such locations. Favorite hiding places include stone walls, sawdust, garden mulch or compost piles, and under decaying stumps, in wood piles, under abandoned building debris, and under large flat stones. This snake will be seen basking during the day when weather is cool but not cold. During the heat of summer, it will stay hidden during the day and become active at night.

In October the Copperhead retreats to its underground den to hibernate until late February or early March. Dens are most often in rocky hillsides with southern or eastern exposure to the sun. These "snake dens" will be returned to year after year and may contain a large number of snakes. In late summer through mid-October, between 1 and 14 young are born alive rather than hatched from eggs.

This common snake accounts for the largest number of snake bites in the US every year, thousands

Copperhead snakes are pit vipers or crotalids (family Crotalidae); poisonous snakes that are named for the two heat sensing pits used to locate prey that are positioned between the eyes and the nostrils.

The genus Agkistrodon includes 10 species. Copperheads are one of the 4 species native to North America. Another native North American species is the Cottonmouth or "Water Moccasin". Remaining Agkistrodon subspecies are found in Asia and the Asian islands and include the Himalayan Viper, Okinawan Habu and Siberian Moccasin. The three known Australian Copperhead subspecies, although similarly named, are members of the Elapidae family of snakes and not related.

Their venom is hemolytic; it destroys the red corpuscles of the blood and releases the hemoglobin into the surrounding fluid. The resultant hemorrhaging destroys the snake's normal prey, mostly small mammals

Common names

Copperhead Snake, Chunk Head, Death Adder, Highland Moccasin, Dry-land Moccasin, Narrow-Banded Copperhead, Northern Copperhead, Pilot Snake, Poplar Leaf, Red Oak, Texas Copperhead, Carolina Snake, Red Snake, Southeastern Copperhead, White Oak Snake, American Copperhead, Southern Copperhead, Cantil Cobrizo

Range

Found in the states of Texas, Oklahoma, Kansas, Missouri, Arkansas, Louisiana, Mississippi, Alabama, Georgia, Florida, South Carolina, North Carolina, Tennessee, Kentucky, Virginia, Illinois, Indiana, Ohio, Iowa, Pennsylvania, Maryland, New Jersey, Delaware, New York, Connecticut, and Massachusetts.

Also found in Mexico - in Chihuahua and Coahuulia.

Habitat

COPPERHEAD SNAKES

All you ever wanted to know and some things you did not

Agkistrodon contortrix

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 24 July 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	054

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Scattered Clouds	78	56

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.0
2	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.0
3	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.0
4	SWMU 17 / Project oversight - RM	VRHabilis	1	Project Manager	10.0
5	SWMU 17 / Ditch 3 Segment 5/4 excavation & restoration - RY	VRHabilis	1	Equipment Operator	10.0
6	SWMU 17 / Ditch 3 Segment 5/4 excavation & restoration - JS	VRHabilis	1	Equipment Operator	10.0
7	SWMU 17 / Ditch 3 Segment 5/4 excavation & restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
8	SWMU 17 / Ditch 3 Segment 5/4 excavation & restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
9	SWMU 17 / Ditch 3 Segment 5/4 excavation & restoration – JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
10	SWMU 17 / Ditch 3 Segment 5/4 excavation & restoration - KH	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
11	SWMU 17 / Ditch 3 Segment 5/4 excavation & restoration – EA	VRHabilis	1	Laborer	10.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	110.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2709.00
TOTAL WORK HOURS FROM START OF CONSTRUCTION	2819.00

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Inspected restored areas, silt fence and staging areas. All areas acceptable.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	1.8
	VRH Logistics	Bobcat T300 Skid Steer	0.5
	VRH Logistics	John Deere 50D Compact Excavator	5.0
	ATCO Eq	Case CX225 Excavator	6.5
	MacAllister	Caterpillar 308 Excavator	7.4
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	8.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	8.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	7.4
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	1.1
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.2
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.2
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.2

Schedule Activity No.	REMARKS
	Restoration efforts are underway in Ditch 3 segment 5.
	Excavation of non-TSCA soil and sediments continue with transport to Pad-1. Working areas 3J (floodplain and oxbow) and 3K.
	Continue excavations downstream in Ditch 3 and commence excavations in Segment 4, area 3I.

CONTRACTOR/SUPERINTENDENT — DATE: 24 July 2014

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE 24-Jul-2014

REPORT NO 054

PHASE | CONTRACT NO N40083-11-D-0032-0006 | CONTRACT TITLE SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Measured depths at 3J Oxbow to maintain the 1.5ft prescribed depth per contract.
2	Measured the excavation depths to bedrock at Area 3K Non-TSCA soil. This area was completely excavated today. The average depth was 3.5 ft.
3	Ensured load out procedures at Pad 1 were completed without spillage.
4	Haul routes are free of excavated material and no spillage observed. Most of the soil is excavated today was very dry and no issues with transit have been noted.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

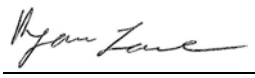
Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	ADDITIONAL VOLUME TOTALS: TSCA = 96 CY NON-TSCA = 536 CY



AUTHORIZED QC MANAGER AT SITE — 24-Jul-2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/24/14 Thursday

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [x] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading
- [x] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [x] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Safe Stand off distances, horn use.

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Rick Yetman		VRH
PAUL BAKER		VRH
JOSHUA MADDEN		VRH
DON BROCK		VRH
John Snyder		VRH
Ben Roberts		VRH
E Adler		VRHK
KIM HECKHAUSEN		VRH
Larry Emerson		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	✓
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	?	
Hot Work Permit	—	
Trenching & Excavation Permit	?	
Lifting & Carring	—	
Air Monitoring	—	
Dust Control	✓	
Silt Fence Installation	.	
WWTP	—	
Grading	✓	
Compacting	—	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	—	
Ear Protection	✓	
Tyvek	✓	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

Safe stand off distances, use of Horns when approaching vehicles, Excavators. Retrieved 3/16" of rain overnight. Fuel Rental, restored areas, Silt Fence and staging areas. Inspected Seeded areas. All areas acceptable. Except small tears at area "30" and Pad #1.

~~Trash @ area "30"~~ c/a

SIGNITURE: J. J. Alegra **DATE:** 7/24/14 Thursday

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VRHabilis

HEAT STRESS CHECKLIST

Work Analysis: Light - Moderate

Work Location: Crane, IN Ditch 3 Seg 5 **Date:** 7/24/14 Thursday

Description of Work: Excavating non-TSCA Hauling non-TSCA and Fresoil.

Names of All Persons Working the Job: Rich Y. Ron M. John S., Josh M., Ben R., Don B., Suzy A., Paul B., Elliott A., Kris H.

Type of Work to be Performed (Check One):

- [x] Light — Sitting. desk work, walking
- [ ] Moderate — Standing, light or moderate arm work, welding
- [ ] Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- [x] Regular work clothes
- [ ] Regular Anti C's/Coveralls
- [ ] Impermeable clothing (paper or plastic)
- [ ] Other (explain) _____

Respiratory Protection to be Worn (Check One):

- [ ] SCBA
- [ ] Respirator
- [ ] Other

Work Area Monitoring

WBGT Temperature 79° °F Date/Time Taken 7/24/14, 13:15

Work Requirements

Administrative Category (Circle One): I (II) III IV

Recommended Stay Time Is: 2 hrs.

Recommended RestTime Is: 10 min.

Yes	No	
[ ]	[x]	Personal cooling garment to be used
[ ]	[x]	Shielding
[ ]	[x]	Fans/blowers provided
[x]	[ ]	Fluid/electrolyte available
[x]	[ ]	Cool area identified
[x]	[ ]	Two-men required
[x]	[ ]	All personnel trained within the past year

Approval to Commence Work

J. T. Alley
Site Safety and Health Specialist

Site Supervisor's Signature

SWMU 17 Phase II - Daily Contractor Report Photographs – 24 July 2014

Ditch 3 area 3J oxbow excavation

Area 3J oxbow non-TSCA soil load out

Ditch 3 area 3J flood plain restoration

Area 3J downstream portion excavation

Area 3J restoration

Area 3J restoration

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 25 July 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	055

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Cloudy	76	51

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	0	Site Superintendent	0.0
2	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.0
3	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.0
4	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent	10.0
5	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - RY	VRHabilis	1	Equipment Operator	10.0
6	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - JS	VRHabilis	1	Equipment Operator	10.0
7	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
8	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
9	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration – JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
10	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - KH	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
11	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration – EA	VRHabilis	1	Laborer	10.0

JOB SAFETY

			TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	100.0
WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO		
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2819.00
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO		
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION	2919.00

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Inspected use of PPE and decon procedures at Pad-2 before, during and after TSCA soil load out. Personnel performed exceptional with regard to contamination control.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.7
	VRH Logistics	Bobcat T300 Skid Steer	1.3
	VRH Logistics	John Deere 50D Compact Excavator	5.8
	ATCO Eq	Case CX225 Excavator	6.6
	MacAllister	Caterpillar 308 Excavator	7.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	6.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	6.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	2.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	0.4
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.4
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.1

Schedule Activity No.	REMARKS
	Load out and transportation of TSCA soils from Pad-2 went exceptionally well. 4 semi trucks transported ~91 tons of material to the accepted landfill.
	Excavation of TSCA soil and sediments continue with transport to Pad-1. TSCA area Section 3H complete at days ends. This completes all TSCA excavations.
	Completed excavation of non-TSCA soil in Segment 4, area 3I. Restoration of upstream areas continue to remain close behind excavating.

CONTRACTOR/SUPERINTENDENT — 25 July 2014 DATE

Form B

Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	—	
Clean Access and Egress	✓	ATCO
Hand Holds	*	01 #
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn (S)	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	✓	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	—	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation *	✓	*
WWTP	—	
Grading	✓	
Compacting	—	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	—	
Ear Protection	✓	
Tyvek Booties, Gloves	✓	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	—	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

*	Construction entrances need to be repaired this afternoon.
	ATCO Track Truck # 01 Hand grab rail needs repair.

SIGNITURE: T. J. Alog **DATE:** 7/25/14 Friday

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VHabilis

HEAT STRESS CHECKLIST

Work Analysis: light J

Work Location: Crane, IN Ditch B Sq. 4 TSCA **Date:** 7/27/14 Friday

Description of Work: Excavation, Hauling NAPTSCA and TSCA, Restoration

Names of All Persons Working the Job: Scott A, Rick Y, Kim H., John S, Josh M, Ben R, Jon Brock, Ron Madden, Ryan Templeton.

Type of Work to be Performed (Check One):

- [x] Light — Sitting. desk work, walking
- [ ] Moderate — Standing, light or moderate arm work, welding
- [ ] Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- [x] Regular work clothes
- [ ] Regular Anti C's/Coveralls
- [ ] Impermeable clothing (paper or plastic)
- [ ] Other (explain) _____

Respiratory Protection to be Worn (Check One):

- [ ] SCBA
- [ ] Respirator
- [ ] Other

Work Area Monitoring

WBGT Temperature 79 °F Date/Time Taken 7/25/14, 1300

Work Requirements

Administrative Category (Circle One): I (II) III IV

Recommended Stay Time Is: 2 Hours

Recommended RestTime Is: 10 minutes

Yes	No	
[ ]	[x]	Personal cooling garment to be used
[ ]	[x]	Shielding
[ ]	[x]	Fans/blowers provided
[x]	[ ]	Fluid/electrolyte available
[x]	[ ]	Cool area identified
[x]	[ ]	Two-men required
[x]	[ ]	All personnel trained within the past year

Approval to Commence Work

J. J. Alley
Site Safety and Health Specialist

Site Supervisor's Signature

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE 25-Jul-2014

REPORT NO 052

PHASE | CONTRACT NO N40083-11-D-0032-0006 | CONTRACT TITLE SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Ensured load out procedures at the TSCA pad were completed without spillage. Plastic ground cover was used when loading trucks to capture any spillage from the pile to the trucks.
2	All four trucks sent to Heritage Landfill in Roachdale, IN were lined, covered and had the appropriate placards before leaving the site.
3	Many more rocks were excavated today and set aside for later cleaning with the mobile low flow pressure washing system.
4	Haul routes are free of excavated material and no spillage observed. Most of the soil is excavated today was very dry and no issues with transit have been noted.
5	Measured depths of excavation at 3I Non-TSCA floodplain which had an average depth of 2.7 ft.
6	Measured the excavation depths at TSCA area 3H which had an average cut of 2.25 ft.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	ADDITIONAL VOLUME TOTALS: TSCA = 171 CY NON-TSCA = 567 CY

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — 25-Jul-2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/25/14 Friday

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [X] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [X] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Decon Procedures (Below)

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Rick Yetman		VRH
Joshua Madden		VRH
Don Brock		VRH
Eadler		VRH
Lee Roberts		VRH
RON MADDEN		VRH
KIM HECKHAUSEN		VRH

Scrap gross contamination
Brush residual
Spray on (pour on) Brush in, wipe down
Booties, gloves, RRRR Run off into bad #1 or #2

SWMU 17 Phase II - Daily Contractor Report Photographs – 25 July 2014

TSCA soil load out with US Bulk Transport

Pad-2 TSCA soils being loaded for transport to approved landfill

Contamination control procedures prior to transport truck exiting

Four trucks removed and transported ~91 tons of TSCA

Final TSCA area 3H being excavated

Restoration efforts underway in area 3J

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 26 July 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	056

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Overcast	86	61

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	0	Site Superintendent	0.0
2	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	4.5
3	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	8.5
4	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent	8.5
5	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - RY	VRHabilis	1	Equipment Operator	8.5
6	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - JS	VRHabilis	1	Equipment Operator	8.5
7	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	8.5
8	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	8.5
9	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration – JM	VRHabilis	1	Crawler Dump Driver/Laborer	8.5
10	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - KH	VRHabilis	1	Crawler Dump Driver/Laborer	8.5
11	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration – EA	VRHabilis	1	Laborer	8.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	81.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	2919.00
TOTAL WORK HOURS FROM START OF CONSTRUCTION	3000.00

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Inspected silt fence and identified areas requiring repair.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	1.4
	VRH Logistics	Bobcat T300 Skid Steer	0.5
	VRH Logistics	John Deere 50D Compact Excavator	1.5
	ATCO Eq	Case CX225 Excavator	5.8
	MacAllister	Caterpillar 308 Excavator	3.9
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	1.3
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0.2
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	1.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	0.0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.4
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	2.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	4.3

Schedule Activity No.	REMARKS
	Restoration of Segment 5 was conducted.
	Vegetation reduction was completed in Segments 4, 3, 2 and 1; rains have promoted vegetation growth requiring maintenance.

CONTRACTOR/SUPERINTENDENT — DATE: 26 July 2014

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	✓	
Compacting	—	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	—	
Ear Protection	✓	
Tyvek	✓	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

Silt Fence areas to be restored in Seg. 6

Restoration completed up to Segment Seg 5 Section "B".

SIGNITURE: S. J. Alley **DATE:** Friday Saturday

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VHabilis

HEAT STRESS CHECKLIST

Work Analysis: Moderate - Heavy

Work Location: Crane, IN Ditch **Date:** 7/26/14 Saturday

Description of Work: Excavating Stumps, Restoring Statues

Names of All Persons Working the Job: Scott A., Ron M., [illegible] H., Elliott A., Ben R., Don B., Josh M., Rich Yetman, John S.

Type of Work to be Performed (Check One):

☐	Light	Sitting. desk work, walking
☑	Moderate	Standing, light or moderate arm work, welding
☑	Heavy	Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- ☑ Regular work clothes
- ☐ Regular Anti C's/Coveralls
- ☐ Impermeable clothing (paper or plastic)
- ☐ Other (explain) _____

Respiratory Protection to be Worn (Check One):

- ☐ SCBA
- ☐ Respirator
- ☐ Other

Work Area Monitoring

WBGT Temperature 81° °F Date/Time Taken 1730, 7/26/14

Work Requirements

Administrative Category (Circle One): I II III IV

Recommended Stay Time Is: 2 Hrs

Recommended RestTime Is: 15 min.

Yes	No	
☐	☑	Personal cooling garment to be used
☐	☑	Shielding
☐	☑	Fans/blowers provided
☑	☐	Fluid/electrolyte available
☑	☐	Cool area identified
☑	☐	Two-men required
☑	☐	All personnel trained within the past year

Approval to Commence Work

T. J. Alg
Site Safety and Health Specialist

Site Supervisor's Signature

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/26/14 Saturday

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [x] chemical hazards - PCB's
- [x] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [x] overhead utility locations cleared?
- [x] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [x] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Restoration activities

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Kim HECKHAUSEN		VRH
E. Adler		VRHK
Joshua Madden		VRH
John Snyder		VRH
Rick Yetman		VRH
Don Brock		VRH
Ron Madden		VRHK
Ryan Lane		VRHK
Ben Roberts		VRH

SWMU 17 Phase II - Daily Contractor Report Photographs – 26 July 2014

Top soil delivery to flood plain 3H

Installation of top soil during restoration

Restoration of Ditch 3 area 3L

Restored areas 3K and 3J oxbow

Restored areas 3k and 3J floodplain

Restoration of haul route in Segments 5 & 6

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	28 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	057
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN		
CONTRACTOR	VRHabilis-KEMRON, LLC	SUPERINTENDENT	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Partly Cloudy	75	62

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.0
2	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.0
3	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.0
4	SWMU 17 / Project oversight - RM	VRHabilis	1	Site Superintendent	10.0
5	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - RY	VRHabilis	1	Equipment Operator	10.0
6	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - JS	VRHabilis	1	Equipment Operator	10.0
7	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	9.0
8	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	9.0
9	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration – JM	VRHabilis	1	Crawler Dump Driver/Laborer	9.0
10	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration - KH	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
11	SWMU 17 / Ditch 3 Segment 4 excavation & 5 restoration – EA	VRHabilis	1	Laborer	10.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 107.0
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 3000.00
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 3107.00

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	Inspected all operational areas in accordance with Site Inspection Form; all areas satisfactory.
	Conducted vehicle and earth moving machinery (EMM) weekly inspections. All discrepancies noted on inspection forms.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.2
	VRH Logistics	Bobcat T300 Skid Steer	1.5
	VRH Logistics	John Deere 50D Compact Excavator	3.9
	ATCO Eq	Case CX225 Excavator	4.8
	MacAllister	Caterpillar 308 Excavator	7.9
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	2.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	7.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	4.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	3.6
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.6

Schedule Activity No.	REMARKS
	Commenced and completed excavation of non-TSCA flood plain 3G soil and sediments.
	Two dead trees adjacent to the haul route were removed following the approval of Steve Andrews.
	Soil / sediment load out was conducted at Pad-1 with Young Trucking transporting the non-TSCA to the approved landfill.

CONTRACTOR/SUPERINTENDENT — DATE: 28 July 2014

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	
WWTP		
Grading	—	
Compacting	✓	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	—	
Gloves	—	
Level "C" Equipment	✓	
Ear Protection	✓	
Tyvek	✓	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	✓	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	—	

ITEM:	NOTES:
Inspected site. Segment of Silt Fence needs Repair	

SIGNITURE: T. J. Alley DATE: 7/28/04 Monday

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VRHabilis

HEAT STRESS CHECKLIST

Work Analysis: Light – Moderate

Work Location: Crane, IN Ditch J Sy 4 **Date:** 7/28/14 Monday

Description of Work: Excavating non-TSCA, Hauling non-TSCA.

Names of All Persons Working the Job: Rick Y, John S., Joshua M., Don B., Paul B., Scott A., Kris H., Elliott A., Ron M.

Type of Work to be Performed (Check One):

- [x] Light — Sitting. desk work, walking
- [x] Moderate — Standing, light or moderate arm work, welding
- [ ] Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- [x] Regular work clothes
- [ ] Regular Anti C's/Coveralls
- [ ] Impermeable clothing (paper or plastic)
- [ ] Other (explain) _____

Respiratory Protection to be Worn (Check One):

- [ ] SCBA
- [ ] Respirator
- [ ] Other

Work Area Monitoring

WBGT Temperature 74° °F Date/Time Taken 7/28/14 / Monday 0815

Work Requirements

Administrative Category (Circle One): I (II) III IV

Recommended Stay Time Is: 2 Hrs

Recommended RestTime Is: 10 min

Yes	No	
[ ]	[x]	Personal cooling garment to be used
[ ]	[x]	Shielding
[ ]	[x]	Fans/blowers provided
[x]	[ ]	Fluid/electrolyte available
[x]	[ ]	Cool area identified
[x]	[ ]	Two-men required
[x]	[ ]	All personnel trained within the past year

Approval to Commence Work

J. T. Alg

Site Safety and Health Specialist

Site Supervisor's Signature

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE 28-Jul-2014

REPORT NO 052

PHASE | CONTRACT NO N40083-11-D-0032-0006 | CONTRACT TITLE SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Excavation moved into stream segment 3 during the late afternoon.
2	Non-hazardous soil loadout went well with no observed spillage.
3	Large rocks are becoming common and staging of rocks is taking place to wash later.
4	Haul routes are free of excavated material and no spillage observed. Soil is becoming rockier and has a higher saturation.
5	Area 3G was excavated today to an average depth of 1 foot.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

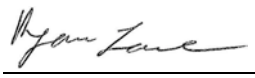
Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	ADDITIONAL VOLUME TOTALS: TSCA = 171 CY NON-TSCA = 567 CY



28-Jul-2014

AUTHORIZED QC MANAGER AT SITE DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/28/14 Monday

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots, gloves, boots
- [ ] employee Right-To- Know/MSDS location
- [x] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [x] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Rain 1/2" overnight/Yesterday

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Kim HECKHAUSEN		URH
Ryan Lane		URHK
RON MADDEN		VRHK
PAUL BAER		URHK
Rick Yetman		VRH
E Adler		VRHK
John Snyder		VRHK
DON BROCK		VRH
JOSHUA MADDEN		VRH
Ben Roberts		VRH

SWMU 17 Phase II - Daily Contractor Report Photographs – 28 July 2014

Performing vehicle inspections

Preparing to transfer non-TSCA soil to approved landfill

Non-TSCA in route to contamination Pad-1 from Ditch 3

Removing dead tree adjacent to haul route

Performing restoration in Ditch 3 Segment 5

Bank restoration in Ditch 3 Segment 5

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	29 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	058	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Mostly Cloudy	75	52

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.0
2	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.0
3	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.0
4	SWMU 17 / Project oversight - RM	VRHabilis	1	Project Manager	10.0
5	SWMU 17 / Ditch 3 Segment 5, 4, 3 excavation & restoration - RY	VRHabilis	1	Equipment Operator	10.0
6	SWMU 17 / Ditch 3 Segment 5, 4, 3 excavation & restoration - JS	VRHabilis	1	Equipment Operator	10.0
7	SWMU 17 / Ditch 3 Segment 5, 4, 3 excavation & restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
8	SWMU 17 / Ditch 3 Segment 5, 4, 3 excavation & restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
9	SWMU 17 / Ditch 3 Segment 5, 4, 3 excavation & restoration - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
10	SWMU 17 / Ditch 3 Segment 5, 4, 3 excavation & restoration - KH	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
11	SWMU 17 / Ditch 3 Segment 5, 4, 3 excavation & restoration - EA	VRHabilis	1	Laborer	10.0
12	SWMU 17 / Ditch 3 Segment 5, 4 restoration - RT	CARDNO	1	Landscape Architect	10.0

JOB SAFETY				
WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	120.0
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	3261.00
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO		
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION	3381.00

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.	
	Inspected seat belt use of all site vehicles to include earth moving machinery (EMM). No discrepancies noted.	
	Conducted safety stand down following a EMM incident.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
		Caterpillar 312 Excavator

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.0
	VRH Logistics	Bobcat T300 Skid Steer	5.0
	VRH Logistics	John Deere 50D Compact Excavator	4.0
	ATCO Eq	Case CX225 Excavator	2.8
	MacAllister	Caterpillar 308 Excavator	7.2
	MacAllister	Caterpillar 312 Excavator	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	2.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	2.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	0.1
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	2.1
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.3

Schedule Activity No.	REMARKS
	Commenced initial TSCA soil load-out, weighing and transportation to approved TSCA landfill.
	Continued restoration in Ditch 3 segments 5 and 4.
	During restoration a crawler track dump truck slipped down Ditch 3 bank in segment 4. No injuries occurred. Further details are explained in the incident report included in this daily report.

Paul Baril — CONTRACTOR/SUPERINTENDENT

29 July 2014 — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/29/14 Tuesday

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [X] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [X] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [X] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Hauling TSCA Soil to Landfill

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Rick Yetman		VRH
John Snyder		VRH
Joshua Madden		VRH
Jon Roberts		VRH
Don Brock		VRH
Ryan Lane		VRHK
E Adler		VRHK
PAUL BAZZL		VRHK
Ken Madden		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	*
WWTP	—	
Grading	✓	
Compacting	—	
Trenching	—	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	—	
Ear Protection	✓	
Tyvek	—	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	—	

ITEM:	NOTES:
	Restoration in progress in Segment 4
	Need Silt Fence Repair Segment 6

SIGNITURE: J. J. Alog

DATE: 7/29/14 Tuesday

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VR Habilis

HEAT STRESS CHECKLIST

Work Analysis: Moderate - Heavy

Work Location: Crane, IN Distr 3 Seg. #4 **Date:** 7/29/14 Tuesday

Description of Work: Excavating, hauling non TSCA, Restoration, Hauling TSCA off site

Names of All Persons Working the Job: Scott A., Paul B., Kris H., Elliot A., Rick Y., John S., Dan R., Don B., Josh M.

Type of Work to be Performed (Check One):

- [x] Light — Sitting. desk work, walking
- [x] Moderate — Standing, light or moderate arm work, welding
- [x] Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- [x] Regular work clothes
- [ ] Regular Anti C's/Coveralls
- [ ] Impermeable clothing (paper or plastic)
- [ ] Other (explain) _____

Respiratory Protection to be Worn (Check One):

- [ ] SCBA
- [ ] Respirator
- [ ] Other

Work Area Monitoring

WBGT Temperature 76° °F Date/Time Taken 7/29/14/1400

Work Requirements

Administrative Category (Circle One): I II III IV

Recommended Stay Time Is: 2 Hrs

Recommended RestTime Is: 10 Min.

Yes	No	
[ ]	[x]	Personal cooling garment to be used
[ ]	[x]	Shielding
[ ]	[x]	Fans/blowers provided
[x]	[ ]	Fluid/electrolyte available
[x]	[ ]	Cool area identified
[x]	[ ]	Two-men required
[x]	[ ]	All personnel trained within the past year

Approval to Commence Work

Scott Clay
Site Safety and Health Specialist

Site Supervisor's Signature

Attachment 6-1
Accident/Incident Report

MUST BE COMPLETED WITHIN 24 HOURS OF THE INCIDENT

GENERAL INFORMATION

SITE INFORMATION

Job Name:	SWMU 17
Physical Address:	NSA Crane
	Crane,Indiana

EMPLOYEE INFORMATION

Employee Name:	Josh Madden
Home Address:	5015 Ashley Ave
	North Charleston, SC
	29405
SS#:	697-03-8841
Age and Gender:	23 / Male
Length of Employment:	1 Year
Length of Time at Current Job:	6 weeks

INCIDENT INFORMATION

Location of Injury/Illness:	Incident
	Ditch 3-Segment 5
Date and Time of Incident:	7/29/2014 - 14:33
Date Investigated:	7/29 - 7/30
Witnessed By:	None
Project Manager:	Ronald Madden
Type of PPE Worn	Level D
(if inadequate, explain)	

CLASSIFICATION (circle all that apply)

INJURY/ILLNESS

(No Injury)	Irritation
Abrasion	Laceration
Bruise	Noise
Chemical Burn	Physical Agent
Cumulative Trauma	Puncture
Dislocation	Sprain/Strain
Foreign Body	Thermal Burn
Fracture	Death
Inhalation	Other (explain below)

INCIDENT

Auto	Leak/Spill
Client's Property	Near Miss (explain)
(Equipment)	(Subcontractor (explain))
Fire/Explosion	Other (explain)

Equipment Involved in Incident:

PART OF BODY

Eye	L	R
Ear	L	R
Head	L	R
Neck	L	R
Shoulder	L	R
Arm	L	R
Elbow	L	R
Wrist	L	R
Hand	L	R
Fingers	L	R
Chest	L	R
Abdomen	L	R
Back	L	R
Leg	L	R
Knee	L	R
Ankle	L	R
Foot	L	R
Other		

Attachment 6-1
Accident/Incident Report

MUST BE COMPLETED WITHIN 24 HOURS OF THE INCIDENT

DESCRIBE THE INCIDENT IN DETAIL

On July 2014 at approximately 1445, crawler track dump truck number 04 was reversing up the haul route to deposit 4 yards of substrate in Ditch 3, segment 5. After stopping parallel to the stream bed in an east-west orientation, the operator moved the tracks in a southerly direction in preparation to maneuverer the truck over the stream to dump the substrate. The operator was unaware at that time that he had moved the right track too far off of the road and that the track was suspended in open air and unsupported. The track dump truck then slid sideways down the stream bank approximately three feet and came to rest on to its right side.

The operator then exited out of the cab located on the left side of the machine. The operator, who was uninjured, immediately called for assistance and all work stopped on SWMU 17 site wide. All personnel assembled at the incident site and immediately deployed oil and fuel containment measures to stop any potential petroleum products from impacting the ditch in the event of a leak.

The Site Superintendent and Site Safety Officer were notified and the entire work force was mobilized to the incident site to render assistance. At 1456 the FEAD Construction Manager, Mr. Tim Sears, was notified. At 1459 the incident site was inspected by the Site Superintendent who observed 2 to 3 ounces of engine oil on a rock adjacent to the engine compartment on a rock. The oil was detected coming out of the engine oil dip stick tube. No other oils or fuels were seen or observed on the ground. An 18" X 10" rock was broken and no damage to the ditch bed or bank was noted.

At 1500 the NSA Crane Environmental Restoration Manager, Mr. Tom Brent, was notified and all facts pertaining to the incident were relayed.

At 1516 the crawler track dump truck was righted with the aid of a Case 225 excavator on to its tracks and was driven out of the ditch on its own power.

At 1541 the incident site and crawler dump truck were secured and a site wide safety stand down was conducted with all personnel. The training topics included in the discussion were cause and effect of the incident, proper procedures regarding the safe operation of Earth Moving Machinery and the reemphasis of safety adherence over production goals.

At 1603 the safety stand down was concluded and an inspection was performed on the track dump truck. The right side mirror and the engine compartment door were both bent in 2 to 6 inches. No other damage or leaking fluids were noted and the track dump truck was placed out of service.

IMMEDIATE CORRECTIVE ACTION DESCRIPTION

Site wide safety stand down conducted with all personnel on 29 July 2014 immediately following the incident. Topics covered; cause and effect of the incident, proper procedures regarding the safe operation of Earth Moving Machinery and the reemphasis of safety adherence over production goals.

On 30 July 2014 additional training was conducted by the Safety Officer and the Grade Supervisor referencing EM 385 1-1 chapter 18 and the Accident Prevention Plan. Topics included situational awareness, the dangers of overconfidence and the limits of Earth Moving Machinery.

Assigned To: Scott Alogna Completion Date: 30 July 2014

SAFETY RULES AND PROCEDURES

None Established	None Recommended	Lack of Training	Adequate
Inadequate	Unsafe Condition	(Other (describe))	**Operator overconfidence**

FIRST AID/MEDICAL INFORMATION

Was First Aid Provided?	Y (N)	Bloodborne Pathogens Incident?	Y (N)
Type of Treatment Given:		Did Kemron Respond?	(Y) N N/A
		Employee Exposed to	
Who Gave the Treatment?		blood or infectious material?	Y (N)

Attachment 6-1
Accident/Incident Report

MUST BE COMPLETED WITHIN 24 HOURS OF THE INCIDENT

Medical Treatment Given?	Y (N)	Hospital Name/Address:	
(attach medical report			
if available)			
Physician Name:		Work Limitation Given?	Y N
Physician Address:		Describe Any Work Limitation:	
Phone:		Return To Work Date:	

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 29 July 2014
REPORT NO: 058

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Loaded out 3 TSCA trucks to Heritage waste. All trucks were covered and had appropriate signage.
2	Restoration of ditch 3 went well up into the waterfall at the 3H excavation area.
3	Clean up of oil stains at the site of the truck incident was completed to the satisfaction of Tetra Tech.
4	Safety stand-down training conducted by the management team discussing hazards of the site and situational awareness.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	ADDITIONAL VOLUME TOTALS: TSCA = 171 CY NON-TSCA = 567 CY

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — 29 July 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 29 July 2014

Initial TSCA soil load out

Receiving restoration materials for Ditch 3

Performing restoration in Ditch 3 segment 4

Restoration efforts underway in segment 4

Water diversion installation in Ditch 3 Segment 4

EMM incident site following partial restoration

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 30 July 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	059

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul F. Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Scattered clouds	78	54

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.5
2	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.5
3	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.5
4	SWMU 17 / Project oversight - RM	VRHabilis	1	Project Manager	10.5
5	SWMU 17 / Ditch 3 Segment 4, 3 restoration - RY	VRHabilis	1	Equipment Operator	10.5
6	SWMU 17 / TSCA soil removal - JS	VRHabilis	1	Equipment Operator	10.5
7	SWMU 17 / Ditch 3 Segment 4, 3 restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.5
8	SWMU 17 / Ditch 3 Segment 4, 3 restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.5
9	SWMU 17 / Ditch 3 Segment 4, 3 restoration - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.5
10	SWMU 17 / Ditch 3 Segment 4, 3 restoration - KH	VRHabilis	1	Crawler Dump Driver/Laborer	10.5
11	SWMU 17 / Ditch 3 Segment 4, 3 restoration - EA	VRHabilis	1	Laborer	10.5
12	SWMU 17 / Ditch 3 Segment 4, 3 restoration - RT	CARDNO	1	Landscape Architect	8.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	123.5
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	3381.00
TOTAL WORK HOURS FROM START OF CONSTRUCTION	3504.05

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended Site Safety meeting.
	All personnel attended training following the incident referenced in Contractor Production Report #058. The topics referenced EM 385 1-1chapter 18 and the Accident Prevention Plan with emphases on situational awareness, the dangers of overconfidence and the limits of Earth Moving Machinery.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
		Komatsu CD60 Crawler Dump

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	2.5
	VRH Logistics	Bobcat T300 Skid Steer	1.7
	VRH Logistics	John Deere 50D Compact Excavator	1.3
	ATCO Eq	Case CX225 Excavator	6.2
	MacAllister	Caterpillar 308 Excavator	4.6
	MacAllister	Caterpillar 312 Excavator	5.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT00	0.0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	2.1
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	4
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.8
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	2.1

Schedule Activity No.	REMARKS
	Continued final TSCA soil removal. Final removal of all TSCA soils including the TSCA staging pad will be completed on 31 July 2014.
	Final restorations have been completed in Ditch 3 segment 5. Commenced restoration in Ditch 3 segment 4.
	Crawler Dump AT04 was removed and replaced with Crawler Dump AT00.

Paul Baril — CONTRACTOR/SUPERINTENDENT

30 July 2014 — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/30/14 Wednesday

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☐ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☑ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☐ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☐ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
John Snyder		VRH
RON MADDEN		VRHK
Ben Roberts		VRH
PAUL BIACH		VRHK
Rick Yetman		VRH
E Adler		VRH
DON BROCK		VRH
KIM HELGHAUSEN		VRH
JOSHUA MADDEN		VRH
Scott Alogna		VRH
Ryan Lane		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	—	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	[illegible]
WWTP	—	
Grading	✓	
Compacting	✓	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	—	
Level "C" Equipment	—	
Ear Protection	—	
Tyvek	—	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

Completed Hauling TSCA Soils, last load departs tomorrow w/ bucket dump trucks.

Jay, Ca tear in Silt fence!

SIGNITURE: [illegible]

DATE: 7/30/14 Wed.

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) **0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)**

NOTE: **This formula can also be applied to each operation to determine the largest opportunities for improvement.**

VRHabilis

HEAT STRESS CHECKLIST

Work Analysis: Moderate - Heavy

Work Location: Crane, IN District 3 Sq. 3 **Date:** 7/30/14 Wed.

Description of Work: Hauling TSCA ~~Blue~~ Restoring id to excavation 3.

Names of All Persons Working the Job: Scott A, Ron M, Josh M, Luis H, Elliott A, Dan Sink, Dan Roberts, Paul B, Ryan Lane.

Type of Work to be Performed (Check One):

- [x] Light — Sitting. desk work, walking
- [x] Moderate — Standing, light or moderate arm work, welding
- [x] Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- [x] Regular work clothes
- [ ] Regular Anti C's/Coveralls
- [ ] Impermeable clothing (paper or plastic)
- [ ] Other (explain) _____

Respiratory Protection to be Worn (Check One):

- [ ] SCBA
- [ ] Respirator
- [ ] Other

Work Area Monitoring

WBGT Temperature 78° °F Date/Time Taken 7/30/14, 1330

Work Requirements

Administrative Category (Circle One): I II III IV

Recommended Stay Time Is: 1.5 Hours

Recommended RestTime Is: 10 min.

Yes	No	
[ ]	[x]	Personal cooling garment to be used
[ ]	[x]	Shielding
[ ]	[x]	Fans/blowers provided
[x]	[ ]	Fluid/electrolyte available
[x]	[ ]	Cool area identified
[x]	[ ]	Two-men required
[x]	[ ]	All personnel trained within the past year

Approval to Commence Work

T. J. Alsop
Site Safety and Health Specialist

Site Supervisor's Signature

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 30 July 2014
REPORT NO: 059

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Loaded out 10 TSCA trucks to Heritage waste. All trucks were covered and had appropriate signage.
2	One truck was unable to make the scale closing time. The trailer was dropped and will be picked up by Heritage tomorrow morning and weighed out appropriately.
3	The liner was loaded out along with a small amount of berm material and the logs used to create the berm buffer in the TSCA pad. No holes indicating a liner failure were noted while lifting the liner off of the sand pad.
4	Restoration activities are nearly caught up the full way to the 3F floodplain in segment 3.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	ADDITIONAL VOLUME TOTALS: TSCA = 171 CY NON-TSCA = 567 CY

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — 30 July 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 30 July 2014

Commencing final TSCA soil load out for SWMU

Pump standing water from Ditch 3 segment 3

Final restoration complete in Ditch 3 segment 4

Commencing to remove TSCA pad for disposal

Clean sand pad present beneath TSCA pad

Performing final decontamination on bucket

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	31 July 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	060	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Scattered clouds	80	56

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.0
2	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.0
3	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10.0
4	SWMU 17 / Project oversight - RM	VRHabilis	1	Project Manager	10.0
5	SWMU 17 / Ditch 3 Segment 4, 3 restoration/excavation - RY	VRHabilis	1	Equipment Operator	10.0
6	SWMU 17 / Ditch 3 Segment 4, 3 restoration/excavation - JS	VRHabilis	1	Equipment Operator	10.0
7	SWMU 17 / Ditch 3 Segment 4, 3 restoration/excavation - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
8	SWMU 17 / Ditch 3 Segment 4, 3 restoration/excavation - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
9	SWMU 17 / Ditch 3 Segment 4, 3 restoration/excavation - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
10	SWMU 17 / Ditch 3 Segment 4, 3 restoration/excavation - KH	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
11	SWMU 17 / Ditch 3 Segment 4, 3 restoration/excavation - EA	VRHabilis	1	Laborer	10.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	110
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	3504.05
TOTAL WORK HOURS FROM START OF CONSTRUCTION	3614.05

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. All discrepancies noted are listed on the Site Safety Inspection form.
	Conducted Heat Stress monitoring with checklist. All personnel worked within acceptable parameters.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.4
	VRH Logistics	Bobcat T300 Skid Steer	2.8
	VRH Logistics	John Deere 50D Compact Excavator	0
	ATCO Eq	Case CX225 Excavator	6.7
	MacAllister	Caterpillar 308 Excavator	4
	MacAllister	Caterpillar 312 Excavator	1.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT00	3.9
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	3
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	4.3
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0.5
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	3.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.5
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	2.6

Schedule Activity No.	REMARKS
	All TSCA soil and the TSCA contamination staging pad has been transferred off site to the approved landfill. All TSCA soil Ditch 3 sites have been restored.
	Final restorations have been completed in Ditch 3 segment 4. Restorations continue in Ditch 3 segment 3.
	Non TSCA soil removal continues in Ditch 3 segment 3.

Paul Baril — CONTRACTOR/SUPERINTENDENT

31 July 2014 — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 7/31/14 Thursday

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Rick Yetman		VRH
Dan Brock		VRH
E Adler		VRH
Ron Madden		VRHK
Ben Roberts		VRK
Kim Heckmansen		VRH
Joshua Madden		VRH
John Snyder		VRH
Matt Bagel		VRHK
Ryan Lane		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	✓	
Compacting	✓	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	—	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	—	
Level "C" Equipment	—	
Ear Protection	✓	
Tyvek	✓	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	—	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	—	

ITEM: **NOTES:**

Completed last load of TSCA, ~~[illegible]~~ Berm and sand piled for removal tomorrow.

Hauling non-TSCA to Pad I Ditch I Seg. I

Caissoned mats up to excavation area awaiting seed

SIGNITURE: J. J. Alz

DATE: 7/31/14 Thursday

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VRHabilis

HEAT STRESS CHECKLIST

Work Analysis: Mod – Heavy

Work Location: Crane, IN Ditch 3 Sys 3 **Date:** 7/31/14 Thursday

Description of Work: Restoration to catch up to excavation area

Names of All Persons Working the Job: Dan Bauch, Josh M, Dan Arbeants, Scott A, Kim H, Ryan Lowe, Elliot A,

Type of Work to be Performed (Check One):

- [x] Light — Sitting. desk work, walking
- [x] Moderate — Standing, light or moderate arm work, welding
- [x] Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- [x] Regular work clothes
- [ ] Regular Anti C's/Coveralls
- [ ] Impermeable clothing (paper or plastic)
- [ ] Other (explain) _____

Respiratory Protection to be Worn (Check One):

- [ ] SCBA
- [ ] Respirator
- [ ] Other

Work Area Monitoring

WBGT Temperature 82 °F Date/Time Taken 7/31/14 Thursday 12:00

Work Requirements

Administrative Category (Circle One): I (II) (III) IV

Recommended Stay Time Is: 2 Hrs

Recommended RestTime Is: 10 min.

Yes	No	
[ ]	[x]	Personal cooling garment to be used
[ ]	[x]	Shielding
[ ]	[x]	Fans/blowers provided
[x]	[ ]	Fluid/electrolyte available
[x]	[ ]	Cool area identified
[x]	[ ]	Two-men required
[x]	[ ]	All personnel trained within the past year

Approval to Commence Work

Scott A Lowe
Site Safety and Health Specialist

Paul Bauch
Site Supervisor's Signature

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 31 July 2014
REPORT NO: 060

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Loaded out 1 TSCA truck to Heritage waste. This was the last of the TSCA waste to be removed from SWMU-17.
2	Additional restoration was completed this morning to catch up to the excavation activities.
3	Soil was excavated in ditch 3 segment 3 to an average depth of 1.0 ft. Channel widths seem comparable to the IMWP estimates.
4	Area 3F excavation was started. The conclusion of discussions by Navy and VRHK call for excavation of 1ft of soil in this area and replacing with a 1ft topsoil cap and matting to protect the unexcavated portions. This will allow for the additional time Tetra Tech needs to fully delineate the area of step-out at this location.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	ADDITIONAL VOLUME TOTALS: TSCA = 171 CY NON-TSCA = 654 CY

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — 31 July 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 31 July 2014

Final load of TSCA soil being removed

Tetra Tech performs sampling

Quality Control being performed in Ditch 3

Completing restoration in Ditch 3 segment 4

Removing Non-TSCA soil from Ditch 3 segment 3

Discussing objectives for Ditch 3 Flood Plain 3F

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 1 August 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	061

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul F. Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Clear	83	56

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.0
2	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.0
3	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	5.0
4	SWMU 17 / Project oversight - RM	VRHabilis	1	Project Manager	10.0
5	SWMU 17 / Ditch 3 Segment 3 restoration/excavation - RY	VRHabilis	1	Equipment Operator	10.0
6	SWMU 17 / Ditch 3 Segment 3 restoration/excavation - JS	VRHabilis	1	Equipment Operator	10.0
7	SWMU 17 / Ditch 3 Segment 3 restoration/excavation - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
8	SWMU 17 / Ditch 3 Segment 3 restoration/excavation - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
9	SWMU 17 / Ditch 3 Segment 3 restoration/excavation - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
10	SWMU 17 / Ditch 3 Segment 3 restoration/excavation - KH	VRHabilis	1	Crawler Dump Driver/Laborer	5.0
11	SWMU 17 / Ditch 3 Segment 3 restoration/excavation - EA	VRHabilis	1	Laborer	10.0
12	SWMU 17 / Ditch 3 Segment 3 restoration - RT	CARDNO	1	Landscape Architect	10.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	110
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	3614.05
TOTAL WORK HOURS FROM START OF CONSTRUCTION	3724.05

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. All discrepancies noted are listed on the Site Safety Inspection form.
	Conducted Heat Stress monitoring with checklist. All personnel worked within acceptable parameters.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
		1000' of silt fence

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	1.3
	VRH Logistics	John Deere 50D Compact Excavator	1.2
	ATCO Eq	Case CX225 Excavator	3.5
	MacAllister	Caterpillar 308 Excavator	5.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT00	1.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	1.3
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	2.7
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.5

Schedule Activity No.	REMARKS
	The TSCA soil contamination staging pad sand base has been removed and topsoil applied to same.
	Received 3 tri-axle dump truck loads of topsoil and 2 of cobblestone. 10 tri-axle dump truck loads of non TSCA soil were transferred to the approved landfill.
	All non TSCA soil has been removed and restorations have been completed in Ditch 3 segment 3 with the exception of Flood Plain 3F.
	The Bobcat T300 skid steer and the Caterpillar 312 Excavator have been transferred off site.

Paul Baril — 1 August 2014

CONTRACTOR/SUPERINTENDENT — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/1/14 Friday

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [x] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Climbing in/out of machines

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Rick Yetman		VRH
PAUL BARIL		VRHK
RON MADDEN		VRHK
DON BROCK		VRH
Ben Roberts		VRH
John Snyder		VRH
JOSHUA MADDEN		VRH
KIM HECKHAUSEN		VRH
Scott Algeo		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	✱
WWTP	—	
Grading	✓	
Compacting	✓	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash		
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	—	
Ear Protection	✓	
Tyvek	—	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	—	
Hand Tools	✓	
F.S. Break Trailer	—	

ITEM: **NOTES:**

Inspected site, Silt fence needs to be restored at construction entrances.

SIGNITURE: J. J. Alay **DATE:** 8/1/14 Friday

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) **0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)**

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

VRHabilis

HEAT STRESS CHECKLIST

Work Analysis: Moderate

Work Location: Crane FN, Ditch I Seg I **Date:** 8/1/14 Friday

Description of Work: Restoration, Hauling soil from Pool #2 (Sand)

Names of All Persons Working the Job: Nolan S, Rick Y, Josh M, Ben Cosens, Scott A, Kirk H, Ron Madden, Paul Baril

Type of Work to be Performed (Check One):

- [ ] Light — Sitting. desk work, walking
- [x] Moderate — Standing, light or moderate arm work, welding
- [x] Heavy — Intermittent heavy lifting, pushing, pulling, climbing

Type of Clothing to be Worn (Check One):

- [x] Regular work clothes
- [ ] Regular Anti C's/Coveralls
- [ ] Impermeable clothing (paper or plastic)
- [ ] Other (explain) _____

Respiratory Protection to be Worn (Check One):

- [ ] SCBA
- [ ] Respirator
- [ ] Other

Work Area Monitoring

WBGT Temperature 72 °F Date/Time Taken 8/1/14 / 0700

Work Requirements

Administrative Category (Circle One): I (II) III IV

Recommended Stay Time Is: 2 Hrs

Recommended RestTime Is: 10 min.

Yes	No	
[ ]	[x]	Personal cooling garment to be used
[ ]	[x]	Shielding
[ ]	[x]	Fans/blowers provided
[x]	[ ]	Fluid/electrolyte available
[x]	[ ]	Cool area identified
[x]	[ ]	Two-men required
[x]	[ ]	All personnel trained within the past year

Approval to Commence Work

Scott Alegria
Site Safety and Health Specialist

Paul Baril
Site Supervisor's Signature

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 1 August 2014
REPORT NO: 061

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	All TSCA soil has been removed from the SWMU 17 project site. No discrepancies were noted during the removal and transfer.
2	Inspected restoration activities in Ditch 3 segment 3. No discrepancies noted.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.
	ADDITIONAL VOLUME TOTALS: TSCA = 171 CY NON-TSCA = 654 CY

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — 1 August 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 1 August 2014

Receiving topsoil for use on former TSCA pad

Tetra Tech outlines former TSCA pad

Removing the sand base from the TSCA pad

Applying topsoil to former TSCA pad

Conducting refueling on a crawler track dump

Removing non TSCA soil from Flood Plain 3F

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	4 August 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	062	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Clear	84	56

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.0
2	SWMU 17 / Project oversight - TD	VRHabilis	1	Quality Control	10.0
3	SWMU 17 / Project oversight - RM	VRHabilis	1	Safety	10.0
5	SWMU 17 / Ditch 3 Segment 2 restoration/excavation - RY	VRHabilis	1	Equipment Operator	10.0
6	SWMU 17 / Ditch 3 Segment 2 restoration/excavation - JS	VRHabilis	1	Equipment Operator	10.0
7	SWMU 17 / Ditch 3 Segment 2 restoration/excavation - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
8	SWMU 17 / Ditch 3 Segment 2 restoration/excavation - BR	VRHabilis	1	Crawler Dump Driver/Laborer	9.5
9	SWMU 17 / Ditch 3 Segment 2 restoration/excavation - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.0
11	SWMU 17 / Ditch 3 Segment 2 restoration/excavation - EA	VRHabilis	1	Laborer	10.0
12	SWMU 17 / Ditch 3 Segment 2 restoration - RT	CARDNO	1	Landscape Architect	4.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 94
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 3724.5
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 3818.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. All discrepancies noted are listed on the Site Safety Inspection form.
	Performed vehicle and equipment inspections. Any discrepancies noted are listed on the respective inspection forms.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
		4" piranha pump

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.1
	VRH Logistics	John Deere 50D Compact Excavator	2.1
	ATCO Eq	Case CX225 Excavator	7.9
	MacAllister	Caterpillar 308 Excavator	5.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT00	6.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	5.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0.6
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0.6
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.1
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	2.1

Schedule Activity No.	REMARKS
	Minor restoration repairs conducted on two areas of erosion mat following rain event on 2 August 2014.
	Received topsoil and installed same into Ditch 3 segment 2; transferred non TSCA soil to the approved landfill.
	Commenced removing impacted soils from Ditch 3 Flood Plains 3D and Radiuses 3D-3 and 3D-2.
	Setup and operationally checked 4" piranha pump that will be used to remove water from Ditch 3 Segments 2 and 1.

Paul Baril — CONTRACTOR/SUPERINTENDENT

4 August 2014 — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** AUG 4, 2014

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [x] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [x] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
DON BROCK		VRH
JOSHUA MADDEN		VRH
John Snyder		VRH
Rick Vetman		VRH
E Adler		VRH
PAUL BAKER		VRHK
Tim Dudu		VRH
Ben Roberts		VRH
RYAN TEMPLETON		CARO

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	NA	
Hot Work Permit	NA	
Trenching & Excavation Permit	NA	
Lifting & Carring	✓	
Air Monitoring	NA	
Dust Control	NA	
Silt Fence Installation	✓	
WWTP	NA	
Grading	NA	
Compacting	NA	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	NA	
Ear Protection	✓	
Tyvek	NA	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	NA	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	NA	
R / R Crossings	NA	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	NA	

ITEM: **NOTES:**

PPE - INSPECTED MULTIPLE PERSONNEL SEVERAL TIMES THROUGHOUT THE WORK DAY WITH NO NOTED DISCREPANCIES.
SEAT BELT USE - OBSERVED TOTAL AND COMPLETE COMPLIANCE WITH SEATBELT USE IN ALL EMM, UTV's AND SITE VEHICLES

SIGNITURE: _____ **DATE:** AUG. 4. 2014

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) **0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)**

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 4 July 2014

REPORT NO: 062

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Performed Stormwater Inspection of site following a rain event of 2.25 inches. Repairs were made as needed. Refer to Storm Water Inspection Form
2	Soil was excavated in Ditch 3 Segment 2 to include 3D-4 and 3D-3. Depth of 3D-3 was excavated to a depth of 3.2 feet (estimated 0-2ft). Channel widths and depths seem comparable to the IMWP estimates.
3	Pad 1 is secure and no spillage noted. All off–road trucks completed round trips without spillage
4	Performed QC inspections on flood plain perimeter laths in 3D & 3E. All laths are in proper locations

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Timothy Duda

AUTHORIZED QC MANAGER AT SITE — 4 August 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 4 August 2014

Performing equipment inspections

Removing non TSCA soil from Ditch 3 SEG 2

Removing stump next to Flood Plain 3D

4” pump and hose setup in Boggs Creek (SEG 1)

Continual water entry into Boggs Creek (SEG 1)

Completion of days production in Flood Plain 3D

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 5 August 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	063

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul F. Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Scattered clouds	83	58

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.25
2	SWMU 17 / Project oversight - TD	VRHabilis	1	Quality Control	10.25
3	SWMU 17 / Project oversight - RM	VRHabilis	1	Safety	10.25
5	SWMU 17 / Ditch 3 Segment 2 restoration/excavation - RY	VRHabilis	1	Equipment Operator	10.25
6	SWMU 17 / Ditch 3 Segment 2 restoration/excavation - JS	VRHabilis	1	Equipment Operator	10.25
7	SWMU 17 / Ditch 3 Segment 2 restoration/excavation - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.25
8	SWMU 17 / Ditch 3 Segment 2 restoration/excavation - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.25
9	SWMU 17 / Ditch 3 Segment 2 restoration - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.25
11	SWMU 17 / Ditch 3 Segment 2 restoration/excavation - EA	VRHabilis	1	Laborer	10.25
12	SWMU 17 / Ditch 3 Segment 2 restoration - RT	CARDNO	1	Landscape Architect	8.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	110.5
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	3818.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	3939

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. All discrepancies noted are listed on the Site Safety Inspection form.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	1.6
	VRH Logistics	John Deere 50D Compact Excavator	1.5
	ATCO Eq	Case CX225 Excavator	7.7
	MacAllister	Caterpillar 308 Excavator	7.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT00	6.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	6.4
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	2.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.9
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.4

Schedule Activity No.	REMARKS
	Completed non-TSCA soil removal in Ditch 3 Flood Plain 3D. Commenced excavations of Ditch 3 Flood Plain 3E.
	Installed topsoil into Ditch 3 Flood Plain 3D and Radiuses 3D-2, 3D-1.
	Transferred 242.17 tons of non-TSCA material off site to the approved landfill of which included 7.32 tons of stumps transported via roll off container.
	Installed erosion mat on the north side of Ditch 3 up to Flood Plain 3F. Placed seed and straw at same and along the power line corridor at Segment 4. Re-installed 200 feet of silt fence along the haul routes of Ditch 3 Segments 3 and 2.

Paul Baril — CONTRACTOR/SUPERINTENDENT

5 August 2014 — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** AUG. 5 2014 TUESDAY

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- ☒ Daily work scope reviewed
- ☒ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☒ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☒ work stoppage at:
- ☐ portable tool safety and awareness
- ☐ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☒ orderly site and housekeeping
- ☐ smoking in designated areas
- ☒ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☒ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☑ poison ivy/oak/sumac
- ☒ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
John Snyder		VAH
DON BROCK		VRH
Ben Roberts		VRH
PHIL BAKER		VRHK
E Adler		VRHK
Rick Yetman		VRH
JOSHUA MADDEN		VRH
RON MADDEN		VRHK
TIM DUDA		VRHK
RYAN TEMPLETON		CARDNO

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	X	
Back-up Alarm	X	
Clean Access and Egress	X	
Hand Holds	X	
Hydraulic Leaks	X	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	X	
Telephone	X	
Equipment Horn	X	
Hand Signals	X	
Verbal	X	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	NA	
Hot Work Permit	NA	
Trenching & Excavation Permit	NA	
Lifting & Carring	X	
Air Monitoring	NA	
Dust Control	NA	
Silt Fence Installation	X	
WWTP	NA	
Grading	NA	
Compacting	NA	
Trenching	X	
Excavation	X	
Hauling	X	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	X	
Material Stacked to High	X	
Electrical Cords	X	
GFCI	X	
Tool Trailer	X	
Fire Extinguisher(s) Records	X	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	X	
Safety Glasses w/Sideshields	X	
Safety Toed Shoes	X	
Gloves	X	
Level "C" Equipment	NA	
Ear Protection	X	
Tyvek	NA	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	NA	
Seeding	X	
Temporary Fencing	X	
Stop Signs	NA	
R / R Crossings	NA	
Speed Limits	X	
Fueling of Equipment	X	
Spotter	X	
Hand Tools	X	
F.S. Break Trailer	NA	

ITEM: **NOTES:**

HAND TOOLS - INSPECTED DIVERSION PUMP INSTALLATION IN SEGMENT 2. USE OF PROPER
PPE, PROPER TOOL SELECTIONS AND USE WERE ALL ADHERED TO.
HAULING - INSPECTED CRAWLER DUMP TRUCK BEDS TO ENSURE PROPER USE OF
SLINGS WHERE APPROPRIATE, SECURING OF LOADS, AND ADHERENCE TO
ADAPTED PROTOCOLS DURING DUMPING. NO DISCREPANCIES OBSERVED

SIGNITURE: _____ **DATE:** AUG. 5. 2014

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) **0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)**

NOTE: **This formula can also be applied to each operation to determine the largest opportunities for improvement.**

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 5 August 2014
REPORT NO: 063

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Non-TSCA soil hauled off-site to approved landfill. All trucks completed round trips without spillage.
2	Soil was excavated in Ditch 3 Segment 2 to include 3D-2, 3D-1 and half of 3E-1. Depth of 3D-2 was excavated to a depth of 3.5 feet (estimated 0-2ft). Channel widths and depths seem comparable to the IMWP estimates.
3	Pad 1 is secure and no spillage noted. All off–road trucks completed round trips without spillage. Non-TSCA stockpiled soil secured with plastic tarp at end of work day.
4	E&S control measures included placement of straw blanket along Ditch 3 Segment 2 and installation of additional silt fence in recently excavated areas. Water diversion hose and sump pump was installed between NW section of 3E-1 and 3A-2.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Timothy Duda

AUTHORIZED QC MANAGER AT SITE — 5 August 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 5 August 2014

Transferring non TSCA soil via truck to landfill

Measuring water flow volume into Boggs Creek

Removing non TSCA soil from Flood Plain 3E

Installing erosion mat across from Flood Plain 3F

Replacing contamination pad 1 weather covers

Completion of day's production in Flood Plain 3E

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 6 August 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	064

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul F. Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Fog	Scattered clouds	79	62

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10
2	SWMU 17 / Project oversight - TD	VRHabilis	1	Quality Control	10
3	SWMU 17 / Project oversight - RM	VRHabilis	1	Safety	10
4	SWMU 17 / Ditch 3 Segment 2 excavation - RY	VRHabilis	1	Equipment Operator	10
5	SWMU 17 / Non TSCA soil transfer - JS	VRHabilis	1	Equipment Operator	10
6	SWMU 17 / Ditch 3 Segment 2 excavation - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10
7	SWMU 17 / Ditch 3 Segment 2 excavation - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10
8	SWMU 17 / TSCA Pad/Ditch 3 Segment 4, 2 restoration - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10
9	SWMU 17 / Ditch 3 Segment 2 excavation - EA	VRHabilis	1	Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	90
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	3939
TOTAL WORK HOURS FROM START OF CONSTRUCTION	4029

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Conducted training on Material Safety Data Sheets.
	Performed Site Safety inspection. No discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	1.1
	VRH Logistics	John Deere 50D Compact Excavator	0.5
	ATCO Eq	Case CX225 Excavator	7.7
	MacAllister	Caterpillar 308 Excavator	4.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT00	4.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	5.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.9
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.5
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.4

Schedule Activity No.	REMARKS
	Completed non-TSCA soil removal in Ditch 3 Flood Plain 3E and Radiuses 3E-1 and 3E-2.
	One 30 yard roll off dumpster was filled with non TSCA stumps. The dumpster will be removed 7 August 2014.
	Completed all seed and straw activities along all haul routes in Ditch 3 segment 4 and partially in segment 3.
	Completed restoration of the TSCA contamination pad area.

Paul Baril — CONTRACTOR/SUPERINTENDENT

6 August 2014 — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 6 AUGUST 2014 TUESDAY

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [x] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [x] poison ivy/oak/sumac
- [x] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BARCIL		VRHK
Rick Yetman		VRH
E Adler		VRHK
Ben Roberts		VRH
Don Brock		VRH
[illegible]		VRH
John Snyder		VRH
Tim Dush		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	NA	
Hot Work Permit	NA	
Trenching & Excavation Permit	NA	
Lifting & Carring	✓	
Air Monitoring	NA	
Dust Control	NA	
Silt Fence Installation	✓	
WWTP	NA	
Grading	NA	
Compacting	NA	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	NA	
Ear Protection	✓	
Tyvek	NA	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	NA	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	NA	
R / R Crossings	NA	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	NA	

ITEM: **NOTES:**

HARD HAT - PERFORMED FOCUS INSPECTION MULTIPLE TIMES, ALL OPERATIONS CONCENTRATING ON HARD HAT USE. ALL TEAM MEMBERS ARE HIGHLY DISCIPLINED AND RESPONSIBLE IN WEARING HARD HATS IN ALL APPROPRIATE AREAS.

FUELING EQUIPMENT - INSPECTED FUELING OF EMM. ALL PPE AND PROPER PROCEDURES ADHERED TO DURING OPERATIONS.

SIGNITURE: _____ **DATE:** AUG. 6. 2014 TUESDAY

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) **0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)**

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 6 August 2014
REPORT NO: 064

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Non-TSCA soil hauled off-site to approved landfill. All trucks completed round trips without spillage.
2	Soil was excavated in Ditch 3 Segment 2 to include 3E-1 and 3E-2. Depth of 3E-2 was excavated to a depth of 6 feet (estimated 0-2ft). Channel widths and depths seem comparable to the IMWP estimates.
3	Pad 1 is secure and no spillage noted. All off–road trucks completed round trips without spillage. Non-TSCA stockpiled soil secured with plastic tarp at end of work day.
4	Restoration efforts included placement of seed, straw and/or straw blanket along disturbed areas and along Ditch 3 Segment 4 and 3.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Timothy Duda

AUTHORIZED QC MANAGER AT SITE — 6 August 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 6 August 2014

Completing restoration on TSCA pad site

Removing non TSCA stumps from Boggs Creek

Removing non TSCA soil from Flood Plain 3E

Completing non TSCA soil removal in FP 3E

Removing non TSCA soil from Radius 3E-1

QC depth verification of Radius 3E-1

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	7 August 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	065	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Rain	76	64

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - RM	VRHabilis	1	Project Manager	9.5
2	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	9.5
3	SWMU 17 / Project oversight - TD	VRHabilis	1	Quality Control	9.0
4	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	9.5
5	SWMU 17 / Ditch 3 Segment 2 restoration- RY	VRHabilis	1	Equipment Operator	8.5
6	SWMU 17 / Ditch 3 Segment 2 restoration/soil transfer - JS	VRHabilis	1	Equipment Operator	8.5
7	SWMU 17 / Ditch 3 Segment 2 restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	8.5
8	SWMU 17 / Ditch 3 Segment 2 restoration - BR	VRHabilis	1	Crawler Dump Driver/Laborer	8.5
9	SWMU 17 / Ditch 3 Segment 2 restoration - JM	VRHabilis	1	Crawler Dump Driver/Laborer	8.5
10	SWMU 17 / Ditch 3 Segment 2 restoration - EA	VRHabilis	1	Laborer	8.5
11	SWMU 17 / Ditch 3 Segment 2 restoration - RT	CARDNO	1	Landscape Architect	9.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 97.5
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 4029.0
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 4126.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.	
	Performed Site Safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	4.8
	VRH Logistics	John Deere 50D Compact Excavator	5.5
	ATCO Eq	Case CX225 Excavator	2.3
	MacAllister	Caterpillar 308 Excavator	2.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT00	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	1
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	2.4
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.9
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.4

Schedule Activity No.	REMARKS
	Completed all seed and straw activities along all haul routes up to Flood Plain 3F. Completed all seed and straw activities along Ditch 3 up to Radius 3E-2.
	One 30 yard roll off dumpster filled with non TSCA stumps transported to landfill for disposal.
	128 cubic yards of non TSCA soil transported to landfill via tri-axle trucks for disposal.
	Constructed a check dam adjacent to Radius 3E-1 to support water transfer to segment 1.

Paul Baril — 7 August 2014

CONTRACTOR/SUPERINTENDENT — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** AUG. 7. 2014 WEDNESDAY

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- ☒ Daily work scope reviewed
- ☒ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☐ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☒ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☑ orderly site and housekeeping
- ☐ smoking in designated areas
- ☒ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☒ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BARIL		VRHK
TIM DUDA		VRHK
E Adler		VRHK
Rick Yetman		VRH
Scott Alegre		VRH
Lea Roberts		VRH
John Snyder		VRH
JOSHUA MADDEN		VRH
DON BROCK		VRH
RYAN TEMPLETON		CARDNO

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
	✓	
	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	NA	
Hot Work Permit	NA	
Trenching & Excavation Permit	NA	
Lifting & Carring	✓	
Air Monitoring	NA	
Dust Control	NA	
Silt Fence Installation	✓	
WWTP	✓	
Grading	NA	
Compacting	NA	
Trenching	NA	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	NA	
Ear Protection	✓	
Tyvek	NA	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	NA	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	NA	
R / R Crossings	NA	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	NA	

ITEM: **NOTES:**

SIGNITURE: _____ **DATE:** AUG. 7. 2014 THU

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) **0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)**

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 7 August 2014
REPORT NO: 064

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Non-TSCA soil hauled off-site to approved landfill. All trucks completed round trips without spillage.
2	Soil was excavated in ditch 3 Segment 2 to include 3E-1. Channel depths increased to 1.5 feet in northern section of Section 3E-1 (Estimated 0 – 1 foot).
3	Pad 1 is secure and no spillage noted. All off–road trucks completed round trips without spillage. Non-TSCA stockpiled soil secured with plastic tarp at end of work day.
4	Restoration efforts included placement of seed, straw and/or straw blanket along disturbed areas and along ditch 3 Segment 2.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Timothy Duda

AUTHORIZED QC MANAGER AT SITE — 7 August 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 7 August 2014

Conducting morning safety meeting

Water collected in front of culvert at Radius 3E1

Transferring non TSCA soil to approved landfill

Transferring non TSCA stumps to landfill

Check dam constructed adjacent to culvert

Water removed; Segment 2 restoration to date

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	11 August 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	066	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Intermittent Rain / Overcast	Intermittent Rain / Overcast / Periods of radiant sunshine	80	66

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - RM	VRHabilis	1	Project Manager	10
2	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10
3	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10
4	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10
5	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - RY	VRHabilis	1	Equipment Operator	10
6	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - JS	VRHabilis	1	Equipment Operator	10
7	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10
8	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10
9	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10
10	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - EA	VRHabilis	1	Laborer	10
11	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - KH	VRHabilis	1	Laborer	10
12	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - RT	CARDNO	0	Landscape Architect	0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	110
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	4126.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	4236.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. Observed silt fence repairs needed and inspected results. Repairs met the standards identified in the SWPPP.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	2.7
	ATCO Eq	Case CX225 Excavator	4.9
	MacAllister	Caterpillar 308 Excavator	3.4
	ATCO Eq	Komatsu CD60 Crawler Dump – AT00	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.6
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.9

Schedule Activity No.	REMARKS
	Developed a Punch List of items requiring attention as we near project completion. Completed 90% of Punch List items.
	Three Young Trucking tri axle dump trucks were direct loaded with non-TSCA soils from Ditch 3 Segment 2, weighed and deposited their load at the NAVFAC approved landfill completing two revolutions of load out and dumping.
	Begun excavations of soils in Ditch 3 Segment 1.

Paul Baril — CONTRACTOR/SUPERINTENDENT

11 August 2014 — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** AUGUST 11, 2014 MON

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- ☒ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☒ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☒ work stoppage at:
- ☐ portable tool safety and awareness
- ☒ slips, trips, and falls
- ☒ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☒ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☒ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
DON BROCK		VRH
JOSHUA MADDEN		VRH
Scott Agena		VRH
Ryan Lane		VRH
Rick Yetman		VRH
John Snyder		VRH
Ben Roberts		VRH
E Allen		VRHK
Kim Heckhauser		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	—	
Compacting	—	
Trenching	—	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	—	
Ear Protection	✓	
Tyvek	—	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	—	

ITEM: **NOTES:**

Completed entire S.W.P.P.P. inspection. Silt fence needs repair in several areas. Verified all personnel wearing PPE. Witnessed loading of 30:1 SPF Tanks.

SIGNITURE: T. J. Alger **DATE:** 8/11/14 Monday

FORMULA:
TOTAL SAFE ÷ TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) **0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)**

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 11 August 2014
REPORT NO: 066

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Seeding activities took place at the Northwest Ditch. A small trail was left unseeded to allow for continued use of the carts in this area.
2	Soil was excavated in Ditch 3 Segment 2 at area 3C. All soil was excavated to the prescribed depth of 0.5 ft.
3	Pad 1 is secure and was not uncovered today. All soil was loaded directly from segment 3C into the road trucks. Plastic was placed on the road during the loading of the material to prevent loose soil from coming in contact with the roadbed.
4	Restoration efforts included placement of seed, straw and/or straw blanket along disturbed areas and along ditch 3 Segment 2.
5	Area 3B was prepped by completing some soil gathering to allow for direct loading of road trucks the following day. Stockpiles left on the contaminated footprint were covered overnight.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — 11 August 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 11 August 2014

Receiving class 2 natural stone for use in SEG 1

Performing direct load out from Flood Plain 3C

Removing soil from Ditch 3 Flood Plain 3C

Removing soil from Ditch 3 Flood Plain 3C

Commence removing soil from Flood Plain 3B

Installing additional silt fence at Ditch 3 FP 3H

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 12 August 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	067

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul F. Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Scattered Clouds	75	64

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - RM	VRHabilis	1	Project Manager	10
2	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10
3	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10
4	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10
5	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - RY	VRHabilis	1	Equipment Operator	10
6	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - JS	VRHabilis	1	Equipment Operator	10
7	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - DB	VRHabilis	1	Crawler Dump Driver/Laborer	9.75
8	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - BR	VRHabilis	1	Crawler Dump Driver/Laborer	9.75
9	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - JM	VRHabilis	1	Crawler Dump Driver/Laborer	9.75
10	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - EA	VRHabilis	1	Laborer	10
11	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - KH	VRHabilis	1	Laborer	10
12	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - RT	CARDNO	1	Landscape Architect	8

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	117.25
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	4236.5
TOTAL WORK HOURS FROM START OF CONSTRUCTION	4353.75

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. No discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	2.3
	VRH Logistics	John Deere 50D Compact Excavator	8.5
	ATCO Eq	Case CX225 Excavator	5.5
	MacAllister	Caterpillar 308 Excavator	6.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT00	7.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0.1
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	2
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0.8
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.1
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.7

Schedule Activity No.	REMARKS
	Conducted seed/straw activates in the Northwest Ditch. Continued restoration up to radius 3E-2 in Flood Plain 3E and Flood Plain 3D to the culvert.
	Flood Plain 3B excavated to 1.5 ft. up to stake #10.
	Boggs Creek Segment 1 ditch excavated to 1 ft. to stake #14.
	Established 4" pump and 4" hose to transfer water around the Boggs Creek ditch during excavation.

Paul Baril — CONTRACTOR/SUPERINTENDENT

12 August 2014 — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/12/14 Tuesday

Location: Naval Support Activity Crane **Presented by:** Ron Madden

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching Inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Decon Procedures

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
E Adler		VRH-K
P BAKER		VRHK
R Yetman		VRH
Jon Madden		VRH
John Snyder		VRH
Don Brock		VRH
Ben Roberts		VRH
Kim Heckmansen		VRH
Scott Alegna		VRHK
Ryan Lane		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	—	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	—	
Compacting	—	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	—	
Ear Protection	✓	
Tyvek	—	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	—	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	—	

ITEM: **NOTES:**

Verified personnel wearing PPE several time throughout the day. Witnessed all Drivers/Passengers wearing seatbelts. Inspected restoration areas completed today.

SIGNITURE: J. Alley **DATE:** 8/12/14 Tuesday

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) **0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)**

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 12 August 2014
REPORT NO: 067

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Seeding activities took place at the Northwest Ditch. A small trail was left unseeded to allow for continued use of the carts in this area.
2	Area 3B was excavated to 1.5 ft. depth as prescribed by the IMWP.
3	Boggs Creek Stream Segment 1 was excavated to a depth of 1 ft. in the first 50 ft. The area just after the culvert was pumped around to the second culvert. The entire remaining creek is now free to excavate.
4	Pad 1 is secure and was not uncovered today. A small stockpile in area 3B is covered for direct load out tomorrow.
5	Restoration efforts included placement of seed, straw and/or straw blanket along disturbed areas and along Ditch 3 Segment 2.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — DATE: 12 August 2014

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 12 August 2014

Removing temp dam at west end of Segment 2

Transferring water at culvert in Segment 1 east

Temporary road established at Boggs Creek

Installing erosion mat/seed in Segment 2 west

Removing sediment from Ditch 3 Segment 1

Completing final restoration in Segment 2 west

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	13 August 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	068	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Scattered Clouds	77	53

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10
2	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10
3	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10
4	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - RY	VRHabilis	1	Equipment Operator	10
5	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - JS	VRHabilis	1	Equipment Operator	10
6	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10
7	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10
8	SWMU 17 / Ditch 3 Segment 2 & 1 restoration & excavation - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10
9	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - EA	VRHabilis	1	Laborer	10
10	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - KH	VRHabilis	1	Laborer	10
11	SWMU 17 / Ditch 3 Segment 2 & 1 restoration - RT	CARDNO	1	Landscape Architect	8.25

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	108.25
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	4353.75
TOTAL WORK HOURS FROM START OF CONSTRUCTION	4462.00

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. No discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	6.1
	VRH Logistics	John Deere 50D Compact Excavator	14.1
	ATCO Eq	Case CX225 Excavator	12.6
	MacAllister	Caterpillar 308 Excavator	13.7
	ATCO Eq	Komatsu CD60 Crawler Dump – AT00	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	2.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	2.6
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	3

Schedule Activity No.	REMARKS
	Conducted water transfer around Segment 1 and completed all sediment removal from Ditch 3 in Boggs Creek.
	Completed the excavation of Flood Plains 3B and 3A-2 to 1.5 ft. All excavated soils were stockpiled and covered to await removal to the approved landfill.
	Commenced the excavation of Flood Plain 3A-1.
	Completed all restoration in Ditch 3 Segment 2 with the exception of the haul route adjacent to Flood Plain 3F.

Paul Baril — 13 August 2014

CONTRACTOR/SUPERINTENDENT — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/13/14 Wednesday

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [x] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Posted Driving Regulations

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
PAUL BANCEL		VRHK
P VeTman		VRH
E Adler		VRH-K
JOSHUA MADDEN		VRH
KIM HECKHAUSEN		VRH
DON BROCK		VRH
Ben Roberts		VRH
John Snyder		VRH
RYAN TEMPLETON		CARDNO
Ryan Lane		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	—	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	✓	
Compacting	—	
Trenching	—	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	✓	
Ear Protection	—	
Tyvek		
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	—	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

Inspected Fire Extinguishers All SAT
PPE - WITNESSED Laborers Wearing Proper PPE. 3 TIMES DURING DAY.
Watch Truck Tamp and excavator using proper HAND and HORN
Signals to relay information

SIGNITURE: J. Alay

DATE: 8/13/14 Wednesday

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 13 August 2014
REPORT NO: 068

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Seeding is looking good in the Ditch 3 area with plenty of grass growing in rapidly.
2	Area 3B was excavated to 1.5 ft. depth as prescribed by the IMWP. Nearly all of the area is completely excavated besides the area used for stockpiling.
3	Area 3A-2 was excavated in its entirety to a depth of 1.5ft.
4	Boggs Creek Stream Segment 1 was excavated to a depth of 1 ft. in the first 50 ft. The area just after the culvert was pumped around to the second culvert. The entire remaining creek is now free to excavate.
5	Pad 1 is secure and was not uncovered today. A small stockpile in area 3B is covered for direct load out tomorrow.
6	Area 3A-1 has initial excavations underway. There is currently an average depth to bedrock at 3.5 ft. bgs.
7	The end of the Boggs Creek Stream Segment 1 has been reached. All in-stream excavations are now complete.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zarecor

AUTHORIZED QC MANAGER AT SITE — 13 August 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

Conducting water transfer in Segment 1

Conducting restoration in Ditch 3 Segment 2

Installing large stone in Segment 1 next to culvert

Transferring soil from Flood Plain 3B stockpile

Conducting QC inspection of Flood Plain 3A-2

Final restoration in Segment 2 west complete

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	14 August 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	069	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Overcast-Rain	81	55

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10
2	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10
3	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	10
4	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - RY	VRHabilis	1	Equipment Operator	10
5	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - JS	VRHabilis	1	Equipment Operator	10
6	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10
7	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10
8	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10
9	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - EA	VRHabilis	1	Laborer	10
10	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - KH	VRHabilis	1	Laborer	10
11	SWMU 17 / Ditch 3 Segment 1 restoration - RT	CARDNO	1	Landscape Architect	4

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	104
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	4462
TOTAL WORK HOURS FROM START OF CONSTRUCTION	4566

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. No discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	4.8
	VRH Logistics	John Deere 50D Compact Excavator	6.7
	ATCO Eq	Case CX225 Excavator	4.6
	MacAllister	Caterpillar 308 Excavator	6.8
	ATCO Eq	Komatsu CD60 Crawler Dump – AT00	1.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0.6
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	2.1
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.5
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.6
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.7

Schedule Activity No.	REMARKS
	Utilized pumping systems and a temporary dam constructed of super-sacks filled with sand at sampling pin 17SB128 to manage water collection throughout Flood Plains 3A and 3B.
	Transferred non-TSCA soil to the approved landfill from the soil stockpile located in Flood Plain 3B and completed all soil excavations from same to a depth 1.5 feet with the exception of the soil located beneath the soil stock pile.
	Completed all soil excavations from Flood Plain 3A-1to bedrock and stockpiled the soil in Flood Plain 3B.
	Commenced final restoration of Ditch 3 Segment 1, Boggs Creek, with the installation of seed and erosion mats.

Paul Baril — CONTRACTOR/SUPERINTENDENT

14 August 2014 — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/14/14 Thursday

Location: Naval Support Activity Crane **Presented by:** Scott Alogna

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [ ] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Focus Four (OSha) Training

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Pete Roberts		VRH
Don Brock		VRH
E. Adler		VRH-K
R Yetman		VRH
Kim Hedgehansen		VRH
Ryan Lane		VRHA
Joshua Madsen		VRH
Paul Baker		VRHK
John Sarle		VRH
Scott Alogna		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	—	
Hot Work Permit	—	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	—	
Dust Control	—	
Silt Fence Installation	✓	
WWTP	—	
Grading	✓	
Compacting	—	
Trenching	—	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	—	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	—	
Ear Protection	—	
Tyvek	✓	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	—	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	✓	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

PPE - Inspected personnel throughout the day.
Witnessed repair of Case 225 Excavator fuel filter leaking.
Worked excavator operators effectively communicating with Trash Truck operators using Horns Hands and Radios to avoid collisions and maintaine safe stand off distances.

SIGNITURE: S. J. Alog **DATE:** 8 Jun/18 Thursday

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) **0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)**

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 14 August 2014
REPORT NO: 069

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	Direct load out of non-TSCA soil from area 3B was handling in a clean manner keeping all contaminated soil within the footprint of 3B.
2	Area 3B was excavated to 1.5 ft. depth as prescribed by the IMWP. Nearly all of the area is completely excavated besides the area used for stockpiling.
3	Area 3A-1 was excavated to bedrock. The average depth of excavation is 3.75 ft. based on field measurements during excavation activities.
4	Pump around systems were used to keep 3A-1 excavations from filling with water from the ditch.
5	Pad 1 is secure and was not uncovered today. A small stockpile in area 3B is covered for direct load out tomorrow.
6	Decontamination of the midsize excavator was completed sufficiently for traversing to area 17SD105 and completing excavations tomorrow.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zarecor

AUTHORIZED QC MANAGER AT SITE — 14 August 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 14 August 2014

Conducting water transfer at dam in Segment 1

Transferring soil from Flood Plain 3B stockpile

Conducting water management next to FP 3A-2

Installing seed/erosion mat in SEG 1 Flood Plains

TetraTech performs sampling at former TSCA pad

Ditch 3 Segment 1 (Boggs Creek) facing west

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	15 August 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	070	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Scattered clouds-clear	76	54

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	10.5
2	SWMU 17 / Project oversight - RL	VRHabilis	1	Quality Control	10.5
3	SWMU 17 / Project oversight - SA	VRHabilis	1	Safety	1
4	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - RY	VRHabilis	1	Equipment Operator	10.5
5	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - JS	VRHabilis	1	Equipment Operator	10.5
6	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10.5
7	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - BR	VRHabilis	1	Crawler Dump Driver/Laborer	10.5
8	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10.5
9	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - EA	VRHabilis	1	Laborer	10.5
10	SWMU 17 / Ditch 3 Segment 1 restoration & excavation - KH	VRHabilis	1	Laborer	1
11	SWMU 17 / Ditch 3 Segment 1 restoration - RT	CARDNO	1	Landscape Architect	3

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 86
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 4566
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 4652

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. No discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	4.2
	VRH Logistics	John Deere 50D Compact Excavator	3
	ATCO Eq	Case CX225 Excavator	8.1
	MacAllister	Caterpillar 308 Excavator	6.5
	ATCO Eq	Komatsu CD60 Crawler Dump – AT00	11.4
	ATCO Eq	Komatsu CD60 Crawler Dump – AT01	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT02	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	3.2
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0.9
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.6
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.3

Schedule Activity No.	REMARKS
	Completed the removal and transfer off site of all soils stockpiled in Flood Plain 3B which completes all soil removal in Segment 1.
	Completed all restorations of Ditch 3 Segment 1, Boggs Creek, with the installation of large stone, cobblestone, seed, erosion mats and straw.
	Commenced and completed all soil removal and stone replacement in the final contaminated area of Ditch 3, 17SD105. Minor seeding remains to be accomplished to the ingress and egress paths to the site and will be accomplished on 17 August 2014.

Paul Baril — CONTRACTOR/SUPERINTENDENT

15 August 2014 — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/15/14 Friday

Location: Naval Support Activity Crane **Presented by:** [redacted] SCOTT ARCONA

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [x] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [ ] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [ ] slips, trips, and falls
- [ ] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [x] excavator swing and loading
- [x] orderly site and housekeeping
- [ ] smoking in designated areas
- [ ] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [ ] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [ ] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Ryetman		VRH
PAUL B ARCH		VRH
Ben Roberts		VRH
E. Adler		VRH-K
Ryan Lane		VRH
DON BROCK		VRH
JOSHUA MADDEN		VRH
John Snyder		VRH
RYAN TEMPLETON		CAROTO

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	N/A	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	✓	
Hot Work Permit	N/A	
Trenching & Excavation Permit	N/A	
Lifting & Carring	✓	
Air Monitoring	N/A	
Dust Control	✓	
Silt Fence Installation	✓	
WWTP	N/A	
Grading	✓	
Compacting	✓	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI CONTRACT	~~N/A~~ ✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	N/A	
Ear Protection	✓	
Tyvek	N/A	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	N/A	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	✓	
R / R Crossings	N/A	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	N/A	

ITEM:	NOTES:

SIGNITURE: Ron Bean DATE: 15 AUG 2014

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 15 August 2014
REPORT NO: 069

PHASE | CONTRACT NO: N40083-11-D-0032-0006 | CONTRACT TITLE: SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
1	The remainder of soil from the Boggs Creek floodplain was loaded out and sent to the landfill.
2	Pad 1 is secure and uncovered only for the addition of 5 loads from 17SD105.
3	Restoration efforts included placement of seed, straw and/or straw blanket along the floodplain of Boggs creek. All disturbed area is completely restored.
4	Area 17SD105 was excavated and backfilled with similar substrate. The sediment excavation extended down to an average depth of 2.0 ft.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — 15 August 2014 DATE

GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE

SWMU 17 Phase II - Daily Contractor Report Photographs – 15 August 2014

Transferring soil at Flood Plain 3B off site

Prepping Flood Plain 3A-2 for restoration

Conducting restoration of Flood Plain 3A-2

Removing non-TSCA soil from FP 17SB128

Restoration complete at Flood Plain 17SB128

Restoration completed in Segment 1

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	18 August 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	071	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Paul F. Baril	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Clear	85	67

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - PB	VRHabilis	1	Site Superintendent	5.0
2	SWMU 17 / Project oversight - RL	VRHabilis	0	Quality Control	0
3	SWMU 17 / Project oversight - EA	VRHabilis	1	Safety	10.0
4	SWMU 17 / Project standby - RY	VRHabilis	1	Equipment Operator	5
5	SWMU 17 / Project standby - JS	VRHabilis	1	Equipment Operator	5
6	SWMU 17 / Project standby - DB	VRHabilis	1	Crawler Dump Driver/Laborer	5
7	SWMU 17 / Project standby - JM	VRHabilis	1	Crawler Dump Driver/Laborer	5
8	SWMU 17 / Project standby – JW	VRHabilis	1	Crawler Dump Driver/Laborer	5.5
9	SWMU 17 / Project standby – MS	VRHabilis	1	Crawler Dump Driver/Laborer	5.5
10	SWMU 17 / Project standby - EH	VRHabilis	1	Safety	10.0

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 56.0
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 4652.00
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 4708.00

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. No discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0.8
	VRH Logistics	John Deere 50D Compact Excavator	0
	ATCO Eq	Case CX225 Excavator	0
	MacAllister	Caterpillar 308 Excavator	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT03	0
	ATCO Eq	Komatsu CD60 Crawler Dump – AT04	0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0.1
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.2

Schedule Activity No.	REMARKS

Paul Baril — CONTRACTOR/SUPERINTENDENT

18 Aug 2014 — DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/18/14

Location: Naval Support Activity Crane **Presented by:** Eric Hodgkinson

Check the Topics/Information Reviewed:

- ☐ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☑ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Deadfall, Avoid Complacency

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Joshua Madden		VRH
Don Brock		VRH
Michael Shea		VRH
Jamshells		VRH
Paul Bitter		VRHE
E Adler		VRH-K
John Snyder		VRH-K
Rixtman		VRH

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	N/A	
Hot Work Permit	N/A	
Trenching & Excavation Permit	N/A	
Lifting & Carring	✓	
Air Monitoring	N/A	
Dust Control	N/A	
Silt Fence Installation	✓	
WWTP	N/A	
Grading	N/A	
Compacting	N/A	
Trenching	N/A	
Excavation	N/A	
Hauling	N/A	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	N/A	
Ear Protection	✓	
Tyvek	N/A	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	N/A	
Seeding	✓	
Temporary Fencing	✓	
Stop Signs	N/A	
R / R Crossings	N/A	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	N/A	

ITEM:	NOTES:

SIGNITURE: [signature] DATE: 8/18/14

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 19 August 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	072

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Elliott J. Adler

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Scattered Clouds	85	63

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - EJ	VRHabilis	1	Site Superintendent	10
2	SWMU 17 / Project oversight - RL	VRHabilis	0	Quality Control	0
3	SWMU 17 / Project oversight - EH	VRHabilis	1	Safety	10
4	SWMU 17 / Project standby - RY	VRHabilis	1	Equipment Operator	9
5	SWMU 17 / Project standby - JS	VRHabilis	1	Equipment Operator	9
6	SWMU 17 / Project standby - DB	VRHabilis	1	Crawler Dump Driver/Laborer	8
7	SWMU 17 / Project standby - JM	VRHabilis	1	Crawler Dump Driver/Laborer	8
8	SWMU 17 / Project standby – JW	VRHabilis	1	Crawler Dump Driver/Laborer	8
9	SWMU 17 / Project standby – MS	VRHabilis	1	Crawler Dump Driver/Laborer	8

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	70.0
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	4708.00
TOTAL WORK HOURS FROM START OF CONSTRUCTION	4778.00

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. No discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	2.3
	VRH Logistics	John Deere 50D Compact Excavator	1.1
	ATCO Eq	Case CX225 Excavator	1.1
	MacAllister	Caterpillar 308 Excavator	3.5
	ATCO Eq	Komatsu CD60 Crawler Dump	1.2
	ATCO Eq	Komatsu CD60 Crawler Dump	1.2
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0.7
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	2.1
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.5

Schedule Activity No.	REMARKS

CONTRACTOR/SUPERINTENDENT — DATE: 19Aug 2014

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/19/14

Location: Naval Support Activity Crane **Presented by:** Eric Hodgkinson

Check the Topics/Information Reviewed:

- ☐ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☑ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☑ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Heavy Equipment - pinch points, communication, Exit & Entry. Buddy system.

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Michael Shr		VRH
James Wells		VRH
Don Brock		VRH
Joshua Madden		VRH
R Yetman		VRH
John Snyder		VRH
Exhler		VRH-K

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	N/A	
Hot Work Permit	N/A	
Trenching & Excavation Permit	N/A	
Lifting & Carring	✓	
Air Monitoring	N/A	
Dust Control	N/A	
Silt Fence Installation	✓	
WWTP	N/A	
Grading	✓	
Compacting	N/A	
Trenching	N/A	
Excavation	N/A	
Hauling	N/A	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	N/A	
Ear Protection	✓	
Tyvek	N/A	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	✓	
Seeding	✓	
Temporary Fencing	N/A	
Stop Signs	✓	
R / R Crossings	N/A	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	N/A	

ITEM:	NOTES:

SIGNITURE: [signature] DATE: 8/19/24

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 20 August 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	073

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Elliott J. Adler

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Foggy	Clear	83	68

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - EJ	VRHabilis	1	Site Superintendent	10
2	SWMU 17 / Project oversight - RL	VRHabilis	0	Quality Control	0
3	SWMU 17 / Project oversight - EH	VRHabilis	1	Safety	10
4	SWMU 17 / Project standby - RY	VRHabilis	1	Equipment Operator	10
5	SWMU 17 / Project standby - JS	VRHabilis	1	Equipment Operator	9.5
6	SWMU 17 / Project standby - DB	VRHabilis	1	Crawler Dump Driver/Laborer	9.5
7	SWMU 17 / Project standby - JM	VRHabilis	1	Crawler Dump Driver/Laborer	9.5
8	SWMU 17 / Project standby – JW	VRHabilis	1	Crawler Dump Driver/Laborer	9.5
9	SWMU 17 / Project standby – MS	VRHabilis	1	Crawler Dump Driver/Laborer	9.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	77.5
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	4778.00
TOTAL WORK HOURS FROM START OF CONSTRUCTION	4855.50

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.
	Performed Site Safety inspection. No discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	1.5
	VRH Logistics	John Deere 50D Compact Excavator	0
	ATCO Eq	Case CX225 Excavator	0
	MacAllister	Caterpillar 308 Excavator	0
	ATCO Eq	Komatsu CD60 Crawler Dump	0
	ATCO Eq	Komatsu CD60 Crawler Dump	0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.7

Schedule Activity No.	REMARKS
	Installed fence.

CONTRACTOR/SUPERINTENDENT — DATE: 20 Aug 2014

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/20/14

Location: Naval Support Activity Crane **Presented by:** Eric Hodgkinson

Check the Topics/Information Reviewed:

- ☐ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☑ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☑ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☑ vehicle backing up hazards
- ☑ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
R Vetman		VRH
Joshua Madden		VRH
John Snyder		VRH
Don Brock		VRH
Michael Shea		VRH
James Wells		VRH
E Adler		VRH-K

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	N/A	
Hot Work Permit	N/A	
Trenching & Excavation Permit	N/A	
Lifting & Carring	✓	
Air Monitoring	N/A	
Dust Control	N/A	
Silt Fence ~~Installation~~ Removal	✓	
WWTP	N/A	
Grading	N/A	
Compacting	N/A	
Trenching	N/A	
Excavation	N/A	
Hauling	N/A	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	N/A	
Ear Protection	✓	
Tyvek	N/A	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	N/A	
Seeding	N/A	
Temporary Fencing	N/A	
Stop Signs	✓	
R / R Crossings	N/A	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	
Fence Installation	✓	

ITEM:	NOTES:

SIGNATURE: [signature] DATE: 8/20/14

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	22 August 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	074	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Elliott J. Adler	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Mostly Cloudy	88	74

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - EJ	VRHabilis	1	Site Superintendent	10
2	SWMU 17 / Project oversight - RL	VRHabilis	0	Quality Control	0
3	SWMU 17 / Project oversight - EH	VRHabilis	1	Safety	10
4	SWMU 17 / Project standby - RY	VRHabilis	1	Equipment Operator	6
5	SWMU 17 / Project standby - JS	VRHabilis	1	Equipment Operator	0
6	SWMU 17 / Project standby - DB	VRHabilis	1	Crawler Dump Driver/Laborer	0
7	SWMU 17 / Project standby - JM	VRHabilis	1	Crawler Dump Driver/Laborer	6
8	SWMU 17 / Project standby – JW	VRHabilis	1	Crawler Dump Driver/Laborer	7.5
9	SWMU 17 / Project standby – MS	VRHabilis	1	Crawler Dump Driver/Laborer	7.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 47
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 4855.50
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 4902.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the Daily Site Safety meeting. All topics discussed and personnel present are listed on the Daily Safety Meeting sign-in sheet.	
	Performed Site Safety inspection. No discrepancies noted.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	3.9
	VRH Logistics	John Deere 50D Compact Excavator	0
	ATCO Eq	Case CX225 Excavator	0
	MacAllister	Caterpillar 308 Excavator	0
	ATCO Eq	Komatsu CD60 Crawler Dump	0
	ATCO Eq	Komatsu CD60 Crawler Dump	0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0.2
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0.5
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.1

Schedule Activity No.	REMARKS

CONTRACTOR/SUPERINTENDENT — 22 Aug 2014 DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/22/14

Location: Naval Support Activity Crane **Presented by:** Eric Hodgkinson

Check the Topics/Information Reviewed:

- ☐ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☑ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☑ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☑ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
E. Adler		VRH - VK
James Wells		VRH
Michael Shue		VRH
Joshua Madden		VRH
Rick Vetman		VRH

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	N/A	
Hot Work Permit	N/A	
Trenching & Excavation Permit	N/A	
Lifting & Carring	✓	
Air Monitoring	N/A	
Dust Control	N/A	
Silt Fence Installation	N/A	
WWTP	N/A	
Grading	N/A	
Compacting	N/A	
Trenching	N/A	
Excavation	N/A	
Hauling	N/A	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	N/A	
Ear Protection	✓	
Tyvek	N/A	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	N/A	
Seeding	N/A	
Temporary Fencing	N/A	
Stop Signs	✓	
R / R Crossings	N/A	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM:	NOTES:

SIGNATURE: Eric Z. DATE: 8/22/14

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 25 August 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	075

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Elliott J. Adler

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Fog	Scattered Clouds	92	68

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - EJ	VRHabilis	1	Site Superintendent	10
2	SWMU 17 / Project oversight - RL	VRHabilis	0	Quality Control	0
3	SWMU 17 / Project oversight - EH	VRHabilis	1	Safety	10
4	SWMU 17 / Project standby - RY	VRHabilis	1	Equipment Operator	2.5
5	SWMU 17 / Project standby - JS	VRHabilis	1	Equipment Operator	5.0
6	SWMU 17 / Project standby - DB	VRHabilis	1	Crawler Dump Driver/Laborer	5.0
7	SWMU 17 / Project standby - JM	VRHabilis	1	Crawler Dump Driver/Laborer	2.5
8	SWMU 17 / Project standby – JW	VRHabilis	1	Crawler Dump Driver/Laborer	2.5
9	SWMU 17 / Project standby – MS	VRHabilis	1	Crawler Dump Driver/Laborer	2.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	40
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	4902.50
TOTAL WORK HOURS FROM START OF CONSTRUCTION	4942.5

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the daily site safety meeting. Topics briefed and discussed and names of personnel in attendance are listed on the daily safety sign-in sheet.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	0
	ATCO Eq	Case CX225 Excavator	0
	MacAllister	Caterpillar 308 Excavator	0
	ATCO Eq	Komatsu CD60 Crawler Dump	0
	ATCO Eq	Komatsu CD60 Crawler Dump	0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0

Schedule Activity No.	REMARKS

CONTRACTOR/SUPERINTENDENT — DATE: 25 Aug 2014

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/25/14

Location: Naval Support Activity Crane **Presented by:** Eric Hodgkinson

Check the Topics/Information Reviewed:

- ☐ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☑ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Complacency, Misunderstood Instructions

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
E Adler		VRH-K
R Yetman		VRH
James Wells		VRH
Don Brock		VRH
Joshua Masden		VRH
Michael Shea		VRH
John Snyder		VRH

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 26 August 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	076

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Elliott J. Adler

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Partly Cloudy	92	67

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - EJ	VRHabilis	1	Site Superintendent	10
2	SWMU 17 / Project oversight - RL	VRHabilis	0	Quality Control	0
3	SWMU 17 / Project oversight - EH	VRHabilis	1	Safety	10
4	SWMU 17 / Project standby - RY	VRHabilis	1	Equipment Operator	4.0
5	SWMU 17 / Project standby - JS	VRHabilis	1	Equipment Operator	4.0
6	SWMU 17 / Project standby - DB	VRHabilis	1	Crawler Dump Driver/Laborer	4.0
7	SWMU 17 / Project standby - JM	VRHabilis	1	Crawler Dump Driver/Laborer	4.5
8	SWMU 17 / Project standby – JW	VRHabilis	1	Crawler Dump Driver/Laborer	4.5
9	SWMU 17 / Project standby – MS	VRHabilis	1	Crawler Dump Driver/Laborer	4.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	45.50
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	4942.50
TOTAL WORK HOURS FROM START OF CONSTRUCTION	4988

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the daily site safety meeting. Topics briefed and discussed and names of personnel in attendance are listed on the daily safety sign-in sheet.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	0
	ATCO Eq	Case CX225 Excavator	0
	MacAllister	Caterpillar 308 Excavator	0
	ATCO Eq	Komatsu CD60 Crawler Dump	0
	ATCO Eq	Komatsu CD60 Crawler Dump	0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0

Schedule Activity No.	REMARKS

CONTRACTOR/SUPERINTENDENT

26 Aug 2014
DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/26/14

Location: Naval Support Activity Crane **Presented by:** E. Hodgkinson

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☑ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☑ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions:

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Michael Shea		VRH
James Wells		VRH
Don Brock		VRH
Joshua Madden		VRH
John Snyder		VRH
E Adler		VRH-K
R Ketman		VRH

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	N/A	
Hot Work Permit	N/A	
Trenching & Excavation Permit	N/A	
Lifting & Carring	✓	
Air Monitoring	N/A	
Dust Control	N/A	
Silt Fence Installation	N/A	
WWTP	N/A	
Grading	N/A	
Compacting	N/A	
Trenching	N/A	
Excavation	N/A	
Hauling	N/A	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	N/A	
Ear Protection	✓	
Tyvek	N/A	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	N/A	
Seeding	✓	
Temporary Fencing	N/A	
Stop Signs	✓	
R / R Crossings	N/A	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM:	NOTES:

SIGNATURE: [signature] DATE: 8/26/14

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 27 August 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	077

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Elliott J. Adler

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Scattered Clouds	89	67

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 17 / Project oversight - EJ	VRHabilis	1	Site Superintendent	10
2	SWMU 17 / Project oversight - RL	VRHabilis	0	Quality Control	0
3	SWMU 17 / Project oversight - EH	VRHabilis	1	Safety	10
4	SWMU 17 / Project standby - RY	VRHabilis	1	Equipment Operator	2.5
5	SWMU 17 / Project standby - JS	VRHabilis	1	Equipment Operator	2.5
6	SWMU 17 / Project standby - DB	VRHabilis	1	Crawler Dump Driver/Laborer	2.5
7	SWMU 17 / Project standby - JM	VRHabilis	1	Crawler Dump Driver/Laborer	2.5
8	SWMU 17 / Project standby – JW	VRHabilis	1	Crawler Dump Driver/Laborer	2.5
9	SWMU 17 / Project standby – MS	VRHabilis	1	Crawler Dump Driver/Laborer	2.5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	35
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	4988
TOTAL WORK HOURS FROM START OF CONSTRUCTION	5023

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED	☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the daily site safety meeting. Topics briefed and discussed and names of personnel in attendance are listed on the daily safety sign-in sheet.	

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T320 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	0
	ATCO Eq	Case CX225 Excavator	0
	MacAllister	Caterpillar 308 Excavator	0
	ATCO Eq	Komatsu CD60 Crawler Dump	0
	ATCO Eq	Komatsu CD60 Crawler Dump	0
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	0
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0

Schedule Activity No.	REMARKS

CONTRACTOR/SUPERINTENDENT

27 Aug 2014
DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 3/27/14

Location: Naval Support Activity Crane **Presented by:** E. Hodgkinson

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ Safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☑ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☑ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Pinch Points

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Don Brock		URH
John Snyder		VRH
Joshua Madden		VRH
E Adler		VRH-K
Michael Shea		VRH
James Wells		VRH
R Yetman		VRH
Ron Madden		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	N/A	
Hot Work Permit	N/A	
Trenching & Excavation Permit	N/A	
Lifting & Carring	✓	
Air Monitoring	N/A	
Dust Control	N/A	
Silt Fence Installation	N/A	
WWTP	N/A	
Grading	N/A	
Compacting	N/A	
Trenching	N/A	
Excavation	N/A	
Hauling	N/A	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	N/A	
Ear Protection	✓	
Tyvek	N/A	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	N/A	
Seeding	N/A	
Temporary Fencing	N/A	
Stop Signs	✓	
R / R Crossings	N/A	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM:	NOTES:

SIGNITURE: [signature] DATE: 8/27/14

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	28 August 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	078
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN		
CONTRACTOR	VRHabilis-KEMRON, LLC	SUPERINTENDENT	Ronald S. Madden
AM WEATHER	Clear	PM WEATHER	Scattered Clouds
MAX TEMP (F)	87	MIN TEMP (F)	66

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	Project oversight - RM	VRHabilis	1	Site Superintendent	10
2	Project oversight - RL	VRHabilis	0	Quality Control	0
3	Project oversight - EH	VRHabilis	1	Safety	10
4	Project standby / Ditch 3, Seg F/Q Excavation Restoration - RY	VRHabilis	1	Equipment Operator	7.5
5	Project standby / Ditch 3, Seg F/Q Excavation Restoration - JS	VRHabilis	1	Equipment Operator	5
6	Project standby / Ditch 3, Seg F/Q Excavation Restoration - DB	VRHabilis	0	Crawler Dump Driver/Laborer	0
7	Project standby / Ditch 3, Seg F/Q Excavation Restoration - JM	VRHabilis	1	Crawler Dump Driver/Laborer	5
8	Project standby / Ditch 3, Seg F/Q Excavation Restoration - JW	VRHabilis	1	Crawler Dump Driver/Laborer	5
9	Project standby / Ditch 3, Seg F/Q Excavation Restoration - MS	VRHabilis	1	Crawler Dump Driver/Laborer	5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 47.50
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 5023
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 5070.50

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the daily site safety meeting. Topics briefed and discussed and names of personnel in attendance are listed on the daily safety sign-in sheet.
	Inspected all personnel operating or working in the vicinity of Earth Moving Machinery (EMM) for appropriate PPE. No discrepancies noted.

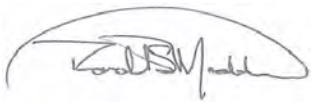
EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
1		VRH Logistics delivered a T300 Skid Steer. The T320 was transported to another VRH project in Wisconsin.

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T300 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	5.9
	ATCO Eq	Case CX225 Excavator	3.5
	MacAllister	Caterpillar 308 Excavator	4.5
	ATCO Eq	Komatsu CD60 Crawler Dump	4
	ATCO Eq	Komatsu CD60 Crawler Dump	4.5
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.4
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	1.6

Schedule Activity No.	REMARKS
1	Received Notice To Proceed (NTP) at approximately 10:50 local time. Project team was notified and rallied at the site trailer at 1:15pm for the site safety briefing and operations planning brief.
2	Excavation, and soil transportation to Pad-1 commenced in Segment 3, Area F/Q starting at the upstream location and working downstream.



CONTRACTOR/SUPERINTENDENT — DATE: 28 Aug 2014

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/28/14

Location: Naval Support Activity Crane **Presented by:** E. Hodgkinson

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☑ excavator swing and loading
- ☑ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☑ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Review AHA for Excavation of Impacted Soils.

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Michael Shea		VRH
Jason Wells		VRH
John Snyder		VRH
Joshua Madden		VRH
Rick Yetman		VRH
Ron Madden		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	N/A	
Hot Work Permit	N/A	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	N/A	
Dust Control	✓	
Silt Fence Installation	N/A	
WWTP	N/A	
Grading	N/A	
Compacting	N/A	
Trenching	N/A	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	N/A	
Ear Protection	✓	
Tyvek	N/A	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	N/A	
Seeding	N/A	
Temporary Fencing	N/A	
Stop Signs	✓	
R / R Crossings	N/A	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM:	NOTES:

SIGNITURE: [signature] DATE: 8/28/14

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

SWMU 17 Phase II - Daily Contractor Report Photographs – 28 Aug 2014

Ditch 3 Segments F/Q – excavation to bedrock

Non-TSCA contaminated soil load out into crawler dump truck

Non-TSCA soil arriving from Ditch 3 Segments F/Q

Tracked Crawler Dump Truck Driver Josh Madden unloading Non-TSCA contaminated soil onto Pad-1 for later transport

Documenting the depth from ground surface to bedrock

Ditch 3 Segments F/Q excavation to bedrock

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 29 August 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	079

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Scattered Clouds	Clear	89	71

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	Project oversight - RM	VRHabilis	1	Site Superintendent	10
2	Project oversight - EJ	VRHabilis	1	Quality Control	9.5
3	Project oversight - EH	VRHabilis	1	Safety	10
4	Ditch 3, Seg F/Q Excavation and Restoration - RY	VRHabilis	1	Equipment Operator	10
5	Ditch 3, Seg F/Q Excavation and Restoration - JS	VRHabilis	1	Equipment Operator	10
6	Ditch 3, Seg F/Q Excavation and Restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10
7	Ditch 3, Seg F/Q Excavation and Restoration - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10
8	Ditch 3, Seg F/Q Excavation and Restoration - JW	VRHabilis	1	Crawler Dump Driver/Laborer	10
9	Ditch 3, Seg F/Q Excavation and Restoration - MS	VRHabilis	1	Crawler Dump Driver/Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	89.50
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	5070.50
TOTAL WORK HOURS FROM START OF CONSTRUCTION	5160

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the daily site safety meeting. Topics briefed and discussed and names of personnel in attendance are listed on the daily safety sign-in sheet.
	Inspected PPE use at Pad-1 when personnel needed to enter the pad. No discrepancies noted.

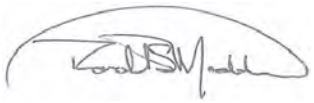
EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T300 Skid Steer	0
	VRH Logistics	John Deere 50D Compact Excavator	4.7
	ATCO Eq	Case CX225 Excavator	1.2
	MacAllister	Caterpillar 308 Excavator	7.2
	ATCO Eq	Komatsu CD60 Crawler Dump	6
	ATCO Eq	Komatsu CD60 Crawler Dump	3.8
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0.9
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.4

Schedule Activity No.	REMARKS
1	Excavation, soil transportation to Pad-1 and restoration work continued in Segment 3, Area F/Q.
2	All excavated areas were backfilled and restored by the end of the work day.



CONTRACTOR/SUPERINTENDENT — DATE: 29 Aug 2014

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 8/29/14

Location: Naval Support Activity Crane **Presented by:** E. Hodgkinson

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☑ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☑ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☑ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Safety during off duty hours.

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Joshua Madden		VRH
Michael Shea		VRH
James Wells		VRH
John Snyder		VRH
Ron Madden		VRHK
Don Brock		VRH
R Pietman		VRH

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	N/A	
Hot Work Permit	N/A	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	N/A	
Dust Control	N/A	
Silt Fence Installation	N/A	
WWTP	N/A	
Grading	N/A	
Compacting	N/A	
Trenching	N/A	
Excavation	✓	
Hauling		✓

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	N/A	
Ear Protection	✓	
Tyvek	N/A	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	N/A	
Seeding	N/A	
Temporary Fencing	N/A	
Stop Signs	✓	
R / R Crossings	N/A	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

Hauling: Incident occured involving tracked dump vehicle striking packed equipment. Safety stand down observed and applicable company rules reenforced.

SIGNITURE: Eric Z **DATE:** 8/29/14

FORMULA:
TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:
0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

~~Accident~~/Incident Report

MUST BE COMPLETED WITHIN 24 HOURS OF THE INCIDENT

GENERAL INFORMATION

SITE INFORMATION

Job Name:	SWMU 17 PH2
Physical Address:	Crane, Indiana

EMPLOYEE INFORMATION

Employee Name:	Don Brock
Home Address:	1076 Hwy 219 Prosperity, SC 29127
SS#:	250-39-5820
Age and Gender:	51 male
Length of Employment:	8 Months
Length of Time at Current Job:	10 Weeks

INCIDENT INFORMATION

Location of Injury/Illness/Incident	Impacted Soil Laydown Area
Date and Time of Incident:	29 Aug 2014 0750
Date Investigated:	29 Aug 2014
Witnessed By:	John Snyder
Project Manager:	Ron Madden

Type of PPE Worn (if inadequate, explain)	Leved D. Hard Hat, Safety Glasses, Leather Gloves, Safety Toed Boots, High Visibility Vests.

CLASSIFICATION (circle all that apply)

INJURY/ILLNESS

(No Injury)	Irritation
Abrasion	Laceration
Bruise	Noise
Chemical Burn	Physical Agent
Cumulative Trauma	Puncture
Dislocation	Sprain/Strain
Foreign Body	Thermal Burn
Fracture	Death
Inhalation	Other (explain below)

INCIDENT

Auto	Leak/Spill
Client's Property	Near Miss (explain)
(Equipment)	Subcontractor (explain)
Fire/Explosion	Other (explain)

Equipment Involved in Incident: Kubota RTV, Komatsu Tracked Dump

PART OF BODY

Eye	L	R
Ear	L	R
Head	L	R
Neck	L	R
Shoulder	L	R
Arm	L	R
Elbow	L	R
Wrist	L	R
Hand	L	R
Fingers	L	R
Chest	L	R
Abdomen	L	R
Back	L	R
Leg	L	R
Knee	L	R
Ankle	L	R
Foot	L	R
Other		

Habilis Kemron

Accident/Incident Report

MUST BE COMPLETED WITHIN 24 HOURS OF THE INCIDENT

DESCRIBE THE INCIDENT IN DETAIL

Include photographs, drawings, diagrams, and any other pertinent information

On 29 August 2014, at approximately 7:50 a.m., Don Brock moved a Komatsu tracked dump vehicle to within five feet of a Kubota RTV. Mis-judging the distance between vehicles, Mr. Brock rotated the tracked dump, resulting in the uppermost section of the left rear of the dump bed to strike the RTV. The impact created a deep scratch above the upper, right rear window of the RTV, and shattered the glass within that window.

IMMEDIATE CORRECTIVE ACTION DESCRIPTION

Observed safety stand down to discuss incident. Reenforced the need to observe Company rules - minimum 15 foot separation between equipment

Assigned To: Completion Date:

SAFETY RULES AND PROCEDURES

None Established	None Recommended	Lack of Training	(Adequate)
Inadequate	Unsafe Condition	Other (describe)	

FIRST AID/MEDICAL INFORMATION

Was First Aid Provided?	Y	(N)	Bloodborne Pathogens Incident?	Y	(N)
Type of Treatment Given:			Did Kemron Respond?	Y N	(N/A)
			Employee Exposed to		
Who Gave the Treatment?			blood or infectious material?	Y	(N)
Medical Treatment Given? (attach medical report if available)	Y	(N)	Hospital Name/Address:		
Physician Name:			Work Limitation Given?	Y	N
Physician Address:			Describe Any Work Limitation:		
Phone:			Return To Work Date:		

ACCIDENT REVIEW BOARD INFORMATION

Completed By:	Eric Hodgkinson	Date:	29 August 2014
Approved By:	RON MADDEN	Date:	29 AUG 2014

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 3 September 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	080

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Overcast	Clear	85	59

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	Project oversight - RM	VRHabilis	1	Site Superintendent	10
2	Project oversight - EH	VRHabilis	1	Quality Control	0
3	Project oversight - EH	VRHabilis	1	Safety	10
4	Ditch 3, Seg F/Q Excavation and Restoration - RY	VRHabilis	1	Equipment Operator	10
5	Ditch 3, Seg F/Q Excavation and Restoration - JS	VRHabilis	1	Equipment Operator	10
6	Ditch 3, Seg F/Q Excavation and Restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10
7	Ditch 3, Seg F/Q Excavation and Restoration - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10
8	Ditch 3, Seg F/Q Excavation and Restoration - JW	VRHabilis	1	Crawler Dump Driver/Laborer	10
9	Ditch 3, Seg F/Q Excavation and Restoration - MS	VRHabilis	1	Crawler Dump Driver/Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	80
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	5160
TOTAL WORK HOURS FROM START OF CONSTRUCTION	5240

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	Monday: Labor Day. Tuesday: Rained out.
	All personnel attended the daily site safety meeting. Topics briefed and discussed and names of personnel in attendance are listed on the daily safety sign-in sheet.
	Inspected non-TSCA soil load out operations. No discrepancies noted.

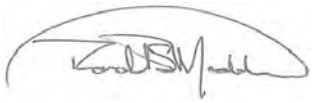
EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T300 Skid Steer	2.4
	VRH Logistics	John Deere 50D Compact Excavator	3.1
	ATCO Eq	Case CX225 Excavator	4.5
	MacAllister	Caterpillar 308 Excavator	2.4
	ATCO Eq	Komatsu CD60 Crawler Dump	1.2
	ATCO Eq	Komatsu CD60 Crawler Dump	1.3
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	1.4
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	2.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	0.2

Schedule Activity No.	REMARKS
1	Excavation, soil transportation to Pad-1 and restoration work continued in Segment 3, Area F/Q.
2	All excavated areas were backfilled and restored by the end of the workday.



CONTRACTOR/SUPERINTENDENT — 3 Sep 2014 DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 9/3/14

Location: Naval Support Activity Crane **Presented by:** E. Hodgkinson

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☑ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
- ☐ electrical ground fault
- ☐ public safety and fences
- ☐ excavator swing and loading
- ☐ orderly site and housekeeping
- ☐ smoking in designated areas
- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☐ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☐ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Overhead Hazards

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
JOSHUA MADDEN		VRH
DAN BROCK		VRH
Michael Shea		VRH
RONALD S. MADDEN		VRHK
James Wells		VEH
R. Yetman		VRH
John Snyder		VRH

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	N/A	
Hot Work Permit	N/A	
Trenching & Excavation Permit	N/A	
Lifting & Carring	✓	
Air Monitoring	N/A	
Dust Control	N/A	
Silt Fence Installation	N/A	
WWTP	N/A	
Grading	N/A	
Compacting	N/A	
Trenching	N/A	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	N/A	
Ear Protection	✓	
Tyvek	N/A	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	N/A	
Seeding	N/A	
Temporary Fencing	N/A	
Stop Signs	✓	
R / R Crossings	N/A	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

SIGNITURE: **DATE:** 9/3/14

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

SWMU 17 Phase II - Daily Contractor Report Photographs – 3 Sep 2014

Young Trucking dump trucks staged for load out in Zone 9

Non-TSCA contaminated soil load out for transport

Non-TSCA soil excavation from Ditch 3 Segments F/Q

Tracked Crawler Dump waiting to unload at Pad-1

Clean backfill topsoil in front of Non-TSCA Pad-1

Tuesday rains created muddy road conditions; VRHK conducts housekeeping of Crane roads

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 4 September 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	081

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Ronald S. Madden

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Clear	87	62

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	Project oversight - RM	VRHabilis	1	Site Superintendent	10
2	Project oversight - EH	VRHabilis	1	Quality Control	0
3	Project oversight - EH	VRHabilis	1	Safety	10
4	Ditch 3, Seg F/Q Excavation and Restoration - RY	VRHabilis	1	Equipment Operator	10
5	Ditch 3, Seg F/Q Excavation and Restoration - JS	VRHabilis	1	Equipment Operator	10
6	Ditch 3, Seg F/Q Excavation and Restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10
7	Ditch 3, Seg F/Q Excavation and Restoration - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10
8	Ditch 3, Seg F/Q Excavation and Restoration - JW	VRHabilis	1	Crawler Dump Driver/Laborer	10
9	Ditch 3, Seg F/Q Excavation and Restoration - MS	VRHabilis	1	Crawler Dump Driver/Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	80
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	5240
TOTAL WORK HOURS FROM START OF CONSTRUCTION	5320

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the daily site safety meeting. Topics briefed and discussed and names of personnel in attendance are listed on the daily safety sign-in sheet.
	Inspected non-TSCA soil load out operations. No discrepancies noted.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
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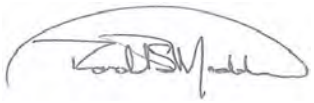
	MacAllister	Caterpillar 308 Excavator	7.5
	ATCO Eq	Komatsu CD60 Crawler Dump	7.4
	ATCO Eq	Komatsu CD60 Crawler Dump	6.7
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0.3
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.8
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	4.8

Schedule Activity No.	REMARKS
1	Excavation, soil transportation to Pad-1 and restoration work continued in Segment 3, Area F/Q.
2	All excavated areas were backfilled and restored by the end of the workday.



CONTRACTOR/SUPERINTENDENT — DATE: 4 Sep 2014

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 9/4/14

Location: Naval Support Activity Crane **Presented by:** E. Hodgkinson

Check the Topics/Information Reviewed:

- ☑ Daily work scope reviewed
- ☐ safety is everyone=s responsibility
- ☐ site health and safety plan reviewed
- ☑ safety glasses, hard hat, safety boots
- ☐ employee Right-To- Know/MSDS location
- ☐ vehicle safety and driving/road conditions
- ☐ hazard analysis for all tasks or new technology
- ☐ chemical hazards -PCB's
- ☐ first aid, safety, and PPE location
- ☐ sharp object, rebar, and scrap metal hazards
- ☐ latex gloves inner/nitrile gloves outer
- ☐ open pits, excavations, and trenching hazards
- ☐ excavation/trenching inspections/documentation
- ☐ full face respirators with proper cartridges
- ☐ upgrade to Level C at:
- ☐ work stoppage at:
- ☐ portable tool safety and awareness
- ☑ slips, trips, and falls
- ☐ strains and sprains
- ☐ anticipated visitors
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- ☐ public safety and fences
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- ☑ leather gloves for protection
- ☐ effects of the night before? Rain or snow?
- ☐ vibration related injuries
- ☐ noise hazards
- ☐ confined space entry
- ☐ hot work permits
- ☐ overhead utility locations cleared?
- ☐ all underground utilities cleared?
- ☐ equipment and machinery familiarization
- ☐ fire extinguisher locations
- ☐ eye wash station locations
- ☐ directions to hospital
- ☑ heat and cold stress
- ☐ decontamination steps
- ☐ review emergency protocol
- ☐ parking and laydown area
- ☐ vehicle backing up hazards
- ☐ accidents can be costly
- ☐ no horse play
- ☐ dust and vapor control
- ☐ refueling procedures
- ☐ flying debris hazards
- ☑ poison ivy/oak/sumac
- ☐ bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Situational Awareness

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
Michael Sheck		VHR
DON BROCK		VRH
R Yetman		VRH
John Snyder		VRH
Joshua Madden		VRH
James Wells		VRH
RONALD MADDEN		VRHK

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	N/A	
Hot Work Permit	N/A	
Trenching & Excavation Permit	✓	
Lifting & Carring	✓	
Air Monitoring	N/A	
Dust Control	N/A	
Silt Fence Installation	N/A	
WWTP	N/A	
Grading	✓	
Compacting	N/A	
Trenching	✓	
Excavation	✓	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	N/A	
Ear Protection	✓	
Tyvek	N/A	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	N/A	
Seeding	N/A	
Temporary Fencing	N/A	
Stop Signs	✓	
R / R Crossings	N/A	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM:	NOTES:

SIGNITURE: [signature] DATE: 9/4/14

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

SWMU 17 Phase II - Daily Contractor Report Photographs – 4 Sep 2014

Crawler Dump receiving topsoil for restoration in 3F

Non-TSCA contaminated soil load out for transport to Pad-1

Restoration of Ditch 3, Segment F

Restoration of culvert, Ditch 3, Segment 6, near EOD building

Documenting depth to bedrock, Segment Q

Ditch 3, Segment Q excavation complete

CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE	5 September 2014		
CONTRACT NO	TITLE AND LOCATION	REPORT NO	
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	082 - FINAL	
CONTRACTOR		SUPERINTENDENT	
VRHabilis-KEMRON, LLC		Ronald S. Madden	
AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Clear	Partly Cloudy	89	69

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	Project oversight - RM	VRHabilis	1	Site Superintendent	10
2	Project oversight - EH	VRHabilis	1	Quality Control	0
3	Project oversight - EH	VRHabilis	1	Safety	10
4	Ditch 3, Seg Q, haul routes, and Pad-1 Restoration - RY	VRHabilis	1	Equipment Operator	10
5	Ditch 3, Seg Q, haul routes, and Pad-1 Restoration - JS	VRHabilis	1	Equipment Operator	10
6	Ditch 3, Seg Q, haul routes, and Pad-1 Restoration - DB	VRHabilis	1	Crawler Dump Driver/Laborer	10
7	Ditch 3, Seg Q, haul routes, and Pad-1 Restoration - JM	VRHabilis	1	Crawler Dump Driver/Laborer	10
8	Ditch 3, Seg Q, haul routes, and Pad-1 Restoration - JW	VRHabilis	1	Crawler Dump Driver/Laborer	10
9	Ditch 3, Seg Q, haul routes, and Pad-1 Restoration - MS	VRHabilis	1	Crawler Dump Driver/Laborer	10

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO

TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS	80
CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT	5320
TOTAL WORK HOURS FROM START OF CONSTRUCTION	5400

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
	All personnel attended the daily site safety meeting. Topics briefed and discussed and names of personnel in attendance are listed on the daily safety sign-in sheet.
	Inspected load out of final non-TSCA soils and Pad-1 teardown and load out. No discrepancies noted.

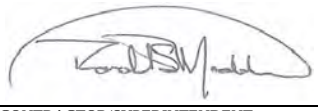
EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
	VRH Logistics	Bobcat T300 Skid Steer	2.4
	VRH Logistics	John Deere 50D Compact Excavator	4.2
	ATCO Eq	Case CX225 Excavator	3.5
	MacAllister	Caterpillar 308 Excavator	4.6
	ATCO Eq	Komatsu CD60 Crawler Dump	2.9
	ATCO Eq	Komatsu CD60 Crawler Dump	3.3
	Sunbelt Rentals	Kubota UTV Model RTV0900 – S01 (#30)	0.5
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S02 (#50)	1.2
	Sunbelt Rentals	Kubota UTV Model RTV1140 – S03 (#91)	3.8

Schedule Activity No.	REMARKS
1	Completed final load out of non-TSCA soils from Pad-1. Pad was deconstructed and loaded out along with non-TSCA soil. Pad area was restored.
2	Ditch 3, area 3Q and remaining haul routes were restored.
3	All other areas disrupted by VRHK were restored.
4	This is the final daily report. Monday's activities are administrative only; packing up of site trailer and preparing for demobilization on Tuesday.



CONTRACTOR/SUPERINTENDENT — 5 Sep 2014 DATE

DAILY SAFETY MEETING

Project Name: SWMU 17 Phase II **Date:** 9/5/14

Location: Naval Support Activity Crane **Presented by:** E. Hodgkinson

Check the Topics/Information Reviewed:

- [x] Daily work scope reviewed
- [ ] safety is everyone=s responsibility
- [ ] site health and safety plan reviewed
- [x] safety glasses, hard hat, safety boots
- [ ] employee Right-To- Know/MSDS location
- [ ] vehicle safety and driving/road conditions
- [ ] hazard analysis for all tasks or new technology
- [ ] chemical hazards -PCB's
- [ ] first aid, safety, and PPE location
- [ ] sharp object, rebar, and scrap metal hazards
- [ ] latex gloves inner/nitrile gloves outer
- [x] open pits, excavations, and trenching hazards
- [ ] excavation/trenching inspections/documentation
- [ ] full face respirators with proper cartridges
- [ ] upgrade to Level C at:
- [ ] work stoppage at:
- [ ] portable tool safety and awareness
- [x] slips, trips, and falls
- [x] strains and sprains
- [ ] anticipated visitors
- [ ] electrical ground fault
- [ ] public safety and fences
- [ ] excavator swing and loading
- [ ] orderly site and housekeeping
- [ ] smoking in designated areas
- [x] leather gloves for protection
- [ ] effects of the night before? Rain or snow?
- [x] vibration related injuries
- [ ] noise hazards
- [ ] confined space entry
- [ ] hot work permits
- [ ] overhead utility locations cleared?
- [ ] all underground utilities cleared?
- [ ] equipment and machinery familiarization
- [ ] fire extinguisher locations
- [ ] eye wash station locations
- [ ] directions to hospital
- [ ] heat and cold stress
- [ ] decontamination steps
- [ ] review emergency protocol
- [ ] parking and laydown area
- [ ] vehicle backing up hazards
- [ ] accidents can be costly
- [ ] no horse play
- [ ] dust and vapor control
- [ ] refueling procedures
- [x] flying debris hazards
- [ ] poison ivy/oak/sumac
- [ ] bio hazards (ticks, chiggers, snakes, etc.)

Other Discussion Items/Comments/Follow-up Actions: Accident Reporting

NAME (PRINT)	NAME (SIGNATURE)	COMPANY
RONALD S. MADDEN		VRHK
MICHAEL MADDEN		VRH
R Pettman		VRH
Michael Shea		VRH
DON BROCK		VRH
James Wells		VRH
John Snyder		VRH
E Adler		VRH-K

Form B
Site Inspection Form

OPERATION	SAFE	UNSAFE
EQUIPMENT:	**SAFE**	**UNSAFE**
Fire Extinguisher	✓	
Back-up Alarm	✓	
Clean Access and Egress	✓	
Hand Holds	✓	
Hydraulic Leaks	✓	
COMMUNICATION:	**SAFE**	**UNSAFE**
Radio	✓	
Telephone	✓	
Equipment Horn	✓	
Hand Signals	✓	
Verbal	✓	
FIELD OPERATIONS:	**SAFE**	**UNSAFE**
HWP (Hazardous Work Permit)	N/A	
Hot Work Permit	N/A	
Trenching & Excavation Permit	N/A	
Lifting & Carring	✓	
Air Monitoring	N/A	
Dust Control	N/A	
Silt Fence Installation	✓	
WWTP	N/A	
Grading	✓	
Compacting	✓	
Trenching	N/A	
Excavation	N/A	
Hauling	✓	

OPERATION	SAFE	UNSAFE
HOUSEKEEPING:	**SAFE**	**UNSAFE**
Trash	✓	
Material Stacked to High	✓	
Electrical Cords	✓	
GFCI	✓	
Tool Trailer	✓	
Fire Extinguisher(s) Records	✓	
PERSONAL PROTECTION EQUIPMENT:	**SAFE**	**UNSAFE**
HARD HAT	✓	
Safety Glasses w/Sideshields	✓	
Safety Toed Shoes	✓	
Gloves	✓	
Level "C" Equipment	N/A	
Ear Protection	✓	
Tyvek	N/A	
GENERAL OBSERVATION:	**SAFE**	**UNSAFE**
Surveying	N/A	
Seeding	✓	
Temporary Fencing	N/A	
Stop Signs	✓	
R / R Crossings	N/A	
Speed Limits	✓	
Fueling of Equipment	✓	
Spotter	✓	
Hand Tools	✓	
F.S. Break Trailer	✓	

ITEM: **NOTES:**

SIGNITURE: [signature] **DATE:** 9/5/14

FORMULA:

TOTAL SAFE + TOTAL UNSAFE = TOTAL SAMPLED TOTAL SAFE x 100 / TOTAL SAMPLED = % SAFE

SAMPLE FORMULA:

0 (SAFE) + 0 (UNSAFE) = 0 (TOTAL SAMPLED) 0 (TOTAL SAFE x 100 / 0 (TOTAL SAMPLED) = 100% (SAFE)

NOTE: This formula can also be applied to each operation to determine the largest opportunities for improvement.

SWMU 17 Phase II - Daily Contractor Report Photographs – 5 Sep 2014

Scarifying haul route for restoration, Segment 1

Sowing seed and straw for restoration, Ditch 3, Segment Q

Restoring bank at Zone 9 roadway

Restoring topsoil laydown area, near Pad-1

Restoring haul route, Segment 1

Final non-TSCA soil and Pad-1 liner load out

From:	Ryan Lane
To:	Sears, Tim R CIV NAVFAC MIDLANT, PWD Crane
Cc:	Elliott Adler (External); Ryan Lane; Larry Emerson; Cindy Papousek; "Scott Alogna"; "Paul Baril"; Ron Madden (External); Losekamp, Kevin; Johnston, Tom; Tim Duda
Subject:	SWMU 17 VRHK Daily Rpt - FINAL
Date:	Friday, December 12, 2014 10:34:11 AM
Attachments:	Nov 24 - SWMU 17 Contractor Rpt (3).pdf

Tim,

Please see the attached final Production report for SWMU 17. This is for the tree plantings completed by Cardno/JFNew before the Thanksgiving Holiday.

Thanks,

Ryan Lane
Project Scientist
KEMRON Environmental Services, Inc.
3155 Blackhawk Drive, Building 379
Fort Sheridan, IL 60037
Office: 847-266-1350 x17
Cell: 419-565-7786

Know Safety, No Accidents

Before printing, think about ENVIRONMENTAL responsibility.

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CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 24 November 2014

CONTRACT NO	TITLE AND LOCATION	REPORT NO
N40083-11-D-0032-0006	SWMU 17 PHASE II / Naval Support Activity Crane - Crane, IN	083

CONTRACTOR	SUPERINTENDENT
VRHabilis-KEMRON, LLC	Paul Baril

AM WEATHER	PM WEATHER	MAX TEMP (F)	MIN TEMP (F)
Cloudy Cold Windy	Cold	59	37

WORK PERFORMED TODAY

Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
1	SWMU 23 / Project Oversight – Jay Senter	VRHK	1	Site Supervisor	1.5
2	SWMU 17 / Project Management – Ryan Templeton	Cardno	1	PQCM/SHSS	5
3	SWMU 17 / Project oversight – Crystal Heitzman	Cardno	1	Operator	5
4	SWMU 17 / Operator – John Hatten	Cardno	1	Operator	5
5	SWMU 17 / Laborer – Matthew Dillman	Cardno	1	Laborer	5
6	SWMU 17 / Laborer – Brett Daugherty	Cardno	1	Laborer	5
7	SWMU 17 / Laborer – Tyler Fritz	Cardno	1	Laborer	5
8	SWMU 17 / Laborer – Dennis Mercer	Cardno	1	Laborer	5
9	SWMU 17 / Laborer – Nathan Hadley	Cardno	1	Laborer	5
10	SWMU 17 / Laborer – Ryan Mendenhall	Cardno	1	Laborer	5
11	SWMU 17 / Laborer – Scott Dillman	Cardno	1	Laborer	5
12		Cardno	1	Laborer	5

JOB SAFETY

WAS A JOB SAFETY MEETING HELD THIS DATE? (If YES attach copy of the meeting minutes)	☒ YES	☐ NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CON'T SHEETS: 80
WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (If YES attach copy of completed OSHA report)	☐ YES	☒ NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT: 5400
WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? (If YES attach statement or checklist showing inspection performed.)	☐ YES	☒ NO	
WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? (If YES attach description of incident and proposed action.)	☐ YES	☒ NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION: 5480

Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED ☒ SAFETY REQUIREMENTS HAVE BEEN MET.
01	Typical PPE used by all personnel (Safety Glasses, Gloves, High Visibility clothing, Work Boots).
02	Work briefing completed at the start of work to review work plan, safety risks, and expectations
03	Slip/trip hazards identified and communicated to crew.

EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)

Schedule Activity No.	Submittal #	Description of Equipment/Material Received
01	-	See Attached Pick Slips

CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.

Schedule Activity No.	Owner	Description of Construction Equipment Used Today (including Make and Model)	Hours Used
01	Cardno	John Deere XUV	0
			0
			0

Schedule Activity No.	REMARKS
01	
02	
03	
04	

Project Manager

9 December 2014
DATE

CONTRACTOR QUALITY CONTROL REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

DATE: 24-Nov-2014

REPORT NO: 002

PHASE | CONTRACT NO: N40083-11-D-0032-0008 | CONTRACT TITLE: SWMU 23 / Naval Support Activity Crane - Crane, IN

PREPARATORY

WAS PREPARATORY PHASE WORK PREFORMED TODAY? YES ☒ NO ☐

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL PREPARATORY PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
01	Jay Senter Onsite. Observed Crew Safety Meeting from Cardno and the action plan for the tree plantings.	
02		
03		

INITIAL

WAS INITIAL PHASE WORK PREFORMED TODAY? YES ☐ NO ☒

IF YES, FILL OUT AND ATTACH SUPPLEMENTAL INITIAL PHASE CHECKLIST.

Schedule Activity No.	Definable Feature of Work	Index #
01	Documented the planting operations and saw the plantings going in along Ditch 3.	

FOLLOW-UP

WORK COMPLIES WITH CONTRACT AS APPROVED DURING INITIAL PHASE? YES ☒ NO ☐

WORK COMPLIES WITH SAFETY REQUIREMENTS? YES ☒ NO ☐

Schedule Activity No.	Description of Work, Testing Performed & By Whom, Definable Feature of Work, Specification Section, Location and List of Personnel Present
01	Finished planting 575 trees in the SWMU 17 area.

REWORK ITEMS IDENTIFIED TODAY (NOT CORRECTED BY CLOSE OF BUSINESS)

Schedule Activity No.	Description
	No rework items identified.

REWORK ITEMS CORRECTED TODAY (FROM REWORK ITEMS LIST)

Schedule Activity No.	Description

REMARKS (Also Explain Any Follow-Up Phase Checklist Item From Above That Was Answered "NO"), Manuf. Rep On-Site, etc.

Schedule Activity No.	Description
	All work was accomplished in accordance with the Work Plan and the Accident Prevention Plan. No Work Plan or Accident Prevention Plan discrepancies noted.

Ryan Zare

AUTHORIZED QC MANAGER AT SITE — DATE: 08-Dec-2014

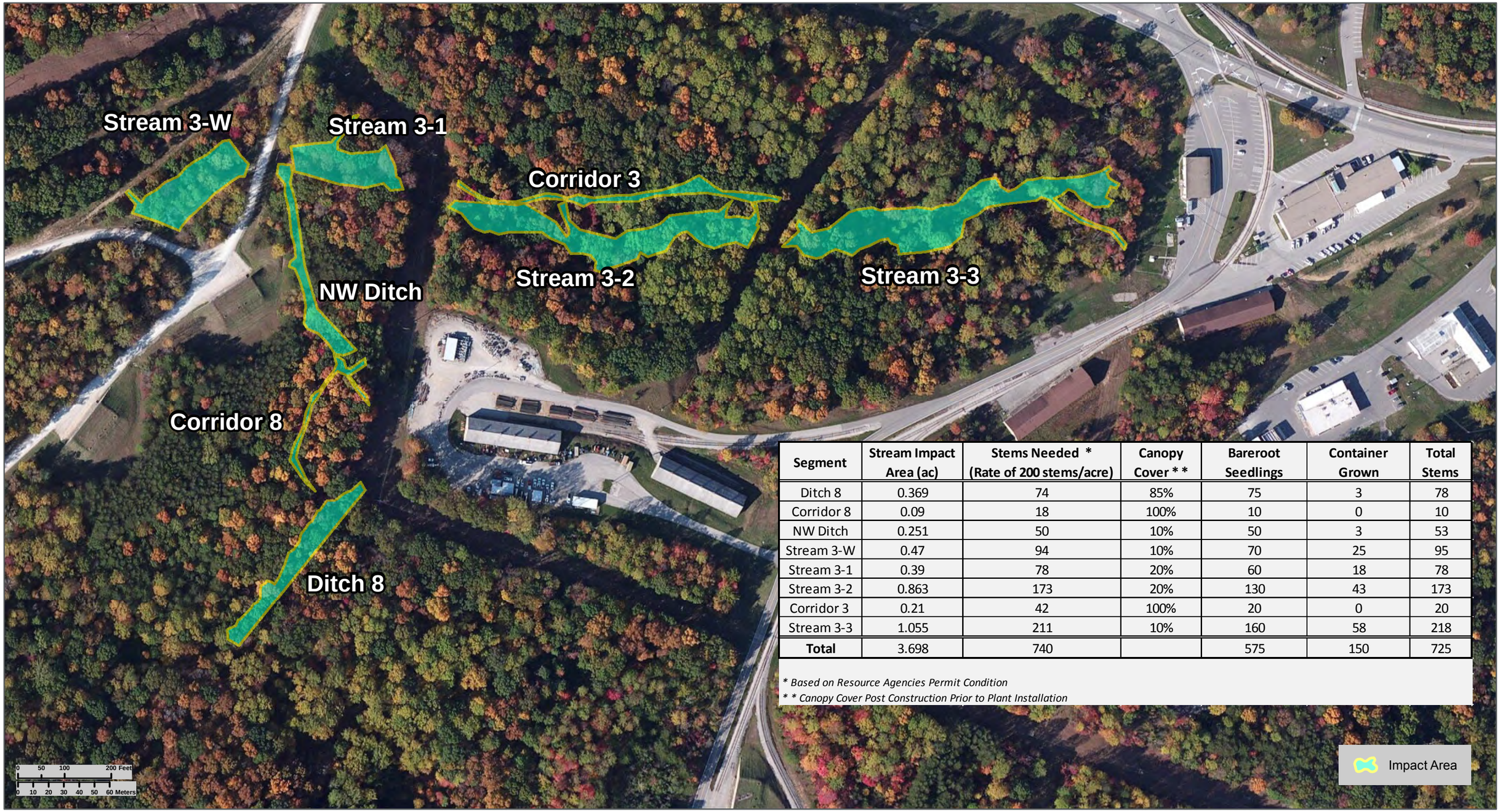
GOVERNMENT QUALITY ASSURANCE REPORT

DATE

QUALITY ASSURANCE REPRESENTATIVE'S REMARKS AND/OR EXCEPTIONS TO THE REPORT

Schedule Activity No.	Description

GOVERNMENT QUALITY ASSURANCE MANAGER — DATE



Segment	Stream Impact Area (ac)	Stems Needed * (Rate of 200 stems/acre)	Canopy Cover * *	Bareroot Seedlings	Container Grown	Total Stems
Ditch 8	0.369	74	85%	75	3	78
Corridor 8	0.09	18	100%	10	0	10
NW Ditch	0.251	50	10%	50	3	53
Stream 3-W	0.47	94	10%	70	25	95
Stream 3-1	0.39	78	20%	60	18	78
Stream 3-2	0.863	173	20%	130	43	173
Corridor 3	0.21	42	100%	20	0	20
Stream 3-3	1.055	211	10%	160	58	218
Total	3.698	740		575	150	725

** Based on Resource Agencies Permit Condition*
** * Canopy Cover Post Construction Prior to Plant Installation*

Impact Area

N
W E
S

Township: 5 N
Range: 4 W
Section: 15
Project No.
J1303134

This map and all data contained within are supplied as is with no warranty. Cardno, Inc. expressly disclaims responsibility for damages or liability from any claims that may arise out of the use or misuse of this map. It is the sole responsibility of the user to determine if the data on this map meets the user's needs. This map was not created as survey data, nor should it be used as such. It is the user's responsibility to

Impact Area Map

SWMU 17 Phase II
Daily Contractor Report
VR Habilis
Martin County, Indiana

Cardno JFNew
3901 Industrial Blvd.,Indianapolis, IN 46254 USA
Phone (+1) 317-388-1982 Fax (+1) 317-388-1982
www.cardnojfnew.com

Date Created: 12/5/2014 Date Revised: 12/5/2014 File Path: R:\Projects\13\1303\1303134_VRHabilis_CraneNaval\GIS\MXD\ImpactAreas\Impact_Areas2.mxd
Basemap: Source: Esri, DigitalGlobe, GeoEye, i-cubed, Earthstar Geographics, CNES/Airbus DS, USDA, USGS, AEX, Getmapping, Aerogrid, IGN, IGP, swisstopo, and the GIS User Community
Saved By: Stephen.LaFon

SWMU 17 Phase II – Daily Contractor Report Photographs – 5 Sep 2014

Planting Trees in flood plain areas, Segment Stream 3-W

Planting Trees within impact areas, Segment Stream 3-3

Planting trees in haul road, Segment Stream 3-3

Planting Trees in impact area, Segment Stream 3-2

Planting trees in impact area, Segment Stream 3-2

Planting trees in impact area, Segment Stream 3-1

Woody Warehouse NURSERY, INC.
Offering Superior American Native Trees

3339 W 850 N
PO Box 259
Lizton, IN 46149

Phone #	317-994-5487
Fax #	317-994-5494

Order Acknowledgement

CUSTOMER
Cardno JF New Nursery Business Office 708 Roosevelt Rd Walkerton , IN 46574

DATE	ESTIMATE #
6/11/2014	2100

P.O. NO.	TERMS	APPRX. SHIP...	FOB	REP
130313400	Net 30	6/11/2014		Pete

ITEM	DESCRIPTION	QTY.	STATUS	PRICE	TOTAL
SUM3	Acer saccharum - Sugar Maple - 3 gallon 2.5-3'	10			
AMH3	Carpinus caroliniana - American Hornbeam - 3-gallon 3-5'	10			
HAC3	Celtis occidentalis - Hackberry - 3 gallon 3-5'	5			
REB3	Cercis canadensis - Redbud - 3 gallon 3-5'	10			
RLD3	Cornus drummondii - Roughleaf Dogwood - 3 gallon 2-3'	10			
BLW3	Juglans nigra - Black walnut - 3 gallon 3'	10			
ABW3...	Tillia americana - American Basswood - 3-gallon RootMaker 3-4'	10			
TUP3	Liriodendron tulipifera- Tulip poplar - 3 gallon 3'	5			
BLG3...	Nyssa sylvatica - Black Gum - 3 gallon root pruning 6-7'	10			
SYC3	Platanus occidentalis - Sycamore - 3 gallon 3-5'	10			
BLC3	Prunus serotina - Black Cherry - 3 gallon 3-5'	10			
SWO3	Quercus bicolor- Swamp White Oak - 3 gallon 3-5'	10			
CHO3	Quercus muehlenbergii - Chinquapin oak - 3 gallon 3-4'	10			
SUO3	Quercus shumardii - Shumard oak - 3 gallon 3-5'	20			
BLV3	Viburnum prunifolium - Blackhaw Viburnum - 3 gallon 2-3'	10			
Delivery	Driver is not required to unload. Estimated to Crane, IN	1			

Thank you!	SUB TOTAL
	SALES TAX (0.0%)
SIGNATURE AND DATE	**TOTAL**

ACCEPTANCE OF THIS SALES AGREEMENT

The above, prices and specifications of this Sales Contract are satisfactory and are hereby accepted. In addition, the Terms of Sales conditions located on the back of this Sales Agreement have been read, understood and are hereby accepted. Woody Warehouse Nursery, Inc. is authorized to complete the work specified herein and all payments shall be made to Woody Warehouse Nursery, Inc. By signing this Agreement, I warrant that I have the authority to enter into this agreement as the purchaser or authorized representative of the purchaser.

Thank you for choosing Woody Warehouse Nursery, Inc. to provide this service for you. We look forward to working with you on this project as well as future business endeavors.

ALPHA NURSERIES, INC.

3737 –65TH ST.
HOLLAND, MI 49423

Phone: 269/857-7804
E-mail: info@alphanurseries.com
Fax: 269/857-8162

Ordered By: J.F. New Native Plant Nursery
attn: Crystal H.
PO Box 243
Walkerton, IN 46574

Ship To:

Scheduled Delivery Date: 06/24/14
Ship via: UPS
Phone 317/388-1982
Mobile
Fax 317/388-1986
Email Crystal.Heitzman@cardno.com
Date: 10/10/14
Revised:
Order Number: **J11**

Acknowledgement

Qty	Size	Age	Species	Class	Co-effic.	Unit Price	Total
25	18-24"	1-0	Sugar maple	Seedlings			
50	18-24"	1-0	Hornbeam	Seedlings			
50	6-12"	1-0	Shagbark hickory	Seedlings			
25	18-24"	1-0	Hackberry	Seedlings			
25	18-24"	1-0	Eastern redbud	Seedlings			
25	18-24"	1-0	Rough-leaved dogwood	Seedlings			
50	18-24"	1-0	Flowering dogwood	Seedlings			
25	18-24"	1-0	Black walnut	Seedlings			
25	18-24"	1-0	American basswood	Seedlings			
25	18-24"	1-0	Tulip tree	Seedlings			
25	18-24"	1-0	Black gum	Seedlings			
25	18-24"	1-0	Sycamore	Seedlings			
50	18-24"	1-0	Black Cherry	Seedlings			
50	18-24"	1-0	White oak	Seedlings			
25	18-24"	1-0	Swamp white oak	Seedlings			
25	18-24"	1-0	Chinkapin oak	Seedlings			
25	18-24"	1-0	Shumard's oak	Seedlings			

550 plants

(UPS orders: Balance due 2 weeks prior to shipping date)

Note: All orders are subject to terms and conditions as listed on page 19 of our catalog.

(Note: Order can only be considered confirmed once deposit has been paid.)

Due: **2 weeks from Date of Acknowledgment** >>>

* Minimum charge is $25.00 for shipped orders

** (Includes any documentation required for int'l shipments)

Sub-total
Less Discounts
Packing & Shipping *, **
Total
Deposit - 25%
Less Deposit Paid
Deposit Due
Order Balance
(If deposit is paid in full)

THANK YOU FOR YOUR ORDER!

APPENDIX G

OFFSITE WASTE DISPOSAL DOCUMENTS

APPENDIX G-1

OFFSITE WASTE DISPOSAL DOCUMENTS – PHASE 1

APPENDIX G-1.1

NSA CRANE WEIGHT TICKETS – PHASE 1

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

(1)

TRUCK/TRACTOR NO. 3024	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 51,220 lbs	
☐ COUPLED	23,281 lbs	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

(2)

TRUCK/TRACTOR NO. 2077	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 24 090 Kg	53,000 lbs
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET (3)

9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 2016	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 53,240 lb	
☐ **COUPLED**	24,245	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

(4)

TRUCK/TRACTOR NO. 3045	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 51,180 lbs	
☐ COUPLED	23,263 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

5

TRUCK/TRACTOR NO. 6300	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,181 Kg 51,000 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

624

TRUCK/TRACTOR NO. 30606	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

17,672

35,280

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

7

TRUCK/TRACTOR NO. 2027	**SCC** ☐☐☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,672 kg 52,050 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

8

TRUCK/TRACTOR NO. 3041	SCC ☐☐☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,436 Kg	51560 lbs
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

9

TRUCK/TRACTOR NO. 3024	SCC ☐☐☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,155 KG 50,940 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

10

TRUCK/TRACTOR NO. 30609	SCC ☐☐☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 20,609 Kg 45,340 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 11

TRUCK/TRACTOR NO. 3037	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 51,940 lbs	
☐ COUPLED	23,609 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 12
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 6300	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,018 Kg 50,640 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 13
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 2077	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 21,454 Kg 47,200 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 4
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 2016	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,518 Kg 51,740 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 15

TRUCK/TRACTOR NO. 3024	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,212 Kg 50,300 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 16

TRUCK/TRACTOR NO. 6300	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED	23,045 Kg	52,020 lbs
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 17
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3037	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 51,060 lbs	
☐ COUPLED	23,209	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

13

TRUCK/TRACTOR NO. 307	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,964 Kg 52,720 LS	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 19

TRUCK/TRACTOR NO. 2016	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,973 Kg 50,540 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

20

TRUCK/TRACTOR NO. 3045	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	50,300 lbs
☐ COUPLED	22,364 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 21

TRUCK/TRACTOR NO. 2016	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 52,120 lbs	
☐ COUPLED	23,691 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 22

TRUCK/TRACTOR NO. 2077	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,176 Kg 50,900 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 23

TRUCK/TRACTOR NO. 3027	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 52,000 lbs	
☐ **COUPLED**	23,636 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 24

TRUCK/TRACTOR NO. 3024	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,555 Kg	49.62016
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

25

TRUCK/TRACTOR NO. 3027	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 48,500 lb	
☐ COUPLED	22,045 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

26

TRUCK/TRACTOR NO. 207	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,591 Kg 51,900 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

27

TRUCK/TRACTOR NO. 2227	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23264 Kg 51,180 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

28

TRUCK/TRACTOR NO. 3066	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,527 Kg . 49,560 Lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 29

TRUCK/TRACTOR NO. 3024	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 51,960 LBS	
☐ COUPLED	23,618 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

30

TRUCK/TRACTOR NO. 2057	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,900 Kg 50,270 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

31

TRUCK/TRACTOR NO. 3045	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,245 Kg	51,140 lbs
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 32

TRUCK/TRACTOR NO. 3077	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ **COUPLED**	24,345 Kg	53,560 lbs
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

33

TRUCK/TRACTOR NO. 3066	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 13:01:23 25 Apr 2013 78020 lb	
EMPTY WT-STENCIL	TARE 11:17:07 25 Apr 2013 27300 lb	
LOAD LIMIT	NET 51,020 lbs	
☐ **COUPLED**	23,191 kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

34

TRUCK/TRACTOR NO. 3045	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	13:01:31 25 Apr 2013 79640 Lbs
EMPTY WT-STENCIL	TARE	14:23:20 25 Apr 2013 27600 Lbs
LOAD LIMIT	NET	Dlvd 23,655 Kg 52,040 lbs
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 35
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3037	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 17:12:50 25 Apr 2013 78980 lb	
EMPTY WT-STENCIL	TARE 12:29:34 25 Apr 2013 27500 lb	
LOAD LIMIT	NET 23,345 Kg 51,360 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 36
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 1024	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 10:20:02 25 Apr 2013 73740 lb	
EMPTY WT-STENCIL	TARE 12:34:29 25 Apr 2013 27440 lb	
LOAD LIMIT	NET 21,045 Kg 46,300 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

37

TRUCK/TRACTOR NO. 3027	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 14:27:38 25 Apr 2013 78580 lb	
EMPTY WT-STENCIL	TARE 13:39:21 25 Apr 2013 27540 lb	
LOAD LIMIT	NET 23,200 Kg 51,040 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 38

9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3045	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT 23,000 Kg	NET 50,600 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 39
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3057	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,818 Kg 50,200 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

40

TRUCK/TRACTOR NO. 30660	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,218 Kg 51,080 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 41
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3027	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,373 Kg 49,220 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 42

TRUCK/TRACTOR NO. 2027	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,600 Kg 51,920 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

43

TRUCK/TRACTOR NO. 3024	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,336 Kg 51,340 Lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

44

TRUCK/TRACTOR NO. 2077	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 24,080 Kg 52,980 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 45

TRUCK/TRACTOR NO. 3045	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,302 Kg 51,440 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

46

TRUCK/TRACTOR NO. 3033	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,432 Kg 49,350 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

47

TRUCK/TRACTOR NO. 2021	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
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48

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,045 Kg 50,100 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
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49

TRUCK/TRACTOR NO.	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

50

TRUCK/TRACTOR NO. 3045	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 33,482 51,000	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 51

TRUCK/TRACTOR NO. 3D37	SCC ☐☐☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,236 Kg 51,201 Lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

52

TRUCK/TRACTOR NO. 3024	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

22,991 Kg

50,670 lb

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

53

TRUCK/TRACTOR NO. 3024	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,536 Kg 49,560 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

54

TRUCK/TRACTOR NO. 3037	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,218 Kg 52,410 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 55
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 2016	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,877 Kg 52,530 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 56
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3037	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE 78240 lb 05:52:08 01 May 2013 37240 lb	
LOAD LIMIT	NET 23,082 Kg 50,780	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 57
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3037	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,727 Kg 52,300 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

58

TRUCK/TRACTOR NO. 3024	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 21,782 Kg	47,920 lbs
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

51

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,036 Kg 50,670 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

60

TRUCK/TRACTOR NO. 2027	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,945 Kg 50,480 LBS	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

61

TRUCK/TRACTOR NO. 2037	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,219 Kg 51,020 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 2016	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 48,480 lbs	
☐ COUPLED	22,006 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

163

TRUCK/TRACTOR NO. 2024	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,291 Kg 49,040 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3042	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 21,982 Kg 48,360 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET

9ND-NWSCC 4010/2 (Rev. 6-79)

65

TRUCK/TRACTOR NO. 027	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,073 Kg	48,560 LBS
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 66
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3027	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,782 Kg 50,120 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

67

TRUCK/TRACTOR NO. 3024	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 21,382 Kg	47,040 lbs
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

68

TRUCK/TRACTOR NO. 2016	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 52,160 lb	
☐ COUPLED	23,709 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

69

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 21,700 Kg	47,740 lbs
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

70

TRUCK/TRACTOR NO. 2027	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,945 Kg	50,480 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

71

TRUCK/TRACTOR NO. 3027	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,655 Kg	49,840 lb
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 72

TRUCK/TRACTOR NO. 2016	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,954 Kg	50,500 lbs
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 73
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3024	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,390	49,260
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

74

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,445 Kg	49,380 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

75

TRUCK/TRACTOR NO. 3037	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,546 Kg = 51,800 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

76

TRUCK/TRACTOR NO. 3027	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,291 Kg	49,040 lb
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

77

TRUCK/TRACTOR NO. 2016	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,864 Kg 52,500 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 78
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TRUCK/TRACTOR NO. 3024	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED	22,745 Kg 50,040 lbs	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

79

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,673 Kg 49,880 lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

80

TRUCK/TRACTOR NO. 3037	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED	22,036 Kg	49,800 lbs
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

81

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 49,100lbs	
☐ COUPLED	22,318kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
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82

TRUCK/TRACTOR NO. 2016	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,345 Kg	51,360 lbs
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

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TRUCK/TRACTOR NO. 3024	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 21,836 Kg	48,040 lbs
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3037	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,809 Kg	50,180lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

85

TRUCK/TRACTOR NO. 3077	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 49,040 lbs	
☐ COUPLED	22,291 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 86
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3043	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,009 Kg 48,420lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 87
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3016	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,873 Kg 52,520 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

88

TRUCK/TRACTOR NO. 3024	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 11:45:00 03 May 2012 76540 lbs	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 49,020 lbs	
☐ COUPLED	22,282 kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 89

9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 7037	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	11 55 00 [illegible] 2013 77800 lbs
EMPTY WT-STENCIL	TARE	[illegible] 27560 lb
LOAD LIMIT	NET	50,240 lb
☐ COUPLED	22,836 kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 90
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3027	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE 12:15 03 May 2013 77300 lb	
LOAD LIMIT	NET 49,540 lb	
☐ COUPLED	22,518 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

91 Roll off

TRUCK/TRACTOR NO. HY Old	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 20,145 Kg 44320 lbs	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 92 Roll off
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 106018	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 20,872 Kg = 45,720 lbs	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

93

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,091 kg	48,600 lbs
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

94

TRUCK/TRACTOR NO. 3057	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,700 Kg	49,940 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

95

TRUCK/TRACTOR NO. 6133	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 17,691 kg . 38,920	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,236 Kg 48,920 Lbs	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3020	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,609 Kg	49,740 lbs
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

98

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,782	50,120 LBS
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET

9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3057	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,182 Kg	51,000 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

100

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,355 Kg 49.180 LBS	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 101
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 6183	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 17,873 Kg	39,320 lbs
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 102
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3020	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET - 22,545 kg 49,600 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 103
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 6183	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 09:11:16 08 May 2017 76060 lb	
EMPTY WT-STENCIL	TARE 06:23:07 08 May 2017 26980 lb	
LOAD LIMIT	NET 22,355 Kg 49,180 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

104

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 10:00:16 08 May 2013 79740 lb	
EMPTY WT-STENCIL	TARE 08:40:46 08 May 2013 28700 lb	
LOAD LIMIT	NET 23,200 Kg 51,040 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

105 TSCA

TRUCK/TRACTOR NO. 6183	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 12:43:50 08 May 2013 73500 lb	
EMPTY WT-STENCIL	TARE 12:40:29 08 May 2013 27580 lb	
LOAD LIMIT	NET 20,873 Kg 45,920 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

106 TSCA

TRUCK/TRACTOR NO. 3044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	13:50:10 08 May 2013 78485 lb
EMPTY WT-STENCIL	TARE	15:02:58 08 May 2013 28560 lb
LOAD LIMIT	NET	49,920 lbs
☐ **COUPLED**	22,691 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

107 TSCA

TRUCK/TRACTOR NO. 3020	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 07:42:35 09 May 2013 78980 lb	
EMPTY WT-STENCIL	TARE 07:03:25 09 May 2013 29040 lb	
LOAD LIMIT	NET 22,700 Kg 49,940lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

108 TSCA

TRUCK/TRACTOR NO. 3044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,609 Kg 49,740 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

109 TSCA

TRUCK/TRACTOR NO. 6183	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 0814:37 09 May 2013 74920 lb	
EMPTY WT-STENCIL	TARE 0745:02 09 May 2013 26860 lb	
LOAD LIMIT	NET 21,845 Kg 48,060 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

110

TRUCK/TRACTOR NO. 3020	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	13:04:50 09 May 2013 79340 lb
EMPTY WT-STENCIL	TARE	12:56:40 09 May 2013 28340 lb
LOAD LIMIT	NET	22,955 Kg 50,500 lbs
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

111

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	14:10:10 09 May 2013 77260 lb
EMPTY WT-STENCIL	TARE	13:09:58 09 May 2013 28640 lb
LOAD LIMIT	NET	49,340 lbs
☐ COUPLED	22,427 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 112
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. HA 3020	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 07:36:55 10 May 2013 79560 lb	
EMPTY WT-STENCIL	TARE 07:01:34 10 May 2013 29080 lb	
LOAD LIMIT	NET 22,945 Kg 50,480 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 113
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 08:25:10 10 May 2013 77840 lb	
EMPTY WT-STENCIL	TARE 07:37:52 10 May 2013 28980 lb	
LOAD LIMIT	NET 48,960 lb	
☐ **COUPLED**	22,255 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 114
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 6183	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 08:44:52 10 May 2013 75720 lb	
EMPTY WT-STENCIL	TARE 07:39:29 10 May 2013 26900 lb	
LOAD LIMIT	NET 48,820 lbs	
☐ COUPLED	22, 191 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 115
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3020	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 11:40:24 10 May 2013 79680 lb	
EMPTY WT-STENCIL	TARE 10:29:31 10 May 2013 28940 lb	
LOAD LIMIT	NET 50,740 lb	
☐ **COUPLED**	23,064 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

1/6

TRUCK/TRACTOR NO. 2044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	**GROSS** 12:27:53 10 May 2013 78940 lb	
EMPTY WT-STENCIL	**TARE** 11:22:33 10 May 2013 28780 lb	
LOAD LIMIT	**NET** 22,755 Kg 50,060 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 117 TSCA

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 08:00:23 13 May 2013 79420 lb	
EMPTY WT-STENCIL	TARE 06:50:41 13 May 2013 28930 lb	
LOAD LIMIT	NET <50,600	
☐ COUPLED	23,000 K	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 118 TSCA

TRUCK/TRACTOR NO. Rail us Bulk 104	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 09:02:11 13 May 2013 76960 lb	
EMPTY WT-STENCIL	TARE 07:42:47 13 May 2013 31740 lb	
LOAD LIMIT	NET 45,220	
☐ **COUPLED**	20,554 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

119 TSCA

TRUCK/TRACTOR NO. U.S.B. [illegible]	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO. 302-5A	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 08:34:17 13 May 2013 75180 lb	
EMPTY WT-STENCIL	TARE 07:45:50 13 May 2013 33980 lb	
LOAD LIMIT	NET 41,700	
☐ **COUPLED**	18,727 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

9 ~~LLO~~ TSCA

TRUCK/TRACTOR NO. BIK U.S.B. 139	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO. A521221	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	08:40:26 13 May 2013 76990 lb
LOAD LIMIT	NET	33700 76660 42,960
☐ **COUPLED**		
☐ **UNCOUPLED**		19,527 Kg
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

1ZP TSCA

TRUCK/TRACTOR NO. VSB 302-5 White	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO. 302-2	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 09:14:51 13 May 2013 76560 lb	
EMPTY WT-STENCIL	TARE 07:52:50 13 May 2013 33180 lb	
LOAD LIMIT	NET 19,718 Kg 43,380 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 122 TSCA

TRUCK/TRACTOR NO. 6183 Red	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 09:20:12 13 May 2013 77360 lb	
EMPTY WT-STENCIL	TARE 09:27:55 13 May 2013 26920 lb	
LOAD LIMIT	NET 22,927 Kg = 50,440 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

123

TRUCK/TRACTOR NO. 3044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 13:45:46 13 May 2013 79140 lb	
EMPTY WT-STENCIL	TARE 12:54:47 13 May 2013 28480 lb	
LOAD LIMIT	NET 50,660	
☐ **COUPLED**	23,027	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

124 U.S. Bulk

TRUCK/TRACTOR NO. 104 (red)	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	14:28:51 13 May 2013 76820 lb
EMPTY WT-STENCIL	TARE	13:44:08 13 May 2013 31480 lb
LOAD LIMIT	NET	45,140
☐ **COUPLED**		20,518 Kg
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 125 U.S. Bulk

TRUCK/TRACTOR NO. Mccoon	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO. 3025-5A	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 14:39:18 13 May 2013 75040 lb	
EMPTY WT-STENCIL	TARE 13:46:47 13 May 2013 34700 lb	
LOAD LIMIT	NET 18,473 Kg 40,640 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

126 U.S. Bulk

TRUCK/TRACTOR NO. 139 (BLK)	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 14:53:45 13 May 2013 76780 lb	
EMPTY WT-STENCIL	TARE 13:52:57 13 May 2013 33620 lb	
LOAD LIMIT	NET 19,618 Kg 43,160 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

127 U.S. Bulk

TRUCK/TRACTOR NO. 302-5 (white)	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 14:58:28 13 May 2017 77620 lb	
EMPTY WT-STENCIL	TARE 14:00:39 13 May 2017 33940 lb	
LOAD LIMIT	NET 19,855 Kg 43,680 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 128

TRUCK/TRACTOR NO. 4003	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	15:36:53 13 May 2013 76720 lb
EMPTY WT-STENCIL	TARE	14:08:57 13 May 2013 28560 lb
LOAD LIMIT	NET	21,891 Kg 48,160 lb
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 129
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 6183	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 19,882 Kg 43,740 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET ~~135~~ 130
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 302-SA	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 17:20:54 14 May 2013 76960 lb	
EMPTY WT-STENCIL	TARE 06:49:07 14 May 2013 34460 lb	
LOAD LIMIT	NET 42,400 lbs	
☐ **COUPLED**	19,273 kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

~~129~~ 131

TRUCK/TRACTOR NO. 302-54	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO. White	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 07:37:15 14 May 2013 74480 lb	
EMPTY WT-STENCIL	TARE 06:51:21 14 May 2013 33760 lb	
LOAD LIMIT	NET 18,509 Kg 40,720 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

480 132

TRUCK/TRACTOR NO. 9 900	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 07:54:57 14 May 2013 78600 lb	
EMPTY WT-STENCIL	TARE 06:52:58 14 May 2013 31340 lb	
LOAD LIMIT	NET 47,260 lb	
☐ **COUPLED**	21,482 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

[illegible] 133

TRUCK/TRACTOR NO. 139	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO. Black	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 08:38:25 14 May 2013 78780 lb	
EMPTY WT-STENCIL	TARE 06:54:04 14 May 2013 33420 lb	
LOAD LIMIT	NET 45,360	
☐ COUPLED	20,618 kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

F32 134

TRUCK/TRACTOR NO. 4003	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,282 Kg 49,020 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

RBB 135

TRUCK/TRACTOR NO. 6183	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,173 Kg 48,870 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

1,36

TRUCK/TRACTOR NO. 3044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	12:15:15 14 May 2013 79020 lb
EMPTY WT-STENCIL	TARE	10:54:48 14 May 2013 28800 lb
LOAD LIMIT	NET	50,220 lb
☐ **COUPLED**	22,827 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

137

TRUCK/TRACTOR NO. 302-5A	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 15:30:33 14 May 2015 77240 lb	
EMPTY WT-STENCIL	TARE 12:18:41 14 May 2015 34200 lb	
LOAD LIMIT	NET 19,564 Kg 43,040 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 138
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 302-5	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO. White	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 15:12:06 14 May 2013 76780 lb	
EMPTY WT-STENCIL	TARE 12:19:26 14 May 2013 33520 lb	
LOAD LIMIT	NET 19,664 Kg 43,260 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 139
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 9900	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	13:44:27 14 May 2013 79140 lb
EMPTY WT-STENCIL	TARE	13:05:09 14 May 2013 31480 lb
LOAD LIMIT	NET	21,664 Kg 47,660 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY 137

WEIGHT TICKET 140
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 139	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 14:53:04 14 May 2013 78080 lb	
EMPTY WT-STENCIL	TARE 13:29:38 14 May 2013 33060 lb	
LOAD LIMIT	NET 20,418 Kg 44,920 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 141
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 302-5A	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 07:28:09 15 May 2013 75420 lb	
EMPTY WT-STENCIL	TARE 06:51:20 15 May 2013 34940 lb	
LOAD LIMIT	NET 18,400 Kg 40,480 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 142
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 302-5	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO. White	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 07:38:05 15 May 2013 73540 lbs	
EMPTY WT-STENCIL	TARE 06:52:08 15 May 2013 33320 lbs	
LOAD LIMIT	NET 18,191 Kg 40,020 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

143

TRUCK/TRACTOR NO. 3044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 07:52:48 15 May 2013 77880 lb	
EMPTY WT-STENCIL	TARE 06:53:50 15 May 2013 28780 lb	
LOAD LIMIT	NET 22,318 Kg 49,100 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 144
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 9900	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 08:02:30 15 May 2013 77740 lb	
EMPTY WT-STENCIL	TARE 06:54:33 15 May 2013 31220 lb	
LOAD LIMIT	NET 21,145 Kg 46,520 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 145
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 139	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 08:12:24 15 May 2013 77400 lb	
EMPTY WT-STENCIL	TARE 06:55:21 15 May 2013 33390 lb	
LOAD LIMIT	NET 20,009 Kg 44,0201b	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

146

TRUCK/TRACTOR NO. 4003	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	09:27:06 15 May 2013 78200 lb
EMPTY WT-STENCIL	TARE	07:18:27 15 May 2013 28840 lb
LOAD LIMIT	NET	49,360 lb
☐ **COUPLED**	22,436 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 147
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 6183	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 09:35:45 15 May 2017 68360 lb	
EMPTY WT-STENCIL	TARE 07:25:48 15 May 2017 26820 lb	
LOAD LIMIT	NET 41,540lb 18,882 Kg	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 148
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 302-5	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 12:30:49 15 May 2013 77160 lb	
EMPTY WT-STENCIL	TARE 12:04:57 15 May 2013 33100 lb	
LOAD LIMIT	NET 20,027 Kg 44,060 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 149
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 202-SA	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 12:49:07 15 May 2013 76740 lb	
EMPTY WT-STENCIL	TARE 12:14:18 15 May 2013 34680 lb	
LOAD LIMIT	NET 42,060 lb	
☐ **COUPLED**	19,118 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 150
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 17:38:57 15 May 2017 78360 lb	
EMPTY WT-STENCIL	TARE 12:56:25 15 May 2017 28360 lb	
LOAD LIMIT	NET 22,855 Kg 50,280 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

151

TRUCK/TRACTOR NO. 9900	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 13:51:07 15 May 2013 77680 lb	
EMPTY WT-STENCIL	TARE 12:59:11 15 May 2013 32120 lb	
LOAD LIMIT	NET 45,560 lb	
☐ COUPLED	20,709 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

152

TRUCK/TRACTOR NO. 139	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 14:04:08 15 May 2013 77380 lb	
EMPTY WT-STENCIL	TARE 13:00:20 15 May 2013 33160 lb	
LOAD LIMIT	NET 20,100 Kg = 44,220 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

153

TRUCK/TRACTOR NO. 4003	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,691 Kg	49,920 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 154
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 6183	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 14:32:38 15 May 2013 77260 lb	
EMPTY WT-STENCIL	TARE 10:39:46 15 May 2013 26540 lb	
LOAD LIMIT	NET 23,055 Kg 50,720 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

155

TRUCK/TRACTOR NO. 302-5A	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	07:23:18 16 May 2013 75260 lb
EMPTY WT-STENCIL	TARE	06:44:26 16 May 2013 34440 lb
LOAD LIMIT	NET	18,827 Kg 41,420 Lb
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

156

TRUCK/TRACTOR NO. 3025	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 07:31:47 16 May 2017 76980 lb	
EMPTY WT-STENCIL	TARE 06:45:54 16 May 2017 34000 lb	
LOAD LIMIT	NET 42,880 lbs	
☐ COUPLED	19,491 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

157

TRUCK/TRACTOR NO. 139	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 07:44:12 16 May 2013 79120 lb	
EMPTY WT-STENCIL	TARE 06:47:02 16 May 2013 34100 lb	
LOAD LIMIT	NET 20,464 Kg 45,020 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 158
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 6183	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 07:51:57 15 May 2013 67200 lb	
EMPTY WT-STENCIL	TARE 06:48:02 16 May 2013 26800 lb	
LOAD LIMIT	NET 18,364 Kg 40,400 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

159

TRUCK/TRACTOR NO. 9 900	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	06:04:15 16 May 2013 77160 lb
EMPTY WT-STENCIL	TARE	06:51:54 16 May 2013 31920 lb
LOAD LIMIT	NET 20,564Kg	45,240lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 160
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 4003	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 08:15:45 16 May 2017 76660 lb	
EMPTY WT-STENCIL	TARE 06:54:39 16 May 2017 28660 lb	
LOAD LIMIT	NET 21,818 kg 48,000 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 161
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 08:28:25 16 May 2013 79160 lb	
EMPTY WT-STENCIL	TARE 07:11:36 16 May 2013 28760 lb	
LOAD LIMIT	NET 22,909 Kg 50,400 lbs	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

162

TRUCK/TRACTOR NO. 302 S-A	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	07:27:31 17 May 2013 78980 lb
EMPTY WT-STENCIL	TARE	06:50:25 17 May 2013 34140 lb
LOAD LIMIT	NET	44,740 lb
		20,336 Kg
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 163
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 302-5	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 07:35:36 17 May 2013 77460 lb	
EMPTY WT-STENCIL	TARE 06:51:15 17 May 2013 33720 lb	
LOAD LIMIT	NET 43,740 lb	
☐ **COUPLED**	19.882 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

164

TRUCK/TRACTOR NO. 139	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 07:50:00 17 May 2013 77820 lb	
EMPTY WT-STENCIL	TARE 06:51:58 17 May 2013 33900 lb	
LOAD LIMIT	NET 19,964 Kg 43,920 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

165

TRUCK/TRACTOR NO. 9900	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 06:03:18 17 May 2013 76340 lb	
EMPTY WT-STENCIL	TARE 06:52:56 17 May 2013 31720 lb	
LOAD LIMIT	NET 21,191 Kg	16.05.2013
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 1666
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 4003	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 08:16:59 17 May 2013 77380 lb	
EMPTY WT-STENCIL	TARE 07:05:06 17 May 2013 28540 lb	
LOAD LIMIT	NET 22,473 Kg 49,440 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 167
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 5044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 06:43:08 17 May 2017 78800 lb	
EMPTY WT-STENCIL	TARE 07:43:38 17 May 2017 28790 lb	
LOAD LIMIT	NET 50,050 lb	
☐ **COUPLED**	22,750 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 168
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 6183	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 11:19:02 17 May 2013 75880 lb	
EMPTY WT-STENCIL	TARE 10:37:59 17 May 2013 26460 lb	
LOAD LIMIT	NET 49,420 lb	
☐ **COUPLED**	22,464 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 169

TRUCK/TRACTOR NO. 134	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 13:10:21 17 May 2013 78540 lb	
EMPTY WT-STENCIL	TARE 12:20:37 17 May 2013 33540 lb	
LOAD LIMIT	NET 20,455 Kg 45,000 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 170
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 302 5	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 13:51:56 17 May 2013 77660 lb	
EMPTY WT-STENCIL	TARE 12:48:21 17 May 2013 33480 lb	
LOAD LIMIT	NET 20,022 kg 44,180 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 171
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 302-5A	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 19,255 Kg	42,360 lb
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 172
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 4003	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	14:13:36 17 May 2013 77720 lb
EMPTY WT-STENCIL	TARE	13:12:52 17 May 2013 28320 lb
LOAD LIMIT	NET	22,455kg 49,400
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

173

TRUCK/TRACTOR NO. 9 900	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	07:32:19 20 May 2013 71000 lb
EMPTY WT-STENCIL	TARE	06:54:05 20 May 2013 31640 lb
LOAD LIMIT	NET	39,340
☐ COUPLED		17,381
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

174

TRUCK/TRACTOR NO. 3044 Beal	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 06:30:06 20 May 2013 77660 lb	
EMPTY WT-STENCIL	TARE 07:34:01 20 May 2013 25740 lb	
LOAD LIMIT	NET 51,920	
☐ COUPLED	22,327	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 175
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 6183	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 10:24:49 20 May 2013 79660 lb	
EMPTY WT-STENCIL	TARE 09:16:40 20 May 2013 26960 lb	
LOAD LIMIT	NET 24,127 Kg 53,000 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 176
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3041	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	11:54:46 20 May 2017 79180 lb
EMPTY WT-STENCIL	TARE	10:51:48 20 May 2017 29020 lb
LOAD LIMIT	NET 22,800 Kg	50,160 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

177

TRUCK/TRACTOR NO. 4400	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	13:01:12 20 May 2013 77720 lb
EMPTY WT-STENCIL	TARE	13:19:59 20 May 2013 31440 lb
LOAD LIMIT	NET 21,036Kg	46,280lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

178

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 14:42:47 20 May 2013 79640 lb	
EMPTY WT-STENCIL	TARE 17:22:24 20 May 2013 28480 lb	
LOAD LIMIT	NET 51,160 lb	
	23,255 Kg	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 179
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 302	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 14:54:43 20 May 2013 72940 lb	
EMPTY WT-STENCIL	TARE 14:10:06 20 May 2013 33180 lb	
LOAD LIMIT	NET = 39760 lb	
☐ COUPLED	18,073 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

180

TRUCK/TRACTOR NO. 4900	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 06:47:26 21 May 2013 75020 lb	
EMPTY WT-STENCIL	TARE 06:01:25 21 May 2013 31240 lb	
LOAD LIMIT	NET 43,780	
☐ COUPLED	19,900 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 181
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 08:55:48 21 May 2013 78160 lb	
EMPTY WT-STENCIL	TARE 06:06:39 21 May 2013 29060 lb	
LOAD LIMIT	NET 22,318 Kg 49,100 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

182

TRUCK/TRACTOR NO. 139	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 05:12:04 21 May 2013 77360 lb	
EMPTY WT-STENCIL	TARE 08:13:50 21 May 2013 33820 lb	
LOAD LIMIT	NET 19,791 Kg 43,540 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 183
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 6183	SCC ☐☐☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 08:17:59 21 May 2015 60501 lb	
EMPTY WT-STENCIL	TARE 08:32:47 21 May 2015 27080 lb	
LOAD LIMIT	NET 15,245 Kg 33,540 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 184
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3041	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 07:28:56 21 May 2013 77360 lb	
EMPTY WT-STENCIL	TARE 06:33:25 21 May 2013 29320 lb	
LOAD LIMIT	NET 21,826 Kg 48,040 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 185
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 362	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 10:18:05 21 May 2013 75920 lb	
EMPTY WT-STENCIL	TARE 09:07:11 31 May 2013 32880 lb	
LOAD LIMIT	NET 19,564 Kg 43,040 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

186

TRUCK/TRACTOR NO. 338	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 10:19:04 21 May 2017 78260 lb	
EMPTY WT-STENCIL	TARE 09:08:16 21 May 2017 30480 lb	
LOAD LIMIT	NET 21,715 Kg 47,720 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

187

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 14:19:13 21 May 2013 77260 lb	
EMPTY WT-STENCIL	TARE 13:36:23 21 May 2013 28860 lb	
LOAD LIMIT	NET 48,400 lb	
☐ COUPLED	22,000 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

188

TRUCK/TRACTOR NO.	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	14:30:56 21 May 2013 78990 lb
EMPTY WT-STENCIL	TARE	13:44:04 21 May 2013 33640 lb
LOAD LIMIT	NET	20,609 Kg 45,340 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

189

TRUCK/TRACTOR NO. 362	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	07:29:28 22 May 2017 78440 lb
EMPTY WT-STENCIL	TARE	06:50:08 22 May 2017 33290 lb
LOAD LIMIT	NET 20,527 Kg	45,160 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

190

TRUCK/TRACTOR NO. 9900	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 06:00:10 22 May 2017 78560 lb	
EMPTY WT-STENCIL	TARE 06:51:15 22 May 2017 31480 lb	
LOAD LIMIT	NET 46,880 lb	
☐ COUPLED	21,309 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

191

TRUCK/TRACTOR NO. 338	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 07:44:43 22 May 2013 76220 lb	
EMPTY WT-STENCIL	TARE 06:52:39 22 May 2013 30240 lb	
LOAD LIMIT	NET 21,809 Kg 47,980 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

192

TRUCK/TRACTOR NO. 139	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 08:16:18 22 May 2013 78400 lb	
EMPTY WT-STENCIL	TARE 06:53:56 22 May 2013 33960 lb	
LOAD LIMIT	NET 20,200 Kg 44,440 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

193

TRUCK/TRACTOR NO. 3044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

08:28:48 22 May 2013 79160 lb
07:53:34 22 May 2013 29020 lb

22,791 Kg

50,140 lb

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

194

TRUCK/TRACTOR NO. 6183	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	08:36:19 22 May 2013 63100 LB
EMPTY WT-STENCIL	TARE	07:35:47 22 May 2013 27040 LB
LOAD LIMIT	NET 16,391 Kg	36,060
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

195

TRUCK/TRACTOR NO. 3041	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	**GROSS** 09:34:04 22 May 2013 78520 lb	
EMPTY WT-STENCIL	**TARE** 08:46:52 22 May 2013 29140 lb	
LOAD LIMIT	**NET** 22,445 Kg 49,380	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 196
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 362	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 12:54:07 22 May 2013 79240 lb	
EMPTY WT-STENCIL	TARE 12:13:13 22 May 2013 32980 lb	
LOAD LIMIT	NET 21,027 46,260 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

197

TRUCK/TRACTOR NO. 9900	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	13:21:46 22 May 2013 79440 lb
EMPTY WT-STENCIL	TARE	12:54:37 22 May 2013 31220 lb
LOAD LIMIT	NET 21,918 Kg	48,220 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

198

TRUCK/TRACTOR NO. 338	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 14:00:55 22 May 2013 79430 lb	
EMPTY WT-STENCIL	TARE 12:46:49 22 May 2013 29990 lb	
LOAD LIMIT	NET 22,473 Kg = 49,440 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 199
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 139	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	**GROSS** 13:44:41 22 May 2013 77680 lb	
EMPTY WT-STENCIL	**TARE** 12:54:56 22 May 2013 33700 lb	
LOAD LIMIT	**NET** 19,991 Kg 43,960 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

200

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 14:17:08 22 May 2013 79300 lb	
EMPTY WT-STENCIL	TARE 13:28:49 22 May 2013 28680 lb	
LOAD LIMIT	NET 23,009 Kg 50,620 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 201

9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 6183	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 15:05:41 22 May 2013 79680 lb	
EMPTY WT-STENCIL	TARE 13:29:20 22 May 2013 26580 lb	
LOAD LIMIT	NET 24,000 kg 52,800 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

202

TRUCK/TRACTOR NO. 3041	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 07:32:29 23 May 2013 79760 lb	
EMPTY WT-STENCIL	TARE 06:47:20 23 May 2013 29280 lb	
LOAD LIMIT	NET 50,480 lb	
	22,945 Kg	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

203

TRUCK/TRACTOR NO. 338	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 07:41:54 23 May 2013 78260 lb	
EMPTY WT-STENCIL	TARE 06:44:08 23 May 2013 29800 lb	
LOAD LIMIT	NET 48,460 lb 22,018 Kg	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 204

TRUCK/TRACTOR NO. 9900	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 07:54:37 23 May 2013 78920 lb	
EMPTY WT-STENCIL	TARE 06:44:54 23 May 2013 31660 lb	
LOAD LIMIT	NET 21,482 Kg 47,260 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

205

TRUCK/TRACTOR NO. 362	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 06:06:41 23 May 2013 78180 lb	
EMPTY WT-STENCIL	TARE 06:45:40 23 May 2013 32700 lb	
LOAD LIMIT	NET 20,673 Kg 45,480 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

206

TRUCK/TRACTOR NO. 139	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 08:23:11 23 May 2013 76960 lb	
EMPTY WT-STENCIL	TARE 06:46:25 23 May 2013 34100 lb	
LOAD LIMIT	NET 19,482 Kg 42,860 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

207

TRUCK/TRACTOR NO. 3040	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 08:32:38 23 May 2013 78420 lb	
EMPTY WT-STENCIL	TARE 07:12:15 23 May 2013 28980 lb	
LOAD LIMIT	NET 22,473 Kg 49,440 lb.	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

208

TRUCK/TRACTOR NO. 6183	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 11:22:26 23 May 2013 78080 lb	
EMPTY WT-STENCIL	TARE 10:26:53 23 May 2013 27420 lb	
LOAD LIMIT	NET 22,255 49,9601b	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

209

TRUCK/TRACTOR NO. 2041	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 17:08:51 23 May 2013 78300 lb	
EMPTY WT-STENCIL	TARE 12:19:04 23 May 2013 29060 lb	
LOAD LIMIT	NET 22,382 Kg 49,240 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 210

TRUCK/TRACTOR NO.	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 14:20:21 23 May 2013 78940 lb	
EMPTY WT-STENCIL	TARE 13:59:38 23 May 2013 29480 lb	
LOAD LIMIT	NET 22,482 Kg 49,460 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

-11

TRUCK/TRACTOR NO. 362	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 13:58:38 23 May 2013 77840 Lb	
EMPTY WT-STENCIL	TARE 13:18:24 23 May 2013 33290 Lb	
LOAD LIMIT	NET 20,264 Kg 44,550 Lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

212

TRUCK/TRACTOR NO.	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 14:38:56 23 May 2013 79000 lb	
EMPTY WT-STENCIL	TARE 13:19:02 23 May 2013 31440 lb	
LOAD LIMIT	NET 21,618Kg 47,560lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET

9ND-NWSCC 4010/2 (Rev. 6-79)

215

TRUCK/TRACTOR NO. 179	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 14:21:57 23 May 2013 78780 lb	
EMPTY WT-STENCIL	TARE 13:21:15 23 May 2013 34140 lb	
LOAD LIMIT	NET 20,291 kg 44,640 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

9ND-NWSCC 4010/2 (Rev. 6-79)

214

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 08:11:21 24 May 2013 79260 lb	
EMPTY WT-STENCIL	TARE 07:28:36 24 May 2013 28860 lb	
LOAD LIMIT	NET 22,909 Kg 50,400 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 215

TRUCK/TRACTOR NO. 3041	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 06:21:38 24 May 2013 78920 lb	
EMPTY WT-STENCIL	TARE 07:29:15 24 May 2013 29000 lb	
LOAD LIMIT	NET 49,620 lb	
☐ **COUPLED**	22,555 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 216
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. C183	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 08:36:23 24 May 2013 76380 lb	
EMPTY WT-STENCIL	TARE 07:31:06 24 May 2013 27360 lb	
LOAD LIMIT	NET 49,020 lb	
☐ **COUPLED**	22,282 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 217

TRUCK/TRACTOR NO. 228	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 08:54:51 24 May 2013 77900 lb	
EMPTY WT-STENCIL	TARE 07:51:17 24 May 2013 30280 lb	
LOAD LIMIT	NET 31,645 Kg 47,620 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 218

TRUCK/TRACTOR NO. 262	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 09:07:14 24 May 2013 76700 lb	
EMPTY WT-STENCIL	TARE 07:53:17 24 May 2013 32980 lb	
LOAD LIMIT	NET 19,873Kg 43,720 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET

9ND-NWSCC 4010/2 (Rev. 6-79)

219

TRUCK/TRACTOR NO. 4700	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 09:24:23 24 May 2013 77020 lb	
EMPTY WT-STENCIL	TARE [illegible] 31,660 lb	
LOAD LIMIT	NET 20,845 Kg 45,960 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET

9ND-NWSCC 4010/2 (Rev. 6-79)

220

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 13:34:53 24 May 2013 78300 lb	
EMPTY WT-STENCIL	TARE 12:50:15 24 May 2013 28580 lb	
LOAD LIMIT	NET 22,600 Kg 49,720 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

221

TRUCK/TRACTOR NO. 3044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 06:40:01 28 May 2013 79990 lb	
EMPTY WT-STENCIL	TARE 07:59:47 28 May 2013 29020 lb	
LOAD LIMIT	NET 50,960 23,163 kg	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

222

TRUCK/TRACTOR NO. 3057	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	10:16:24 28 May 2013 79980 lb
EMPTY WT-STENCIL	TARE	09:37:59 28 May 2013 28700 lb
LOAD LIMIT	NET 23,309 lb	51,280
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

223

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 11:10:21 28 May 2013 78940 lb	
EMPTY WT-STENCIL	TARE 10:31:15 28 May 2013 28540 lb	
LOAD LIMIT	NET 22,864 Kg ~ 50,400 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 224

TRUCK/TRACTOR NO. 3044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 12:35:04 26 May 2013 78960 lb	
EMPTY WT-STENCIL	TARE 11:49:45 26 May 2013 28360 lb	
LOAD LIMIT	NET 22,773 Kg 50,600 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

225

TRUCK/TRACTOR NO. 3057	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 14:08:06 29 May 2013 77400 lb	
EMPTY WT-STENCIL	TARE 13:32:46 29 May 2013 28540 lb	
LOAD LIMIT	NET 22,209 Kg 48,860 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

2226

TRUCK/TRACTOR NO. 3043	SCC ☐☐☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	07:30:07 29 May 2013 77300 lb
EMPTY WT-STENCIL	TARE	06:52:16 29 May 2013 28740 lb
LOAD LIMIT	NET 22,300 Kg	49,060 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

227

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 08:07:43 29 May 2013 79640 lb	
EMPTY WT-STENCIL	TARE 06:53:25 29 May 2013 28980 lb	
LOAD LIMIT	NET 23,027 Kg 50,660 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

228

TRUCK/TRACTOR NO. 3059	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 07:52:33 29 May 2013 78480 Lb	
EMPTY WT-STENCIL	TARE 07:02:16 29 May 2013 28520 Lb	
LOAD LIMIT	NET 22,664 Kg 49,960	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

229

TRUCK/TRACTOR NO. 3043	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,773 Kg	50,100 lb
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

230

TRUCK/TRACTOR NO. 3057	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,373 kg 49,220 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

231

TRUCK/TRACTOR NO. 3rd	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,455 kg	49,4
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

737

TRUCK/TRACTOR NO. 3043	SCC ☐☐☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

233

TRUCK/TRACTOR NO. 3057	SCC ☐☐☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,600kg	49,720 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 234
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,107 Kg	49,640 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

225

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 32,672 kg	49,760 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

236

TRUCK/TRACTOR NO.	SCC ☐☐☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 9,500 kg	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

237 Pipe

TRUCK/TRACTOR NO. 2677	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 93,418Kg 51,620 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO.	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,227 Kg	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO.	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

240

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 21,890 Kg 48,160 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 241
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,318Kg	49,100
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		
CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

242

TRUCK/TRACTOR NO. 3057	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,182 Kg	48,000
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

213

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22.831 Kg 41240	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

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TRUCK/TRACTOR NO. 42	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 17,264 Kg 37,900 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 245

TRUCK/TRACTOR NO. 45	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 38,410	
☐ COUPLED	17,477 kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

2 of 6

TRUCK/TRACTOR NO. 09	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

208

TRUCK/TRACTOR NO. 3043	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,755Kg 50,066 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

249

TRUCK/TRACTOR NO. 48	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 17,564 Kg = 39,200 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 250
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 49	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 18,255 Kg 40,160 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

251

TRUCK/TRACTOR NO. 19	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 18,200 Kg 41,360 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

252

TRUCK/TRACTOR NO. 044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 51,260 lb	
☐ **COUPLED**	23,300 Kg	
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

253

TRUCK/TRACTOR NO. 2043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 13:12:07 03 Jun 2017 76540 lb	
EMPTY WT-STENCIL	TARE 12:40:46 03 Jun 2017 28500 lb	
LOAD LIMIT	NET 47,040 lb	
☐ COUPLED	21,336 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

254

TRUCK/TRACTOR NO. 2057	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 255

TRUCK/TRACTOR NO. 3043	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 21,845 Kg 48,060 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

256

TRUCK/TRACTOR NO. 42	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 16,272 Kg 27,126 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

257

TRUCK/TRACTOR NO. 17	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 18,236 Kg 40,120 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

256

TRUCK/TRACTOR NO. 30414	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	06145:49 04 Jun 201T 78000 lb
EMPTY WT-STENCIL	TARE	06147:58 04 Jun 201T 28960 lb
LOAD LIMIT	NET	22,092 Kg 49030 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

259

TRUCK/TRACTOR NO. 3057	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 22,855 Kg 50,260 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

260

TRUCK/TRACTOR NO. 49	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 18,209 Kg 40,000 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

261

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,045 kg 50,700 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

262

TRUCK/TRACTOR NO. 42	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 16,727 kg 4/1/2011	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 263

TRUCK/TRACTOR NO. 11	SCC ☐☐☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 19,136 Kg 42,100 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

364

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 27,027 Kg 59,666 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

265

TRUCK/TRACTOR NO. 2057	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 32,064 Kg 47,540 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 48	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 18,127 Kg	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

267

TRUCK/TRACTOR NO. 2013	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

12:59:39 04 Jun 2013 37220 lb
12:24:02 04 Jun 2013 24520 lb

48,700lb

22,136Kg

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 268

TRUCK/TRACTOR NO. 19	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 18,927 Kg 41,640 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

269

TRUCK/TRACTOR NO. 4J	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 17,873 kg = 39,320 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 270

TRUCK/TRACTOR NO. 5013	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	06:10:57 05 Jun 2013 79630 lb
EMPTY WT-STENCIL	TARE	09:03:59 05 Jun 2013 28900 lb
LOAD LIMIT	NET 23,100 Kg	50,730 lb
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,182 Kg	51,000 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

272

TRUCK/TRACTOR NO. 3057	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	09:45:06 05 Jun 2013 79520 lb
EMPTY WT-STENCIL	TARE	09:41:33 05 Jun 2013 29660 lb
LOAD LIMIT	NET 23,112 Kg	50,760 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 273

TRUCK/TRACTOR NO. 17	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 17,955 kg 41,700 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

274

TRUCK/TRACTOR NO. 42	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

775

TRUCK/TRACTOR NO. 48	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	07:08:08 05 Jun 2013 65200 lb
EMPTY WT-STENCIL	TARE	05:43:38 05 Jun 2013 27600 lb
LOAD LIMIT	NET 17,091 Kg	=37,600 lb
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

276

TRUCK/TRACTOR NO. 27, R 11	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 08:24:19 05 Jun 2013 56500 lb	
EMPTY WT-STENCIL	TARE 07:57:32 05 Jun 2013 27000 lb	
LOAD LIMIT	NET 17,955 kg 39,500 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

277

TRUCK/TRACTOR NO. 3043	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 09:37:04 05 Jun 2013 79360 lb	
EMPTY WT-STENCIL	TARE 08:59:45 05 Jun 2013 28520 lb	
LOAD LIMIT	NET 23,300 kg 51,260 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 278
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 11:31:00 05 Jun 2013 37940 lb	
EMPTY WT-STENCIL	TARE 09:30:24 05 Jun 2013 28720 lb	
LOAD LIMIT	NET 4,191 Kg 9,220 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 279
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 42	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 10:14:24 05 Jun 2017 66800 lb	
EMPTY WT-STENCIL	TARE 09:31:02 05 Jun 2017 26620 lb	
LOAD LIMIT	NET 18,264 Kg 40,180 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 280
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 19	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 10:01:12 05 Jun 2013 62180 lb	
EMPTY WT-STENCIL	TARE 09:31:46 05 Jun 2013 25780 lb	
LOAD LIMIT	NET 16,545 kg 36,400 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 281
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 48	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 10:06:09 05 Jun 2013 63920 lb	
EMPTY WT-STENCIL	TARE 09:34:39 05 Jun 2013 27400 lb	
LOAD LIMIT	NET 16,555 Kg 36,420 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

282

TRUCK/TRACTOR NO. 11	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	12:17:35 05 Jun 2013 67120 lb
EMPTY WT-STENCIL	TARE	11:05:20 05 Jun 2013 26960 lb
LOAD LIMIT	NET	18,700 Kg 40,260 lb
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

283

TRUCK/TRACTOR NO. 283	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 12:58:01 05 Jun 2013 79500 lb	
EMPTY WT-STENCIL	TARE 12:22:57 05 Jun 2013 28490 lb	
LOAD LIMIT	NET 23,236 Kg 51,210 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 284
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 48	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 12:46:42 05 Jun 2013 63100 lb	
EMPTY WT-STENCIL	TARE 12:27:50 05 Jun 2013 27200 lb	
LOAD LIMIT	NET 16,318 Kg 35,900 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

285

TRUCK/TRACTOR NO. 19	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 13:25:20 05 Jun 2013 67360 lb.	
EMPTY WT-STENCIL	TARE 12:32:59 05 Jun 2013 25640 lb.	
LOAD LIMIT	NET 41,720 lb 1,964 Kg	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 216

TRUCK/TRACTOR NO. 42	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 13:14:48 05 Jun 2013 59600 lb	
EMPTY WT-STENCIL	TARE 12:53:41 05 Jun 2013 26400 lb	
LOAD LIMIT	NET 15,162 Kg 33,400 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

287

TRUCK/TRACTOR NO. 3057	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 06:14:38 06 Jun 2013 72160 lb	
EMPTY WT-STENCIL	TARE 05:40:50 06 Jun 2013 28640 lb	
LOAD LIMIT	NET 22,509 Kg 49,520 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 288
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 304C	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 06:31:11 06 Jun 2013 79380 lb	
EMPTY WT-STENCIL	TARE 05:41:36 06 Jun 2013 28900 lb	
LOAD LIMIT	NET 23,173 Kg 50,980 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 289

TRUCK/TRACTOR NO. 3043	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 04:36:51 05 Jun 2017 79600 lb	
EMPTY WT-STENCIL	TARE 05:42:14 06 Jun 2017 28800 lb	
LOAD LIMIT	NET 23,091 kg 50,800 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 290

TRUCK/TRACTOR NO. 19	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 06:43:02 05 Jun 2017 63400 lb	
EMPTY WT-STENCIL	TARE 05:42:44 05 Jun 2017 26000 lb	
LOAD LIMIT	NET 17,000 Kg 37,400 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 291

TRUCK/TRACTOR NO. 42	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 06:51:34 06 Jun 2013 62580 lb	
EMPTY WT-STENCIL	TARE 05:43:15 06 Jun 2013 26760 lb	
LOAD LIMIT	NET 16,282 Kg → 35,820 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 292

TRUCK/TRACTOR NO. 40	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	07:17:21 05 Jun 2013 64740 lb
EMPTY WT-STENCIL	TARE	05:47:51 05 Jun 2013 26680 lb
LOAD LIMIT	NET	17,300 Kg 38,060 lb
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 293

TRUCK/TRACTOR NO. 28	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 07:27:06 06 Jun 2013 64560 lb	
EMPTY WT-STENCIL	TARE 05:44:35 06 Jun 2013 26020 lb	
LOAD LIMIT	NET 38,640 lb = 17,564 kg	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

294

TRUCK/TRACTOR NO. 3557	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	09:45:00 06 Jun 2013 76800 lb
EMPTY WT-STENCIL	TARE	09:06:49 06 Jun 2013 28440 lb
LOAD LIMIT	NET 22,891 kg	50,360 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

295

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 10:02:34 06 Jun 2013 79680 lb	
EMPTY WT-STENCIL	TARE 09:25:03 06 Jun 2013 28700 lb	
LOAD LIMIT	NET 23,173 Kg 50,980 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 296

TRUCK/TRACTOR NO. 2043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 10:10:03 06 Jun 2013 79580 lb	
EMPTY WT-STENCIL	TARE 09:25:42 06 Jun 2013 28680 lb	
LOAD LIMIT	NET 23,150 kg 50,900 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 297

TRUCK/TRACTOR NO. 42	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 10:15:54 06 Jun 2013 / 64680 lb	
EMPTY WT-STENCIL	TARE 09:46:15 06 Jun 2013 / 26560 lb	
LOAD LIMIT	NET 38,120 lb	
☐ COUPLED	17,327 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

792

TRUCK/TRACTOR NO. 19	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 11:02:46 06 Jun 2013 86100 lb	
EMPTY WT-STENCIL	TARE 10:37:17 06 Jun 2013 25860 lb	
LOAD LIMIT	NET 18,291 kg 40,240 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 299
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 40	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 11:06:42 06 Jun 2013 66060 lb	
EMPTY WT-STENCIL	TARE 10:37:51 06 Jun 2013 26440 lb	
LOAD LIMIT	NET 12,009 Kg 39,620 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

300

TRUCK/TRACTOR NO.	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	11:14:56 06 Jun 2013 62940 lb
EMPTY WT-STENCIL	TARE	10:39:06 06 Jun 2013 25800 lb
LOAD LIMIT	NET	16,282 kg 37,140 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

301

TRUCK/TRACTOR NO. 3057	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 13:13:59 06 Jun 2018 79320 lb	
EMPTY WT-STENCIL	TARE 12:33:16 06 Jun 2018 28260 lb	
LOAD LIMIT	NET 23,450 Kg 51,590 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 302
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 7044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 13:31:21 06 Jun 2013 79480 lb	
EMPTY WT-STENCIL	TARE 12:53:57 06 Jun 2013 28540 lb	
LOAD LIMIT	NET 23,155kg 50,940 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 303
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 13:36:22 06 Jun 2013 78700 lb	
EMPTY WT-STENCIL	TARE 13:57:07 06 Jun 2013 28400 lb	
LOAD LIMIT	NET 22,864 Kg 50,300 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 304
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 42	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	13:40:00 06 Jun 2013 63860 lb
EMPTY WT-STENCIL	TARE	13:01:25 06 Jun 2013 26420 lb
LOAD LIMIT	NET 17,027 Kg	37,461 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 305
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 06:05:08 07 Jun 2013 79940 lb	
EMPTY WT-STENCIL	TARE 05:35:05 07 Jun 2013 28720 lb	
LOAD LIMIT	NET 23,282 kg 51,220 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 306
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3057	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS 05:14:06 07 Jun 2013 79420 lb	
EMPTY WT-STENCIL	TARE 05:35:51 07 Jun 2013 29600 lb	
LOAD LIMIT	NET 23,100 Kg 50,820 lb	
☐ **COUPLED**		
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET 307
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 06:24:57 07 Jun 2013 78360 lb	
EMPTY WT-STENCIL	TARE 05:36:31 07 Jun 2013 28830 lb	
LOAD LIMIT	NET 22,473 Kg 49,440 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

308

TRUCK/TRACTOR NO. 19	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 18,264 Kg 40,180 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 309

TRUCK/TRACTOR NO. 48	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 07:00:29 07 Jun 2017 63000 lb	
EMPTY WT-STENCIL	TARE 06:35:51 07 Jun 2013 27920 lb	
LOAD LIMIT	NET 15,945 kg 35,080 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 310
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 42	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 07:06:42 07 Jun 2013 65840 lb	
EMPTY WT-STENCIL	TARE 06:37:17 07 Jun 2013 26720 lb	
LOAD LIMIT	NET 11,752 Kg 39,120 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

311

TRUCK/TRACTOR NO. 49	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	07:03:15 07 Jun 2017 67500 lb
EMPTY WT-STENCIL	TARE	06:44:09 07 Jun 2017 25680 lb
LOAD LIMIT	NET 18,555 kg	40,820 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

312

TRUCK/TRACTOR NO. 40	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 09:20:47 07 Jun 2013 67060 lb	
EMPTY WT-STENCIL	TARE 08:37:24 07 Jun 2013 26660 lb	
LOAD LIMIT	NET 40,400 lb 18,373 kg	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 313
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. //	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 09:08:00 07 Jun 2017 66130 lb	
EMPTY WT-STENCIL	TARE 08:38:11 07 Jun 2017 26900 lb	
LOAD LIMIT	NET 17,227 Kg 39,220 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 3 of 1

TRUCK/TRACTOR NO. 3043	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 04:30:26 07 Jun 2013 79360 lb	
EMPTY WT-STENCIL	TARE 09:52:24 07 Jun 2013 28540 lb	
LOAD LIMIT	NET 23,100 kg 50,820 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 315
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 3057	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 09:41:38 07 Jun 2013 78490 lb	
EMPTY WT-STENCIL	TARE 09:02:44 07 Jun 2013 28420 lb	
LOAD LIMIT	NET 22,941 Kg 50,470 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

716

TRUCK/TRACTOR NO. 7044	**SCC** ☐ ☐ ☐	**PASSENGER** ☐ ON ☐ OFF
TRAILER NO.	**IDENTIFICATION**	**DEBRIS** ☐ YES ☐ NO
RR CAR NO.	GROSS	09:58:31 07 Jun 2013 79980 lb
EMPTY WT-STENCIL	TARE	54,340 lb
LOAD LIMIT	NET	25,640 KGL
☐ **COUPLED**	27,327 kg	51,320 lb
☐ **UNCOUPLED**		
CONTRACT NO.	**CONTRACTOR**	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	**WEIGHMASTER**	**VERIFIED BY**

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

317

TRUCK/TRACTOR NO. 19	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 10:02:50 07 Jun 2013 63040 lb	
EMPTY WT-STENCIL	TARE 09:51:35 07 Jun 2013 25920 lb	
LOAD LIMIT	NET 16,272 kg = 37,120 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 718
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 48	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 10:07:47 07 Jun 2013 63800 lb	
EMPTY WT-STENCIL	TARE 09:42:16 07 Jun 2013 27820 lb	
LOAD LIMIT	NET 16,354 Kg 35,980 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 319
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 42	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 10:14:19 07 Jun 2013 65740 lb	
EMPTY WT-STENCIL	TARE 09:54:05 07 Jun 2013 26540 lb	
LOAD LIMIT	NET 17,818 kg 39,200 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

320

TRUCK/TRACTOR NO. 49	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	10:56:46 07 Jun 2013 65720 lb
EMPTY WT-STENCIL	TARE	10:32:13 07 Jun 2013 26490 lb
LOAD LIMIT	NET 17,836 Kg	39,240 lb
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 321
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO.	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 12417:12 07 Jun 2017 67920 lb	
EMPTY WT-STENCIL	TARE 11451:14 07 Jun 2017 26700 lb	
LOAD LIMIT	NET 18,736 kg = 41,220 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

322

TRUCK/TRACTOR NO. 40	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 12:20:57 07 Jun 2013 65580 lb	
EMPTY WT-STENCIL	TARE 11:51:42 07 Jun 2013 26380 lb	
LOAD LIMIT	NET 17,818K; = 39,200 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

323

TRUCK/TRACTOR NO. 3093	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	12:52:50 07 Jun 2013 79500 lb
EMPTY WT-STENCIL	TARE	13:16:00 07 Jun 2013 28480 lb
LOAD LIMIT	NET	51,020 lb
☐ COUPLED	23,191 Kg	
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 324
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 2057	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 13:09:22 07 Jun 2013 79600 lb	
EMPTY WT-STENCIL	TARE 12:26:48 07 Jun 2013 28220 lb	
LOAD LIMIT	NET 23,355 Kg 51,380 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 725
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 19	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 13:18:19 07 Jun 2013 65420 lb	
EMPTY WT-STENCIL	TARE 12:42:39 07 Jun 2013 25720 lb	
LOAD LIMIT	NET +18,045 Kg = 39,700 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79) 326

TRUCK/TRACTOR NO. 3044	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 78,620 lb 13:56:08 07 Jun 2013 28960 lb	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 23,636 Kg 52,000lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 327
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 48	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 13:20:23 07 Jun 2013 67960 lb	
EMPTY WT-STENCIL	TARE 13:53:23 07 Jun 2013 27640 lb	
LOAD LIMIT	NET 18,336 Kg 40,340 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

328

TRUCK/TRACTOR NO. 42	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 13:41:50 07 Jun 2013 65960 lb	
EMPTY WT-STENCIL	TARE 13:14:39 07 Jun 2013 26400 lb	
LOAD LIMIT	NET 17,982 kg = 39,560 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

329

TRUCK/TRACTOR NO. 47	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS 07:42:09 10 Jun 2013 67960 lb	
EMPTY WT-STENCIL	TARE 06:41:29 10 Jun 2013 27630 lb	
LOAD LIMIT	NET 18,291 Kg 40,240 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

WEIGHT TICKET 330
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 42	SCC ☐ ☐ ☐	PASSENGER ☐ ON ☐ OFF
TRAILER NO.	IDENTIFICATION	DEBRIS ☐ YES ☐ NO
RR CAR NO.	GROSS	
EMPTY WT-STENCIL	TARE	
LOAD LIMIT	NET 15,509 Kg 34,120 lb	
☐ COUPLED		
☐ UNCOUPLED		
CONTRACT NO.	CONTRACTOR	
ITEM NO.		
PARTIAL DEL. NO.		

CONTRACTOR REP. *(if applicable)*	WEIGHMASTER	VERIFIED BY

APPENDIX G-1.2

LANDFILL WEIGHT TICKETS – PHASE 1

2692647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456325**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3024/BEELMAN	4/22/13 12:48 pm	4/22/13 1:06 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,720.00LBS Scale In
TARE 27,460.00LBS Scale Out
NET 51,260.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.63	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Roger Mesnick 3024-220

CUSTOMER COPY

TRUCK 1

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456337**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2077	4/22/13 1:47 pm	4/22/13 1:47 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,240.00LBS Manual In
TARE 26,240.00LBS Scale Out
NET 53,000.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
26.50	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 2

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456323**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2016/BEELMAN	4/22/13 12:46 pm	4/22/13 1:00 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,140.00LBS Scale In
TARE 25,800.00LBS Scale Out
NET 53,340.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
26.67	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

CUSTOMER COPY

SIGNATURE: J. Schultz Schjeft 2016 103
344476

TRUCK 3

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456321**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3045/BEELMAN	4/22/13 12:32 pm	4/22/13 12:55 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,680.00LBS Scale In
TARE 27,640.00LBS Scale Out
NET 51,040.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.52	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

CUSTOMER COPY

Truck 4

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

Nilsson
344473
6300/BEELMAN

SITE	CELL	OPERATOR	TICKET #
N2		63017	**456332**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
6300/BEELMAN	4/22/13 1:09 pm	4/22/13 1:24 pm

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 80,020.00LBS Scale In
TARE 27,980.00LBS Scale Out
NET 52,040.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
26.02	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 5

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

FOUKDW

344477

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**456335**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3066/BEELMAN / 248	4/22/13 1:14 pm	4/22/13 1:34 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 66,440.00LBS Scale In
TARE 27,220.00LBS Scale Out
NET 39,220.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.61	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:______________________________

CUSTOMER COPY

Truck 6

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456361**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037/BEELMAN	4/22/13 2:21 pm	4/22/13 2:35 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,900.00LBS Scale In
TARE 27,520.00LBS Scale Out
NET 52,380.00 LBS

344470
3037/834
Ashcan

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
26.19	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:

CUSTOMER COPY

Truck #7

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456508**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3045/BEELMAN	4/23/13 12:34 pm	4/23/13 12:49 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,160.00LBS Scale In
TARE 27,640.00LBS Scale Out
NET 51,520.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.76	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 8

ATE ROAD 64
IN 47598
047

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456457**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3024/BEELMAN	4/23/13 9:36 am	4/23/13 9:49 am

J01001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

LOA

CON

ITEM

PART

CON

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,440.00LBS Scale In
TARE 27,520.00LBS Scale Out
NET 50,920.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.46	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

TRUCK 9

ST LANDFILL
EAST STATE ROAD 64
NSLOW, IN 47598
8127892647

ED TOURNIE
FOUEOW
TRK 3066
TRL 248

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

353096

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40084	**456614**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3066	4/24/13 8:22 am	4/24/13 8:41 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 72,600.00LBS Scale In
TARE 27,380.00LBS Scale Out
NET 45,220.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
22.61	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 10

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456466**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037/BEELMAN	4/23/13 10:00 am	4/23/13 10:19 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,460.00LBS Scale In
TARE 27,520.00LBS Scale Out
NET 51,940.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.97	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 11

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456463**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
6300/BEELMAN	4/23/13 10:03 am	4/23/13 10:15 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,420.00LBS Scale In
TARE 27,720.00LBS Scale Out
NET 50,700.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.35	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 12

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456477**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2077/BEELMAN	4/23/13 10:50 am	4/23/13 11:02 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 73,500.00LBS Scale In
TARE 26,240.00LBS Scale Out
NET 47,260.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
23.63	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 13

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456478**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2016/BEELMAN	4/23/13 10:51 am	4/23/13 11:08 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,580.00LBS Scale In
TARE 25,980.00LBS Scale Out
NET 51,600.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.80	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 14

ANDFILL
TATE ROAD 64
IN 47598
347

01001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

353084

SITE	CELL	OPERATOR	TICKET #
N2		63017	**456521**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3024 BEELMAN	4/23/13 1:24 pm	4/23/13 1:38 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,620.00LBS Scale In
TARE 27,400.00LBS Scale Out
NET 50,220.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.11	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Roger Mesnard 3024-220

CUSTOMER COPY

Truck 15

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**456523**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
6300 BEELMAN	4/23/13 1:39 pm	4/23/13 1:51 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,620.00 LBS Scale In
TARE 27,440.00 LBS Scale Out
NET 52,180.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
26.09	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Tax Total

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE

Truck 16

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456533**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037/BEELMAN	4/23/13 2:02 pm	4/23/13 2:17 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,460.00LBS Scale In
TARE 27,400.00LBS Scale Out
NET 51,060.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.53	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 17

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456549**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2077/BEELMAN	4/23/13 2:41 pm	4/23/13 2:59 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,860.00LBS Scale In
TARE 26,120.00LBS Scale Out
NET 52,740.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
26.37	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 18

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456553**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2016/BEELMAN	4/23/13 2:53 pm	4/23/13 3:07 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,420.00LBS Scale In
TARE 25,860.00LBS Scale Out
NET 50,560.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.28	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE: J. Schultz Schuff 2011.102 353097

CUSTOMER COPY

Truck 19

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456586**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3045/BEELMAN	4/23/13 4:47 pm	4/23/13 5:02 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,820.00LBS Scale In
TARE 27,540.00LBS Scale Out
NET 50,280.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.14	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

CUSTOMER COPY

SIGNATURE:_____

TRUCK 20

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**456623**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2016/BEELMAN	4/24/13 9:08 am	4/24/13 9:21 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,200.00 LBS Scale In
TARE 26,080.00 LBS Scale Out
NET 52,120.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
26.06	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

FACILITY COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456627**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2077/BEELMAN	4/24/13 9:20 am	4/24/13 9:35 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,240.00LBS Scale In
TARE 26,340.00LBS Scale Out
NET 50,900.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.45	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 22

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456639**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037/BEELMAN	4/24/13 10:16 am	4/24/13 10:30 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,400.00LBS Scale In
TARE 27,640.00LBS Scale Out
NET 51,760.00 LBS

456639
3037/234
Ashley

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.88	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 23

LANDFILL
STATE ROAD 64
, IN 47598
2647

)1001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

35306

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456631**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3024/BEELMAN	4/24/13 9:34 am	4/24/13 9:50 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,160.00LBS Scale In
TARE 27,560.00LBS Scale Out
NET 49,600.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.80	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Roger Massarich 3024-220

Total
Paid
Change
Check#
Recpt #

CUSTOMER COPY

TRUCK 24

3726 EAST STATE ROAD 64 Load# 333160
WINSLOW, IN 47598
8127892647

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456638**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3027/BEELMAN	4/24/13 10:03 am	4/24/13 10:27 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 75,960.00LBS Scale In
TARE 27,920.00LBS Scale Out
NET 48,040.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.02	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 25

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456769**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2077/BEELMAN	4/25/13 9:03 am	4/25/13 9:16 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,120.00LBS Scale In
TARE 26,280.00LBS Scale Out
NET 51,840.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.92	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

Truck 26

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456821**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3027/BEELMAN	4/25/13 11:33 am	4/25/13 11:56 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,780.00LBS Manual In
TARE 27,660.00LBS Scale Out
NET 51,120.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.56	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste

Total
Paid
Change
Check#
Recpt #

CUSTOMER COPY

SIGNATURE:_____

Truck 27

ST LANDFILL
AST STATE ROAD 64
LOW, IN 47598
27892647

ED TOURNIK
FOUND IN
TRK 3066
TRL 248

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

353 111

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456781**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3066/BEELMAN	4/25/13 9:29 am	4/25/13 9:57 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,860.00LBS Scale In
TARE 27,380.00LBS Scale Out
NET 49,480.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.74	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

TRUCK 28

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456807**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3024/BEELMAN	4/25/13 10:59 am	4/25/13 11:17 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,460.00LBS Scale In
TARE 27,580.00LBS Scale Out
NET 51,880.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.94	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

CUSTOMER COPY

SIGNATURE:_____

TRUCK 29

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456802**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037/BEELMAN	4/25/13 10:46 am	4/25/13 11:02 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,920.00LBS Scale In
TARE 27,620.00LBS Scale Out
NET 50,300.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.15	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 30

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456806**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3045/BEELMAN	4/25/13 10:51 am	4/25/13 11:09 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,680.00LBS Scale In
TARE 27,720.00LBS Scale Out
NET 50,960.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.48	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 31

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456835**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2077/BEELMAN	4/25/13 12:42 pm	4/25/13 12:56 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,660.00LBS Scale In
TARE 26,140.00LBS Scale Out
NET 53,520.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
26.76	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 32

STATE ROAD 64
SLOW, IN 47598
8127892647

ED FOURNIE
FOREMAN
TRK 3066
TRL 248

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

353111

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**456847**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3066 BEELMAN	4/25/13 1:28 pm	4/25/13 1:45 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,240.00LBS Scale In
TARE 27,200.00LBS Scale Out
NET 51,040.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.52	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 33

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456863**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3045/BEELMAN	4/25/13 2:24 pm	4/25/13 2:40 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,360.00LBS Scale In
TARE 27,500.00LBS Scale Out
NET 51,860.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.93	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 34

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456875**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037/BEELMAN	4/25/13 2:51 pm	4/25/13 3:04 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,620.00LBS Scale In
TARE 27,420.00LBS Scale Out
NET 51,200.00 LBS

353108
3037/234
Ashrun

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.60	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

CUSTOMER COPY

SIGNATURE:_____

Truck 35

LANDFILL
STATE ROAD 64
N, IN 47598
2647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456873**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3024/BEELMAN	4/25/13 2:47 pm	4/25/13 3:00 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 73,620.00LBS Scale In
TARE 27,380.00LBS Scale Out
NET 46,240.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
23.12	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 36

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**456897**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3027 BEELMAN	4/25/13 4:07 pm	4/25/13 4:25 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,520.00LBS Scale In
TARE 27,420.00LBS Scale Out
NET 51,100.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.55	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 37

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 38822

Job # LD#362 354
CRAFIC

Manifest # [illegible]

Scale Ticket

Gross
10:16AM 24APR13 79080 lb

Tare
10:37AM 24APR13 28520 lb

LD# 362 354
CRA RIC
3043 38822
Richard Crawford

Truck 38

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 3057-38802

Job # _____

Manifest # 004369425 FLE

Scale Ticket

Gross
10:52AM 26APR13 78460 lb

Tare
11:22AM 26APR13 28220 lb

[redacted]

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**456982**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3066/BEELMAN	4/26/13 10:37 am	4/26/13 10:53 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,360.00 LBS Scale In
TARE 27,320.00 LBS Scale Out
NET 51,040.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
25.52	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**456988**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3027/BEELMAN	4/26/13 10:48 am	4/26/13 11:11 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,980.00LBS Scale In
TARE 27,760.00LBS Scale Out
NET 49,220.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.61	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 41

BLA Apr. 30. 2013 1:25PM Beelman Truck Co

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

No. 5575 P. 4

SITE	CELL	OPERATOR	TICKET #
N2		40081	456972

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037/BEELMAN	4/26/13 10:14 am	4/26/13 10:30 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,400.00LBS Scale In
TARE 27,580.00LBS Scale Out
NET 51,820.00 LBS

J53114
3037/234
Ashron

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.91	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Ron Ashbaugh
ASHRON

CUSTOMER COPY

TRUCK 42

BLAPr. 30. 2013 1:25PM Beelman Truck Co

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

No. 5575 P. 2/1.5

SITE	CELL	OPERATOR	TICKET #
N2		40081	456984

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3024/BEELMAN	4/26/13 10:41 am	4/26/13 11:00 am

001001
NSA CRANE/SULLIVAN INTNL GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,800.00LBS Scale In
TARE 27,460.00LBS Scale Out
NET 51,340.00LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.67	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: ✓ Roger Meeriarich 3024-220

CUSTOMER COPY

Ticket 43

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**456990**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2077/BEELMAN	4/26/13 10:50 am	4/26/13 11:14 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,760.00 LBS Scale In
TARE 25,940.00 LBS Scale Out
NET 52,820.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
26.41	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# BS21-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457012**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3045/BEELMAN	4/26/13 12:13 pm	4/26/13 12:25 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,020.00LBS Scale In
TARE 27,480.00LBS Scale Out
NET 51,540.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.77	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 45

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 38823

Job # _____

Manifest # 004369429 FLE

Scale Ticket

Gross

01:18PM 26APR13 78260 lb

Tare

01:47PM 26APR13 28960 lb

[redacted]

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 3021-60

Job # _____

Manifest # 004 369427 FLE

Scale Ticket

Gross
01:44PM 26APR13 78820 lb

Tare
02:06PM 26APR13 27840 lb

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 3044-38812

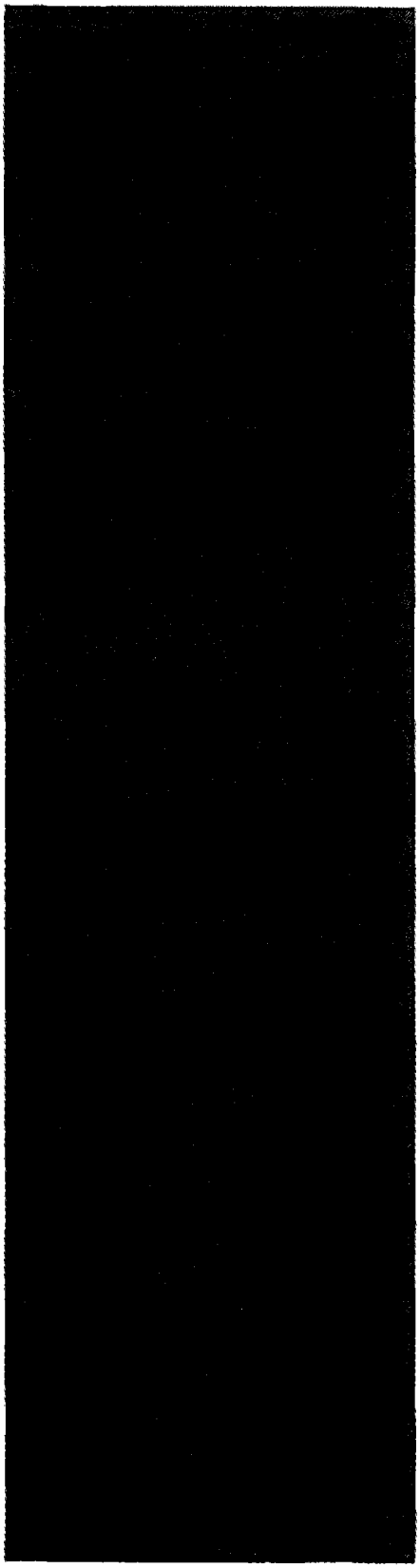
Job # _____

Manifest # 004369428 FLE

Scale Ticket

Gross
03:33PM 26APR13 79380 lb

Tare
04:01PM 26APR13 28660 lb



HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 38822

Job # _____

Manifest # 004369432 FLE

Scale Ticket

Gross
03:53PM 26APR13 79380 lb

Tare
04:17PM 26APR13 28340 lb

[redacted]

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**457070**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3045/BEELMAN	4/26/13 3:51 pm	4/26/13 4:06 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,320.00 LBS Scale In
TARE 27,280.00 LBS Scale Out
NET 52,040.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
26.02	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

Total
Paid
Change
Check#
Recpt #

FACILITY COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457404**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037/BEELMAN	4/30/13 11:44 am	4/30/13 11:56 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,800.00LBS Scale In
TARE 27,600.00LBS Scale Out
NET 51,200.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.60	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 51

STATE ROAD 64
W, IN 47598
892647

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457403**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3024/BEELMAN	4/30/13 11:37 am	4/30/13 11:51 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,480.00LBS Scale In
TARE 27,580.00LBS Scale Out
NET 50,900.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.45	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Roger Messanick 3024-220

CUSTOMER COPY

TRUCK 52

, LANDFILL
.ST STATE ROAD 64
.SLOW, IN 47598
3127892647

363334

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457477**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3024/BEELMAN	4/30/13 3:13 pm	4/30/13 3:28 pm

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,060.00LBS Scale In
TARE 27,400.00LBS Scale Out
NET 49,660.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.83	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE: Roger Mesarich 3024-220

CUSTOMER COPY

TRUCK 53

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457479**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037/BEELMAN	4/30/13 3:23 pm	4/30/13 3:35 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,900.00LBS Scale In
TARE 27,480.00LBS Scale Out
NET 52,420.00 LBS

363335
3037/234
Alvin

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
26.21	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

Truck 54

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40084	**457550**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 2016	5/1/13 9:28 am	5/1/13 9:39 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,700.00LBS Scale In
TARE 22,920.00LBS Scale Out
NET 55,780.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
27.89	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

CUSTOMER COPY

SIGNATURE: J Schultz Schultz
2014 102 303339

TRUCK 55

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40084	**457544**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3027	5/1/13 9:00 am	5/1/13 9:14 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,020.00LBS Scale In
TARE 27,560.00LBS Scale Out
NET 50,460.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.23	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 56

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40084	**457547**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037 BEELMAN	5/1/13 9:10 am	5/1/13 9:21 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 80,020.00LBS Scale In
TARE 27,600.00LBS Scale Out
NET 52,420.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
26.21	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 57

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40084	**457551**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3024	5/1/13 9:30 am	5/1/13 9:43 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 75,420.00LBS Scale In
TARE 27,520.00LBS Scale Out
NET 47,900.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
23.95	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Roger Messerich

CUSTOMER COPY

Truck 58

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**457596**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3043	5/1/13 12:09 pm	5/1/13 12:24 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,200.00LBS Scale In
TARE 28,540.00LBS Scale Out
NET 50,660.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.33	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 59

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**457602**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3027	5/1/13 12:25 pm	5/1/13 12:41 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,860.00LBS Scale In
TARE 27,300.00LBS Scale Out
NET 50,560.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.28	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 60

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**457606**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037 BEELMAN	5/1/13 12:36 pm	5/1/13 12:49 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,520.00LBS Scale In
TARE 27,460.00LBS Scale Out
NET 51,060.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.53	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 61

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40084	**457613**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 2016	5/1/13 1:07 pm	5/1/13 1:19 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 74,340.00LBS Scale In
TARE 25,880.00LBS Scale Out
NET 48,460.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.23	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

CUSTOMER COPY

SIGNATURE: JSchultz SchJeff
2016 102 36.3339

Truck 62

ROAD 64
47598
047

363337

SITE	CELL	OPERATOR	TICKET #
N2		40084	**457616**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3024	5/1/13 1:13 pm	5/1/13 1:28 pm

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,420.00LBS Scale In
TARE 27,440.00LBS Scale Out
NET 48,980.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.49	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 63

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**457656**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043 BEELMAN	5/1/13 3:51 pm	5/1/13 4:01 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,020.00LBS Scale In
TARE 28,680.00LBS Scale Out
NET 48,340.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.17	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

LOT# 363 341
CREW
3043 38522

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Richard Crawford

CUSTOMER COPY

Truck 64

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**457663**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3037	5/1/13 4:04 pm	5/1/13 4:15 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 75,920.00LBS Scale In
TARE 27,340.00LBS Scale Out
NET 48,580.00 LBS

363340
3037/234

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.29	TN	C-Soil - EXT	YD	0.00	MT	100.00			Mstr Com

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

Truck 65

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

Trk 3027
Trl 314
Load (3)

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**457667**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3027	5/1/13 4:17 pm	5/1/13 4:38 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,940.00LBS Scale In
TARE 27,800.00LBS Scale Out
NET 50,140.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.07	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 66

...TE ROAD 64
...N 47598

SITE	CELL	OPERATOR	TICKET #
N2		63017	**457694**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3024	5/2/13 8:54 am	5/2/13 9:06 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 74,640.00LBS Scale In
TARE 27,600.00LBS Scale Out
NET 47,040.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
23.52	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 67

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**457691**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 2016	5/2/13 8:46 am	5/2/13 8:56 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,100.00LBS Scale In
TARE 26,000.00LBS Scale Out
NET 52,100.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
26.05	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: J Schultz Schjef1
2510 102 36344

CUSTOMER COPY

Truck 68

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

SITE	CELL	OPERATOR	TICKET #
N2		63017	**457696**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043 BEELMAN	5/2/13 8:58 am	5/2/13 9:10 am

001001
NSA CRANE/SULLIVAN INT'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,440.00LBS Scale In
TARE 28,700.00LBS Scale Out
NET 47,740.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
23.87	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 69

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457706**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3027/BEELMAN	5/2/13 9:30 am	5/2/13 9:43 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,100.00LBS Scale In
TARE 27,640.00LBS Scale Out
NET 50,460.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.23	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 70

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457703**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037/BEELMAN	5/2/13 9:22 am	5/2/13 9:35 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,480.00LBS Scale In
TARE 27,580.00LBS Scale Out
NET 49,900.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.95	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

TRUCK 71

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457747**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2016/BEELMAN	5/2/13 12:08 pm	5/2/13 12:19 pm

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,360.00LBS Scale In
TARE 25,820.00LBS Scale Out
NET 50,540.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.27	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

Truck 72

WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457751**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3024/BEELMAN	5/2/13 12:21 pm	5/2/13 12:32 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 68,700.00LBS Scale In
TARE 27,520.00LBS Scale Out
NET 41,180.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.59	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

CUSTOMER COPY

SIGNATURE:_____

Truck 73

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457756**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	5/2/13 12:30 pm	5/2/13 12:39 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,860.00LBS Scale In
TARE 28,540.00LBS Scale Out
NET 49,320.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.66	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 74

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457764**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037/BEELMAN	5/2/13 12:47 pm	5/2/13 12:58 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,260.00LBS Scale In
TARE 27,460.00LBS Scale Out
NET 51,800.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.90	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 75

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

ttew.l Load# 563346
Load (2) Trk 3027
Tr1.314

SITE	CELL	OPERATOR	TICKET #
N2		63017	**457770**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3027 BEELMAN	5/2/13 12:59 pm	5/2/13 1:16 pm

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,540.00LBS Scale In
TARE 27,520.00LBS Scale Out
NET 49,020.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.51	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 76

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457809**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2016/BEELMAN	5/2/13 3:31 pm	5/2/13 3:57 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,180.00LBS Scale In
TARE 25,680.00LBS Scale Out
NET 52,500.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
26.25	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: JSchultz SchJeF2
2016 102 363344

CUSTOMER COPY

TRUCK 77

/E ROAD 64
47598

343342

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457813**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3024/BEELMAN	5/2/13 3:57 pm	5/2/13 4:11 pm

CRANE/SULLIVAN INTN'L GROUP
B521-203-45 00
50 WOMBLE ROAD SUITE 100
AN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,420.00LBS Scale In
TARE 27,340.00LBS Scale Out
NET 50,080.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.04	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Ryan Mesnard 3024-220

CUSTOMER COPY

TRUCK 78

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457811**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	5/2/13 3:53 pm	5/2/13 4:04 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,240.00LBS Scale In
TARE 28,380.00LBS Scale Out
NET 49,860.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.93	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

LP# 383345
CRANE
3043 - 38822

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Richard Wampler

CUSTOMER COPY

TRUCK 79

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457818**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3037/BEELMAN	5/2/13 4:07 pm	5/2/13 4:20 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,120.00LBS Scale In
TARE 27,320.00LBS Scale Out
NET 49,800.00 LBS

363743
3037/234
13 Yards

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.90	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

Truck 80

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457857**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	5/3/13 8:57 am	5/3/13 9:07 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,820.00LBS Scale In
TARE 28,600.00LBS Scale Out
NET 49,220.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.61	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 81

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457865**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2016/BEELMAN	5/3/13 9:07 am	5/3/13 9:19 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,380.00LBS Scale In
TARE 26,060.00LBS Scale Out
NET 51,320.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.66	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE: T Schultz Sheriff
2016 102 363351

CUSTOMER COPY

Truck 82

T LANDFILL
STATE ROAD 64
IN 47598
17

E/SULLIVAN INTN'L GROUP
203-45 00
IBLE ROAD SUITE 100
), CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457869**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3024/BEELMAN	5/3/13 9:20 am	5/3/13 9:33 am

T: CRANE/ABF13034
L:

GROSS 75,600.00LBS Scale In
TARE 27,560.00LBS Scale Out
NET 48,040.00 LBS

	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
	TN	C-Soil - EXT	YD	0.00	MT	100.00			

for using Blackfoot Landfill.

y that this load does not contain any unauthorized hazardous waste.

JRE: Roger Mesnarich

Total
Paid
Change
Check#
Recpt #

CUSTOMER COPY

TRUCK 83

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457871**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	
3037/BEELMAN	5/3/13 9:26 am	9

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,840.00LBS Scale In
TARE 27,620.00LBS Scale Out
NET 50,220.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.11	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER CC

TRUCK 84

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**457875**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	
3027	5/3/13 9:38 am	5 9

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,860.00LBS Scale In
TARE 27,820.00LBS Scale Out
NET 49,040.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.52	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER CC

Truck 85

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**457918**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	5/3/13 12:19 pm	5/3/13 12:30 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,860.00 LBS Scale In
TARE 24,960.00 LBS Scale Out
NET 51,900.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
25.95	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**457928**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
2016/BEELMAN	5/3/13 12:37 pm	5/3/13 12:49 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,380.00 LBS Scale In
TARE 25,900.00 LBS Scale Out
NET 52,480.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
26.24	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

Total
Paid
Change
Check#
Recpt #

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		63017	**457935**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEEOMAN 3024	5/3/13 1:14 pm	5/3/13 1:25 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,440.00 LBS Scale In
TARE 27,400.00 LBS Scale Out
NET 49,040.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
24.52	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		63017	**457936**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3037	5/3/13 1:16 pm	5/3/13 1:30 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,680.00 LBS Scale In
TARE 27,460.00 LBS Scale Out
NET 50,220.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
25.11	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		63017	**457949**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3027	5/3/13 1:38 pm	5/3/13 2:14 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,260.00 LBS Scale In
TARE 27,580.00 LBS Scale Out
NET 49,680.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
24.84	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

000006 - ADS/ROLL-OFF
12900 WARRICK CO LINE RD
EVANSVILLE, IN 47725

INVOICE
INBOUND

Work Order: 450868			Route #: 5614
SITE	CELL	OPERATOR	TICKET #
N2		40081	**457978**

TRUCK	CONTAINER	LICENSE
VEO6018		

REFERENCE	IN	OUT
50081-1 CRANE NAVAL BASE	5/3/13 4:19 pm	5/3/13 4:31 pm

CONTRACT: CRANE ABF13034 CSOIL
BOL:

GROSS 45,720.00 LBS Manual In
TARE 35,620.00 LBS Scale Out
NET 10,100.00

Inter Company

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
5.05	TN	C-Soil	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

Total
Paid
Change
Check#
Recpt #

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

000006 - ADS/ROLL-OFF
12900 WARRICK CO LINE RD
EVANSVILLE, IN 47725

INVOICE
INBOUND

Work Order: 450867			Route #: 5619
SITE	CELL	OPERATOR	TICKET #
N2		40081	**457976**

TRUCK	CONTAINER	LICENSE
VEO6014		

REFERENCE	IN	OUT
50081-1 CRANE NAVAL BASE	5/3/13 4:18 pm	5/3/13 4:27 pm

CONTRACT: CRANE ABF13034 CSOIL
BOL:

GROSS 44,220.00 LBS Manual In
TARE 34,440.00 LBS Scale Out
NET 9,780.00

Inter Company

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
4.89	TN	C-Soil	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

Total
Paid
Change
Check#
Recpt #

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40084	**458068**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3043	5/6/13 9:04 am	5/6/13 9:33 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,520.00LBS Scale In
TARE 29,160.00LBS Scale Out
NET 48,360.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.18	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**458115**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3057	5/6/13 11:19 am	5/6/13 11:38 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,540.00LBS Scale In
TARE 28,580.00LBS Scale Out
NET 49,960.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.98	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 94

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**458125**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 6183	5/6/13 11:47 am	5/6/13 12:09 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 65,940.00LBS Scale In
TARE 26,900.00LBS Scale Out
NET 39,040.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.52	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: MBelm

Total
Paid
Change
Check#
Recpt #

CUSTOMER COPY

TRUCK 95

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**458122**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044 BEELMAN	5/6/13 11:40 am	5/6/13 12:02 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,620.00LBS Scale In
TARE 28,760.00LBS Scale Out
NET 48,860.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.43	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 96

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**458133**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3020	5/6/13 11:55 am	5/6/13 12:35 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,680.00LBS Scale In
TARE 28,980.00LBS Scale Out
NET 49,700.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.85	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 97

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40084	**458147**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3043	5/6/13 12:45 pm	5/6/13 1:01 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,980.00 LBS Scale In
TARE 28,800.00 LBS Scale Out
NET 50,180.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
25.09	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

Total
Paid
Change
Check#
Recpt #

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		63017	**458196**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3057	5/6/13 3:19 pm	5/6/13 3:40 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,340.00 LBS Scale In
TARE 28,340.00 LBS Scale Out
NET 51,000.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
25.50	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

FACILITY COPY

SIGNATURE:_____

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

3044
3912

5 0 0 7 4 5

SITE	CELL	OPERATOR	TICKET #
N2		63017	**458210**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3044	5/6/13 4:21 pm	5/6/13 4:40 pm

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,800.00LBS Scale In
TARE 28,560.00LBS Scale Out
NET 49,240.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.62	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 100

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**458205**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 6183	5/6/13 4:00 pm	5/6/13 4:11 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 65,960.00LBS Scale In
TARE 26,660.00LBS Scale Out
NET 39,300.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.65	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check #
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

TRUCK 101

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

KANSAS
330942
3020 / 3981

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**458216**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3020	5/6/13 4:22 pm	5/6/13 4:49 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,340.00LBS Scale In
TARE 28,560.00LBS Scale Out
NET 49,780.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.89	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

Truck 102

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**458470**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
6183/BEELMAN	5/8/13 10:41 am	5/8/13 11:18 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 75,740.00LBS Manual In
TARE 27,820.00LBS Manual Out
NET 47,920.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
23.96	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 103

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

3044

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**458475**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	5/8/13 11:27 am	5/8/13 11:46 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,640.00LBS Manual In
TARE 28,680.00LBS Manual Out
NET 50,960.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.48	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 104

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** 58

Job # _____

Manifest # 0042442 FLE

Scale Ticket

Gross

04:33PM 08MAY13 73500 lb

Tare

05:31PM 08MAY13 26660 lb

B044 38812

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 241/

Job # _____

Manifest # _____

Scale Ticket

Gross

Tare

Truck 106

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 2010/25811

Job # _____

Manifest # 00436946 FLE

Scale Ticket

Gross
10:24AM 09MAY13 78840 lb

Tare
11:36AM 09MAY13

Form Approved, OMB No. 2050-0039

2 Page 1 of	3 Emergency Response Phone	4. Manifest Tracking Number
1	812-851-4073	00436946 FLE

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

47522

3020 / 38810 — U.S. EPA ID Number

U.S. EPA ID Number

Environmental Stores
6 N. Roachdale In. — U.S. EPA ID Number

Number	10 Containers No	10 Containers Type	11 Total Quantity	12 Unit Wt./Vol.	13. Waste Codes
Non-hazardous	001	DT	2,700	LB	NA

EB-116 Exempt Soil

Annual Cert 21853-1

e contents of th
for transport
ns of the atta h
(a) (if I am a large quantity ge

S — Month Day Year: 5 7 13

Signature — Month Day Year

Signature — Month Day Year

☐ Type ☐ Residue P ☐ Full Rejection

Manifest Reference Numbe

DESIGNATED FACILITY

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2	3.	4

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

Printed/Typed Name — Signature — Month Day Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

TRANSPORTER'S COPY

3044 38812

Heritage Environmental Services, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 3044/38812

Job # ____________________

Manifest # 014926940 FLE

Scale Ticket

Gross
10:51AM 09MAY13 78480 lb

Tare
11:19AM 09MAY13 28740 lb

1

Truck 108

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 56

Job # _____

Manifest # _____

Scale Ticket

Gross

Tare

Truck 109

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

KA2005
392662

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

3020
53310

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**458686**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3020/BEELMAN	5/9/13 3:01 pm	5/9/13 3:14 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,180.00LBS Scale In
TARE 28,380.00LBS Scale Out
NET 50,800.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.40	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 110

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

30114
38812

SITE	CELL	OPERATOR	TICKET #
N2		40081	**458699**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	5/9/13 3:44 pm	5/9/13 3:58 pm

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,920.00LBS Scale In
TARE 28,320.00LBS Scale Out
NET 49,600.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.80	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check #
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

TRUCK 111

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**458746**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3020/BEELMAN	5/10/13 9:04 am	5/10/13 9:15 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,520.00LBS Scale In
TARE 28,960.00LBS Scale Out
NET 50,560.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.28	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 112

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

MCPR ic
3041 33B12

SITE	CELL	OPERATOR	TICKET #
N2		40081	**458761**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	5/10/13 9:52 am	5/10/13 10:04 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,580.00LBS Scale In
TARE 28,800.00LBS Scale Out
NET 48,780.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.39	TN	C-Soil EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:______________________________

CUSTOMER COPY

Truck 113

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 68

Job # _____

Manifest # CDY369444FLE

Scale Ticket

Gross
11:23AM 10MAY13 75560 lb

Tare
12:15PM 10MAY13 26880

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 3020/38810

Job # _____

Manifest # EHO 004369441FLE

Scale Ticket

Gross	02:09PM 10MAY13	79600 1
Tare	02:33PM 10MAY13	28860

116

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 38812

Job # _____

Manifest # CK43694440FLE

Scale Ticket

Gross
02:57PM 10MAY13 78760 1

Tare
03:16PM 10MAY13 28780 :

INCOMING
3044 38812

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date__/__/__**Unit #** 3582

Job # _____

Manifest # 004369 FCF

117

Scale Ticket

Gross

10:32AM 13MAY13 79220 lb

Tare

11:04AM 13MAY13 28540

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US 104

Job # _____

Manifest # 000300616WS

Scale Ticket

Gross 11:26AM 13MAY13 76740 lb

Tare 12:27AM 13MAY13 31540 lb

198

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

119

Date __/__/__ **Unit #** 302

Job # _____

Manifest # 000530094GNS

Scale Ticket

Gross 10:53AM 13MAY13 74940

Tare 11:30AM 13MAY13 33760

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** US129

Job # _____

Manifest # 000330015WFE

120

Scale Ticket

Gross

11:23AM 13MAY15 76700 lb

Tare

11:54AM 13MAY15 33700 lb

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

121

Date__/__/__**Unit #** US30-5

Job # _____

Manifest # 015153007240JS

Scale Ticket

Gross

11:37AM 13MAY13 76520 lb

Tare

11:59AM 13MAY13 33000 lb

122

Form Approved. OMB No. 2050-0039

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 58

Job # _____

Manifest # _____

Scale Ticket

Gross 77160 lb

Tare 26660 lb

2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
1	[illegible]	004369438 FLE

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

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

10. Containers No	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
2	T	27	KG	NA

VERIFIED BY

WEIGHMASTER

CONTRACTOR REP. *(if applicable)*

CONTRACT NO.

ITEM NO.

PARTIAL DEL. NO.

classified, packaged

al and national governmental regulations. If export shipment and I am the Primary

sent

am a small quantity generator) is true.

Month Day Year

Port of entry/exit:

Date leaving U.S.:

Month Day Year

Month Day Year

Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

DESIGNATED FACILITY

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name Signature Month Day Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

TRANSPORTER'S COPY

30443881?

543207

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 3552

Job # _____

Manifest # _____

Scale Ticket

Gross 79440 lb

Tare 28880 lb

(2)

123

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** _____

Job # _____

Manifest # _____

Scale Ticket

Gross 76540 lb

Tare 31440 lb

2050-0039

U.S. Bulk Transport IC., Inc.

LOADING

TIME OUT DATE

PLEASE SIGN FULL NAME - NO INITIALS

UNLOADING

TIME OUT DATE

CEIVED ABOVE MATERIAL IN GOOD ORDER

SIGNEE NAME

PLEASE SIGN FULL NAME - NO INITIALS

DISPATCH NUMBER

SHIPPER NUMBER 000530098

SHIPPER WEIGHT-LBS

G

T

N

CONSIGNEE NUMBER

CONSIGNEE WEIGHT-LBS

G 76,540

T 31,440

N 45,100

ACCOUNTING

odes

f this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, according to applicable nternational and national governmental regulations. If export shipment and I am the Primary ached EPA Acknowledgment of Consent.
large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature Month 5 Day 13 Year 13

TRANSPORTER INT'L

☐ Export from U S Port of entry/exit: _____
Date leaving U.S.: _____

Signature Month 5 Day 13 Year 13

Signature Month Day Year

☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

DESIGNATED FACILITY

18b. Alternate Facility (or Generato U S EPA ID Number

Facility's Phone

18c Signature of Alte nate Facil ty or Generat Month Day Year

19 Hazardous Waste Report Management Method Codes (i.e , codes for hazardous waste treatment, disposal, and recycling systems

1.	2.	3.	4

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

Printed/Typed Name Signature Month Day Year

EPA Form 8700-22 (Rev 3-05) Previous edit ons are obsolete

TRANSPORTER'S COPY

RITAGE
VIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date__/__/__ **Unit #** _____

Job # _____

Manifest # _____

Scale Ticket

Gross

75540 lb

Tare

34860 lb

Form Approved. OMB No 2050-0039

2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
		000530099WAS

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

NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-5000
GEN: 121853

U.S. EPA ID Number

IND987367513

U.S. EPA ID Number

U.S. EPA ID Number

ID Number,	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		DT	14		

ontents of this consignment are fully and accurately described abo e by the proper shipping name and are classified, packaged, transport according to applicable international and national governmental regulations If export shipment and I am the Primary of the attached EPA Acknowledgment of Consent
(if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Signature — Month 5 Day 13 Year 13

☐ Export from U.S. Port of entry/exit: _____
Date leaving U.S.: _____

Signature — Month Day Year

Signature — Month Day Year

☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

20. Designated Facility Owner or Operato Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

GE 2120

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

TRANSPORTER'S COPY

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** 6015

Job # _____

Manifest # 1663216006GA

Scale Ticket

Gross

5:14PM 13MAY13 76600 lb

Tare

05:40PM 13MAY13 33580 lb

Truck 126

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___ **Unit #** 0302-5

Job # _____

Manifest # 000530101471

Scale Ticket

Gross

05:22PM 13MAY13 77500 lb

Tare

05:42PM 13MAY13 33900 lb

Truck 127

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

128

Date ___/___/___ **Unit #** _____

Job # _____

Manifest # 0[illegible]

Scale Ticket

Gross 76840 lb

Tare 28700 lb

Truck 128

Form Approved. OMB No. 2050-0039

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___ Unit # ________

Job # ________

Manifest # ________

Scale Ticket

Gross

Tare

2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
1		004369430 FLE

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

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

9a. HM		10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X		001				N/A
	3.					
	4.					

14. Specia[l Handling Instructions]

15. GENE[RATOR'S] ...ment are fully and accurately described above by the proper shipping name, and are marked ... applicable international and national governmental regulations. If export shipment an[d] ... Exporte[r] ... Acknowledgment of Consent.
I certify ... generator) or (b) (if I am a small quantity generator) is true.

Generator's/O[fferor's Printed/Typed Name]	Signature	Month	Day	Year

16. Internation[al Shipments] ...m U.S. Port of entry/exit:
Transporter si[gnature] ... Date leaving U.S.

17. Transporter ... Receipt of Materials

Transporter 1 Printed/Typed Name	Signature	Month	Day	Year

Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

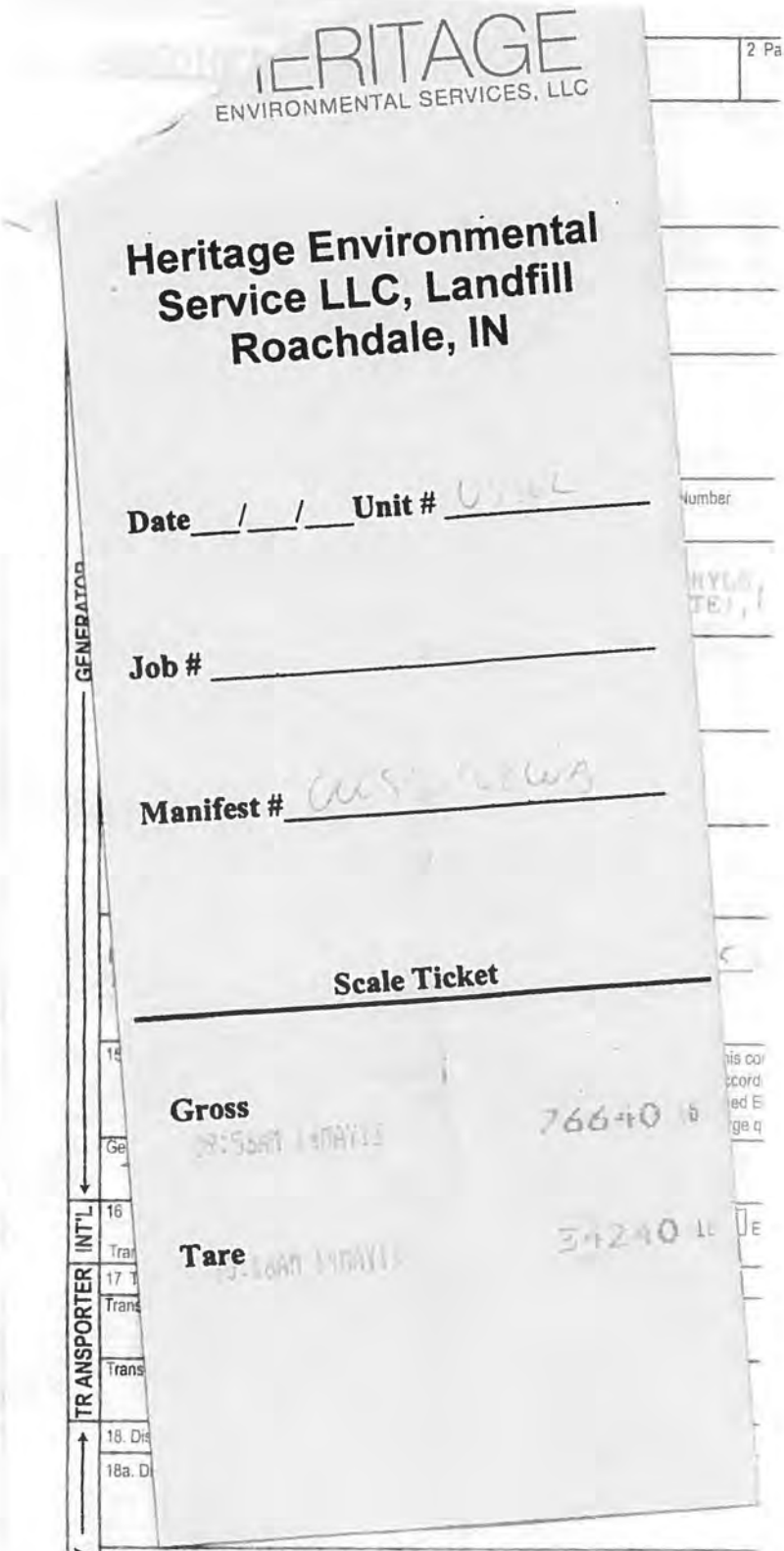
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycl[ing systems])

1.	2.	3.	4.

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

Printed/Typed Name	Signature	Month	Day	Year

GENERATOR / INT'L / TRANSPORTER / DESIGNATED FACILITY



HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___ **Unit #** _____

Job # _____

Manifest # _____

Scale Ticket

Gross 76640 lb

Tare 34240 lb

GENERATOR

TR ANSPORTER INT'L

DESIGNATED FACILITY

2 Pa

Number

16

17

18. Dis

18a. D

18b. Alternate Facility (or Generator)

Facility's Phone:

18c. Signature of Alternate Facility (or Generator)

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatm

1. H1

2.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered

Printed/Typed Name

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

Truck 130

131

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US302-5

Job # _____

Manifest # 000530103WM

Scale Ticket

Gross

10:07AM 14MAY13 74320

Tare

10:25AM 14MAY13 33580

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US104

Job # _____

Manifest # OCKS30104WA

Scale Ticket

Gross

10:20AM 14MAY13 78420 lb

Tare

10:44AM 14MAY13 31160 lb

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US139

Job # _____

Manifest # 0A5106SWA

Scale Ticket

Gross

79620 lb

Tare

33200 lb

Truck 133

load # 393211
MorWil1

HERITAGE ENVIRONMENTAL SERVICES, LLC

load # 393211
MorWil1

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date _/_/_ **Unit #** 4003 / 2006

Job # _____

Manifest # 004369434FLE

TRK 4003
TLR 38806

Scale Ticket

Gross 77520 lb

Tare 28520 lb

load # 393211
MorWil1

Form Approved. OMB No. 2050-0039

1	2 Page 1 of 1	3 Emergency Response Phone	4. Manifest Tracking Number
			004369434 FLE

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

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

ss, ID Number.	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	001	CT	0012	Pg	NM

the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, on for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary terms of the attached EPA Acknowledgment of Consent.

2.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature — Month 1 | Day 14 | Year 13

☐ Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____

Signature — Month | Day | Year

Signature — Month | Day | Year

☐ Type ☐ Residue ☐ Partial Rejection

Manifest Reference Number

DESIGNATED FACILITY

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2	3.	4

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

Printed/Typed Name — Signature — Month | Day | Year

TRUCK 134

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

TRANSPORTER'S COPY

TRK 4003 TLR 38806

135

Form Approved. OMB No. 2050-0039

2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
1	812-851-4173	004369449 FLE

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

47522

U.S. EPA ID Number

ILR000135236

U.S. EPA ID Number

U.S. EPA ID Number

IND980502891

s, ID Number	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	001	DT	22173	KG	NA

Date 5/24/13

the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, on for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary erms of the attached EPA Acknowledgment of Consent.
127(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature — Month 5 Day 24 Year 13

☐ Export from U S — Port of entry/exit: — Date leaving U.S.:

Signature — Month — Day — Year

Signature — Month — Day — Year

☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

DESIGNATED FACI

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Ye

19. Hazardous Waste Report Management Method Codes (i e , codes for hazardous waste treatment disposal, and recyc ing systems)

1.	2.	3.	4.

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

Printed/Typed Name — Signature — Month — Day — Ye

1 truck 135

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 611/58

Job # _____

Manifest # 004369449 FLE

Scale Ticket

Gross

12:25PM 24MAY13 — 25440 lb

Tare

12:55PM 24MAY13 — 26640 lb

3044 38812

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** 3044/3812

Job # _____

Manifest # ~~OCC~~ 00426473DILE

Scale Ticket

Gross

03:02PM 14MAY13 78880 lb

Tare

03:27PM 14MAY13 28660 lb

Truck 136

137

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US 302

Job # _____

Manifest # 000530107WAS

Scale Ticket

Gross
04:01PM 14MAY13 77100

Tare
04:19PM 14MAY13 34040

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date__/__/__**Unit #** US325

Job # _____

Manifest # AA5301666WS

Scale Ticket

Gross

03:36PM LANDFILL 76880 lb

Tare

03:57PM LANDFILL 33420 lb

Truck 138

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US104

Job # _____

Manifest # 800530108

Scale Ticket

Gross	04:10PM 14MAY13	79060 lb
Tare	04:33PM 14MAY13	31340

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 05139

Job # _____

Manifest # 000530109WAS

Scale Ticket

Gross
05:20PM 14MAY13 77920 1

Tare
[redacted]
05:42PM 14MAY13 32960

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US 302

Job # _____

Manifest # QQ530110CWS

Scale Ticket

Gross	09:56AM 15MAY13	75260
Tare	10:20AM 15MAY13	34860

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US302-5

Job # _____

Manifest # [illegible]

Scale Ticket

Gross
10:01AM 15MAY13 73220 lb

Tare
10:22AM 15MAY13 33160 lb

Truck 14

MCDRic 388244
3044 38812

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date__/__/__ **Unit #** 2... / 2...

Job # __________

Manifest # 004363431 FLE

Scale Ticket

Gross
10:41AM 15MAY13 77780 lb

Tare
11:12AM 15MAY13 28660 lb

①

Truck 143

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 05164

Job # _____

Manifest # 010530112JJK

Scale Ticket

Gross
10:27AM 15MAY13 77660 lb

Tare
10:53AM 15MAY13 31140 lb

s, ID Number,	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
PHENOL, WASTE, TOX		T	21,415	P	

5 1 3 WI

ntents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, ransport according to applicable international and national governmental regulations. If export shipment and I am the Primary f the attached EPA Acknowledgment of Consent.
(if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature Month Day Year

☐ Export from U.S. Port of entry/exit:
Date leaving U.S.:

Signature Month Day Year 5 15 13

Signature Month Day Year

☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

Month Day Year

waste treatment, disposal and recycling systems)

3. 4.

rials covered by the manifest except as noted in Item 18a

Printed/Typed Name Signature Month Day Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. TRANSPORTER'S COPY

144

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** 0389

Job # _____

Manifest # 000530 42605

Scale Ticket

Gross

10:39AM 15MAY13 77240 lb

Tare

11:08AM 15MAY13 33280 lb

Truck 145

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 4003/88806

Job # _____

Manifest # CIC4 369450 FLE

Scale Ticket

Gross
10:59AM 15MAY13 77820 :

Tare
11:26AM 15MAY13 28440 :

147

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 58

Job # _____

Manifest # ~~0664~~ 00436940RFLE

Scale Ticket

Gross
11:21AM 15MAY13 68260

Tare
11:39AM 15MAY13 26660

14A

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US302-5

Job # _____

Manifest # CC053014WAS

Scale Ticket

Gross
03:15PM 15MAY13 77040

Tare 32980lb

Q05-15-B

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US302

Job # _____

Manifest # 0005301158WAS

Scale Ticket

Gross
03:13PM 15MAY13 76620

Tare
[redacted] [redacted]

03:59PM 15MAY13 34560

3044
38812

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 3812

Job # _____

Manifest # 004304450 FLE

Scale Ticket

Gross

04:14PM LSDAY13 78820 lb

Tare

04:38PM LSDAY13 28460 lb

Truck 150

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US164

Job # _____

Manifest # 000530116WAJ

Scale Ticket

Gross
04:19PM 15MAY13 77580 1

Tare
04:42PM 15MAY13 32040 1

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___ Unit # [illegible]

Job # ____________________

Manifest # [illegible]

Scale Ticket

Gross
04:34PM 15MAY13 77300 lb

Tare
04:58PM 15MAY13 33080 lb

Truck 152

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 38806

Job # _____

Manifest # 004 369453WBS

Scale Ticket

Gross
04:52PM 15MAY13 78180 lb

Tare
05:20PM 15MAY13 28240 l

154

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 58

Job # _____

Manifest # 004369955FLE

Scale Ticket

Gross

05:05PM 15MAY13 77160 lb

Tare

05:25PM 15MAY13 26460 l

Form Approved OMB No 2050-0039

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___ Unit # US 302

Job # ______________________

Manifest # 00053011BWAS

Scale Ticket

Gross

09:57AM 16MAY13

Tare

10:21AM 16MAY13 34240

2. Page 1 of | 3. Emergency Response Phone | 4. Manifest Tracking Number 00053011BWAS

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

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	No.	Type			

...curately described above by the proper shipping name, and are classified, packaged ...al and national governmental regulations. If export shipment and I am the Primary ...onsent
... I am a small quantity generator) is true

Month Day Year

...nature Month Day Year

...re Month Day Year

DESIGNATED FACILITY

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

2... Designated Facility Owner or Operator C...
P...ted/Typed Name Month Day Year

EPA Form 8700-22 Rev. 3-05 Previous edit...

...NSPORTER'S COPY

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___Unit # [illegible]

Job # ____________________

Manifest # [illegible]

Scale Ticket

Gross

09:59AM 16MAY15 76720 lb

Tare

10:22AM 16MAY15 33960 lb

[illegible] 156

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 05139

Job # _____

Manifest # 005612000

Scale Ticket

Gross 10:12AM 16MAY13 78980 LB

Tare 10:44AM 16MAY13 34000 LB

LS1 Truck

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** SA

Job # _____

Manifest # 004369451 FLE

Scale Ticket

Gross 67100 lb

Tare 26680 lb

#40234
41.94

Form Approved. OMB No. 2050-0039

2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
1	812 [illegible]	004369451 FLE

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

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

ID Number	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	001	DT	1 [illegible]	Kg	NH

158

tents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, nsport according to applicable international and national governmental regulations. If export shipment and I am the Primary the attached EPA Acknowledgment of Consent.
I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature Month Day Year

☐ Export from U.S. Port of entry/exit
Date leaving U.S.:

Signature Month Day Year

Signature Month Day Year

Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

DESIGNATED FACILITY

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment d s sal and re ycling systems)

1.	2.	3.	4.

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

Printed/Typed Name Signature Month Day Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

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159

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** CS 104

Job # _____

Manifest # CCCS 30121 WAS

Scale Ticket

Gross
10:33AM 16MAY13 77060 1

Tare
11:12AM 16MAY13 31780

Form Approved. OMB No. 2050-0039

2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
1	812-591-[illegible]	004369454 FLE

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

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	No.	Type			

14. Special Handling Instructions and Additional Information

15. GENERATOR'S/OFFICER'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name | Signature | Month | Day | Year

16. International Shipments: Import to U.S. | Export from U.S. | Port of entry/exit | Date leaving U.S.

Transporter 1 Printed/Typed Name | Signature | Month | Day | Year

17. Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

18. Discrepancy

18a. Discrepancy: ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b. Alternate Facility (or Generator) | U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name | Signature | Month | Day | Year

GENERATOR | INT'L | TRANSPORTER | DESIGNATED FACILITY

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HERITAGE ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** [illegible]

Job # _____

Manifest # [illegible]

Scale Ticket

Gross 76540 lb

Tare 28500 lb

MCDKC
3044-38812

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** 3881

Job # _____

Manifest # 00 4 2 1 4 5 6 0 1 5

Scale Ticket

Gross

79000 lb

Tare

28660 lb

Truck 161

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date__/__/__ **Unit #** US36L

Job # _____

Manifest # 000[illegible]2345

Scale Ticket

Gross

10:02AM 17MAY13 78740 lb

Tare

10:21AM 17MAY13 33930 lb

1 of 2

Form Approved. OMB No. 2050-0039

2. Page 1 of 1	3. Emergency Response Phone (800)535-1121	4. Manifest Tracking Number 000530122WAS

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
400 HIGHWAY 361
CRANE, IN 47522-5000
ID 121953

U.S. EPA ID Number PAD987347515

U.S. EPA ID Number

U.S. EPA ID Number

s. ID Number	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
PHENOLIC WASTE, LOS		DT	7 336	P	

Price $ [illegible]

e contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary ms of the attached EPA Acknowledgment of Consent.
7(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Signature [signature] Month D Y

☐ Export from U.S. Port of entry/exit:
Date leaving U.S.:

Signature [signature] Month Day Year

Signature Month Day Year

☐ Type Re ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b. Alternate Facility (or Generator) EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. H141 2 3 4

20. Designated Facility Owner or Operator: Certification of receipt of

DESIGNATED FACILITY

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___ **Unit #** US 445

Job # _____

Manifest # 000000000

Scale Ticket

Gross

10:05AM 17MAY13 77300 lb

Tare

10:24AM 17MAY13 33560 lb

Truck 103

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date__/__/__ Unit # ________

Job # ________________

Manifest # ________________

Scale Ticket

Gross
10:16AM 17MAY13 77680 lb

Tare
10:39AM 17MAY13 33740 lb

Truck 164

165

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US 104

Job # _____

Manifest # CCCS 30125 CWAS

Scale Ticket

Gross	10:48AM 17MAY13	78200
Tare	11:12AM 17MAY13	31560 1

Form Approved. OMB No. 2050-0039

2 Page 1 of	3 Emergency Response Phone	4. Manifest Tracking Number
1	812-851-4173	004369448 FLE

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

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

9a HM	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	001	DT		Kg	H
3.					
4.					

14. Special Handling Instructions and Additional Information

15 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name, and are classified, packed, marked and labeled/placarded, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name | Signature | Month | Day | Year

16 International Shipments: Import to U.S. | Export from U.S. | Port of entry/exit

Transporter signature (for exports only)

17 Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name | Signature | Month | Day | Year

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

18 Discrepancy

18a Discrepancy Indication Space: ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number

Facility's Phone

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19 Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name | Signature | Month | Day | Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

TRANSPORTER'S COPY

GENERATOR | INT'L | TRANSPORTER | DESIGNATED FACILITY

HERITAGE ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 102/2016

Job #

Manifest # 004369448FLE

Scale Ticket

Gross 77860 lb

Tare 28360 lb

167

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 38812

Job # _____

Manifest # CC4369459FLE

Scale Ticket

Gross
11:35AM 17MAY13 78660

Tare
12:11PM 17MAY13 28600

Form Approved. OMB No. 2050-00

HERITAGE ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 58

Job # _____

Manifest # 004369458FLE

Scale Ticket

Gross 25780 lb

Tare 26320 lb

2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
	812-541-4173	004369458 FLE

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

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

Class ID Number	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	001	DT		Kg	N/A

at the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged ition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary e terms of the attached EPA Acknowledgment of Consent.
62.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature — Month — Day — Year

☐ Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____

Signature — Month — Day — Year

Signature — Month — Day — Year

☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

DESIGNATED FACILITY

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name — Signature — Month — Day — Year

EPA Form 8700-22 (Rev. 3-05). Previous editions are obsolete.

169

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US139

Job # _____

Manifest # OCO530126CWAS

Scale Ticket

Gross
03:34PM 17MAY13 78600 lb

Tare
04:05PM 17MAY13 33740

170

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US 3025

Job # _____

Manifest # 000530127WAS

Scale Ticket

Gross 04:32PM 17MAY13	77580	1
Tare 04:46PM 17MAY13	33460	1

171

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US302.5

Job # _____

Manifest # 010530129WAS

Scale Ticket

Gross
06:10PM 17MAY13 75580 lb

Tare
06:20PM 17MAY13 33380 l

172

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 38806

Job # _____

Manifest # 004369468FLE

Scale Ticket

Gross
04:43PM 17MAY13 77660 lb

Tare
05:01PM 17MAY13 28380 lb

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 05164

Job # _____

Manifest # CK053019GOAS

Scale Ticket

Gross

10:03AM 20MAY13 70920 lb

Tare

10:29AM 20MAY13 31500 lb

Form Approved. OMB No. 2050-0039

4. Manifest Tracking Number 000571

Emergency Response Phone

(if different than mailing address)

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

9. ID Number	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
PHENYL WASTE, NOS	1		17,50		

VIOC 5/20/13

SRL: HERITAGE

The contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.

I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature — Month 5 Day 20 Year 13

☐ Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____

Signature — Month 5 Day 20 Year 13

Signature — Month __ Day __ Year __

☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

DESIGNATED FACILITY

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name Signature Month Day Year

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TRANSPORTER 5 COPY

McDRiC 407680
3044_38812

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** 3044_38812

Job # _____

Manifest # 000436946FLE

Scale Ticket

Gross

11:06AM 20MAY13 77760 lb

Tare

11:34AM 20MAY13 28580 lb

0

Truck 174

HERITAGE
ENVIRONMENTAL SERVICES, LLC

175

B No. 2050-0039

FLE

Heritage Environmental Service LLC, Landfill Roachdale, IN

PASSENGER ☐ ON ☐ OFF

DEBRIS ☐ YES ☐ NO

10:34:49 20 May 2013 79660 lb

09:15:40 20 May 2013 26580 lb

53,08016

.127 Kg

Date __/__/__ **Unit #** 58

Codes

Job # _____

Manifest # 000 00430 MRCE

WEIGHMASTER | VERIFIED BY

Scale Ticket

Gross 79540 lb

Tare 26520 lb

#407682
6183-58
4494
Bell 1416
Emek

ents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, sport according to applicable international and national governmental regulations. If export shipment and I am the Primary e attached EPA Acknowledgment of Consent.
am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature | Month | Day | Year

☐ Export from U.S. Port of entry/exit: _____
Date leaving U.S.:

Signature | Month | Day | Year

Signature | Month | Day | Year

Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

DESIGNATED FACILITY

18b. Alternate Facility (or Generator) | U S EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

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

Printed/Typed Name | Signature | Month | Day | Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

TRANSPORTER'S COPY

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HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 38805

Job # _____

Manifest # ~~CGG~~ 004394621FLE

Scale Ticket

Gross

03:08PM 20MAY13 79120 1

Tare

03:32PM 20MAY13 28880

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 05164

Job # _____

Manifest # 000526130045

Scale Ticket

Gross

03:28PM 20MAY15 77640 LB

Tare

05:50PM 20MAY15 31420 LB

☐ U.S. Bulk Transport IC., Inc.

2050-0039

R LOADING

TIME IN | TIME OUT | DATE

BY _____ PLEASE SIGN FULL NAME - NO INITIALS

DITY

Je

NEE UNLOADING

TIME IN | TIME OUT | DATE

RECEIVED ABOVE MATERIAL IN GOOD ORDER

CONSIGNEE NAME _____

BY _____ PLEASE SIGN FULL NAME - NO INITIALS

DISPATCH NUMBER

SHIPPER NUMBER

000530130

SHIPPER WEIGHT-LBS

G

T

N

CONSIGNEE NUMBER

CONSIGNEE WEIGHT-LBS

G 77,640

T 31,420

N 46,220

ACCOUNTING

es

at the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, ition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary e terms of the attached EPA Acknowledgment of Consent.

2 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature _____ Month Day Year

☐ Export from U S Port of entry/exit: _____

Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name _____ Signature _____ Month Day Year

Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quant ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

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

Printed/Typed Name _____ Signature _____ Month Day Year

LLI 2015

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

TRANSPORTER'S COPY

3044 38812

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** 38812

Job # _____

Manifest # 0736[illegible]WAS

Scale Ticket

Gross

05:09PM 20MAY13 79560 lb

Tare

05:31PM 20MAY13 28380 lb

(2)

Truck 178

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** US362

Job # _____

Manifest # 000530[illegible]

Scale Ticket

Gross
05:17PM 20MAY13 72840 lb

Tare
05:38PM 20MAY13 - 33060 lb

Truck 179

180

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US104

Job # _____

Manifest # 000530132 WM

Scale Ticket

Gross
11:17AM 21MAY13 74940 lb

Tare
11:42AM 21MAY13 31120 l

3044-38812 7/02/2

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 38812

Job # _____

Manifest # 0044340415

Scale Ticket

Gross
11:24AM 21MAY13 78020 lb

Tare
11:48AM 21MAY13 28920 lb

0

Truck 181

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 65139

Job # _____

Manifest # CRDS 60133 WM

Scale Ticket

Gross
11:32AM 21MAY13 77120 lb

Tare
12:00PM 21MAY13 33820 lb

Transport IC., Inc. DISPATCH NUMBER

No. 2050-003

Truck 182

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date__/__/__**Unit #** 58

Job # _____

Manifest # OC4 3C9 C5FCE

Scale Ticket

Gross

11:51AM 21MAY13 60360 lb

Tare

12:15PM 21MAY13 26360 lb

4/10 24
6183-58
449416
Belmont

ERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 38KOS

Job # _____

Manifest # 004369466FLE

Scale Ticket

Gross
12:09PM 21MAY13 77160 lb

Tare
12:40PM 21MAY13 29120 lb

Form Approved. OMB No. 2050-0039

2. Page 1 of	3. Emergency Response Ph ne	4. Manifest Tracking Number
1	812 8 [illegible] 3	004369466 FLE

Generator's Site Address f different than mailing address)

U S EPA ID Number

U S EPA ID Number

U S EPA ID Number

	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13 Waste Codes
	22		6	K	NA

contents of this consignment are fully and accurately described above by the proper shipping name and are classified packaged r transport according to applicable international and national governmental regulations. If export shipment and I am the Primary of the attached EPA Acknowledgment of Consent.
) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature Month Day Year

☐ Export from U.S. Port of entry/exit: _____
Date leaving U.S.: _____

Signature Month Day Year

Signature Month Day Year

☐ Type ☐ Residue ☐ Partial Rejection ☐ Fu Rejection

Manifest Reference Number

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name Signature Month Day Year

DESIGNATED FACILITY

#81 22214

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TRANSPORTER'S COPY

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** 105362

Job # _____

Manifest # CC653013496WS

Scale Ticket

Gross
12:52PM 21MAY13 75760 lb

Tare
01:38PM 21MAY13 32630 lb

587 Truck

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date__/__/__ **Unit #** _____

Job # _____

Manifest # 006530135GN

Scale Ticket

Gross

01:11PM 21MAY13 78080 lb

Tare

01:49PM 21MAY13 30280 lb

CONTRACTOR

CONTRACT NO.

ITEM NO.

PARTIAL DEL. NO.

CONTRACTOR REP. *(if applicable)*

WEIGHMASTER

VERIFIED BY

PLEASE SIGN FULL NAME - NO INITIALS

N 47,800

3.

Form Approved. OMB No. 2050-0039

4. Manifest Tracking Number

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes

...by the proper shipping name, and are classified, packaged ...mental regulations. If export shipment and I am the Primary ...nerator) is true.

Month Day Year

Signature

Month Day Year

Month Day Year

☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

DESIGNATED FACILITY

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name Signature Month Day Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

TRANSPORTER'S COPY

3044
38812

410246

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 2582

Job # _____

Manifest # 0178790FLE

Scale Ticket

Gross

04:52PM 21MAY13 77220 lb

Tare

05:15PM 21MAY13 28740 lb

(2)

Truck 187

188

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** US139

Job # _____

Manifest # 000530136 WAS

Scale Ticket

Gross
04:57PM 21MAY13 78880 lb

Tare
05:28PM 21MAY13 33360 l

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** _____

Job # _____

Manifest #_____

Scale Ticket

Gross

09:49AM 22MAY13 78240 lb

Tare

10:11AM 22MAY13 33060 lb

Truck 189

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US 64

Job # _____

Manifest # 010536745

Scale Ticket

Gross

10:26AM 22MAY13 78220 lb

Tare

10:51AM 22MAY13 31300 lb

Truck 190

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** US 25R

Job # _____

Manifest # 0005 UPSWAS

Scale Ticket

Gross
10:14AM 22MAY13 78060 lb

Tare
10:19AM 22MAY13 30060 lb

Truck 191

192

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US139

Job # _____

Manifest # 000530140WAS

Scale Ticket

Gross	10:36AM 22MAY13	78220
Tare	11:03AM 22MAY13	33800

3044 38812

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ Unit # _____

Job # _____

Manifest # ~~000~~ 011723L33K

Scale Ticket

Gross 78960 LB

Tare 28800 LB

IICLE EXAMINATION REPORT

Aspen 2.14.1.1

Report Number: IN5224005185
Inspection Date: 05/22/2013
Start: 1:03:00 PM ET **End:** 1:18:00 PM ET
Inspection Level: III - Driver Only
HM Inspection Type: None

Driver: MCDEVITT, RICHARD A
License#: L166314003 **State:** MO
Date of Birth: 05/01/1967
CoDriver:
License#: **State:**
Date of Birth:

Post: **Shipper:**
in: ROACHDALE, IN **Bill of Lading:**
ination: CRANE, IN **Cargo:** EMPTY

VEH

Unit	VIN	GVWR	CVSA #	CVSA Issued #	OOS Sticker
1	1XPHD49X4DD182054	52,000			
2	4E7AA39248ATA2407	65,000			

BRAK For Level 3

VIOLA

HazMa **Placard:** No **Cargo Tank:**

Specia

State I
DUTY S); Food Transport Inspection: NO; Board of Health Enf. Action: NO;

I certify tha have been fulfilled in accordance with Title 49 CFR-395.13 and/or 396.9.
Signature Facility: Date:

IN ACCORD COMPLETE THIS CERTIFICATION AND RETURN TO THE POLICE AGENCY ABOVE WITHIN
FIFTEEN (1 VIOLATIONS AND THE COMPLETION OF EFFECTIVE CORRECTIVE MEASURES.
Signature O Title: Date:

True 193

Report Prepared By: MASTER TPR. R.K. WINSTEAD CVEO Badge #: 5224
X _____

Copy Received By: RICHARD MCDEVITT
X _____

00124260 IN IN5224005185

194

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 58

Job # _____

Manifest # ~~GU~~ 011773579JJK

Scale Ticket

Gross
11:06AM 22MAY13 62880 lb

Tare
11:35AM 22MAY13 26960 l

195

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 38805

Job # _____

Manifest # 011773518 JJK

Scale Ticket

@ 05.22.13 PRINTER MALFUNTIO

Gross 78440 lb

01:34PM 22MAY13

Tare 29100

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** _____

Job # _____

Manifest # _____

Scale Ticket

Gross 79120 lb

Tare 32840 lb

Truck 196

Form Approved. OMB No. 2050-0039

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___Unit # 6304

Job # _____

Manifest # 00530142[illegible]

Scale Ticket

Gross 29340 lb

Tare 31100 lb

Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number	

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

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

Number,	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes

of this co s g y and accurately described above by the proper shipp ng name and are classified packaged ort according to applicable international and national governmental regulations. If export shipment and I am the Primary ttached EPA Acknowledgment of Consent n a large quantity generator) or (b) (if I am a small quantity generator) is true

Signature — Month 5 Day 22 Year 13

☐ Export from U.S. Port of entry/exit: Date leaving U.S.:

Signature — Month 5 Day 22 Year 13

Signature — Month Day Year

☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

16b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name — Signature — Month Day Year

TRANSPORTER | INT'L

DESIGNATED FACILITY

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

TRANSPORTER'S COPY

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** _____

Job # _____

Manifest # 011773524 JJK

Scale Ticket

Gross 29380

Tare 30120

CONTRACTOR

CONTRACT NO.

ITEM NO.

PARTIAL DEL. NO.

CONTRACTOR REP. *(if applicable)*

WEIGHMASTER

VERIFIED BY

PLEASE SIGN FULL NAME - NO INITIALS

CONS

DEST

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3/-

N 49J6U

198

Form Approved. OMB No. 2050-0039

ne

4. Manifest Tracking Number 011773524 JJK

ferent than mailing address)

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

Type	11 Total Quantity	12 Unit Wt./Vol.	13. Waste Codes
	22.4	K	

d above by the proper shipping name, and are classified, packaged overnmental regulations. If export shipment and I am the Primary

nary generator) is true

Month Day Year

Month Day Year

Signature

Month Day Year

☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

DESIGNATED FACILITY

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name Signature Month Day Year

861 Truck 1

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TRANSPORTER'S COPY

ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** U 117

Job # _____

Manifest # 010520124 A

Scale Ticket

Gross

04:07PM 22MAY13 77520 lb

Tare

33580 lb

☐ U.S. Bulk Transport IC., Inc.

DISPATCH

050-0039

LOADING

TIME IN | TIME OUT | DATE 5.22

BY PLEASE SIGN FULL NAME - NO INITIALS

SHIPPER NUMBER 530143

SHIPPER WEIGHT-LBS

G 77680

T 33700

N

ACCOUNTING

MODITY

UNLOADING

TIME IN | TIME OUT | DATE 5.22

RECEIVED ABOVE MATERIAL IN GOOD ORDER

CONSIGNEE NAME

BY PLEASE SIGN FULL NAME - NO INITIALS

CONSIGNEE NUMBER

CONSIGNEE WEIGHT-LBS

G 77520

T 33580

N

riar Dr
6509
-9949

PAGE 1 OF 3

(4 pm)

ATTACHMENT

the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, on for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary erms of the attached EPA Acknowledgment of Consent.
27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature | Month 5 | Day 22 | Year

☐ Export from U.S. Port of entry/exit

Date leaving U.S.

Signature | Month 5 | Day 22 | Year

TRANS

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18 Discrepancy

18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b. Alternate Facility (or Generator) | U.S. EPA ID Number

Facility's Phone

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment disposal and recycling systems)

1.	2	3	4

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

Printed/Typed Name | Signature | Month | Day | Year

TRANSPORTER'S COPY

Truck 199

3044 38812 4/16/30

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 38812

Job # _____

Manifest # ~~060~~ 011705106JK

Scale Ticket

Gross

10:54PM 22MAY13 79280 lb

Tare

10:09PM 22MAY13 28900 lb

(2)

Truck 200

201

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 58

Job # _____

Manifest # 011773577JJK

Scale Ticket

Gross
07:42AM 23MAY13 79860 lb

Tare
08:06AM 23MAY13 27560 lb

202

Form Approved. OMB No. 2050-0039

2 Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
1	812-954-4173	011773575 JJK

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

Ln 47522

U.S. EPA ID Number

IL000132536

U.S. EPA ID Number

U.S. EPA ID Number

vironmental Services
l. Roachdale In 46172

IND980503890

ass, ID Number,	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
D Biphenyls	001	DT	22,145	Kg	

EQ=116 ERC#171 SWMU#17

Approval Code# 191852-7

Date 5/23/13

al the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, ition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary terms of the attached EPA Acknowledgment of Consent.

2 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature — Month 5 — Day 23 — Year 13

☐ Export from U.S. Port of entry/exit:
Date leaving U.S.

Signature — Month — Day — Year

Signature — Month — Day — Year

☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

DESIGNATED FACILITY

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name — Signature — Month — Day — Year

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TRANSPORTER'S COPY

Truck 202

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 202

Job # _____

Manifest # 011773575 JJK

Scale Ticket

Gross

79640 lb

Tare

29130 lb

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US2A

Job # _____

Manifest # 011223-0JJK

Scale Ticket

Gross

20:13AM 23MAY13 78080 lb

Tare

20:40AM 23MAY13 29660 lb

Truck 203

204

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US104

Job # _____

Manifest # ~~00~~ 011773521JJK

Scale Ticket

Gross
10:49AM 23MAY13 78720 1

Tare
11:12AM 23MAY13 31520 1

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** US 362

Job # _____

Manifest # _____

Scale Ticket

Gross 78000 lb

Tare 32580 lb

Truck 205

ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US139

Job # _____

Manifest # 011773505 JK

Scale Ticket

Gross 23MAY13 76790 lb

Tare 23MAY13 34220 lb

482 Kg

42,860 lb

PASSENGER ☐ ON ☐ OFF

DEBRIS ☐ YES ☐ NO

08:23:11 23 May 2013 76960 lb

08:46:25 23 May 2013 34100 lb

2050-0039

JK

525

ACCOUNTING

0

VERIFIED BY

N

ERC 171 FRI: HeritageF (3477422)

23/13 I. W'l (837331 Tel 5848021

of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, according to applicable international and national governmental regulations. If export shipment and I am the Primary attached EPA Acknowledgment of Consent.

a large quantity generator) or (b) (if I am a small quantity generator) is true.

Signature | Month 5 | Day 23 | Year 13

☐ Export from U.S. Port of entry/exit: Date leaving U.S.

TRANSPORTER | INT'L

Signature | Month | Day | Year

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

3044

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___ **Unit #** 38812

Job # _____

Manifest # 011723512 JJK

Scale Ticket

Gross 78280 lb

Tare 28780 lb

Truck 207

[redacted]

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 58

Job # _____

Manifest # 011773514 JJK

Scale Ticket

Gross

02:01PM 23MAY13 76220

Tare

02:44PM 23MAY13 27140

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 38805

Job # _____

Manifest # 011773SC8JJK

Scale Ticket

Gross
03:43PM 23MAY13 78060 lb

Tare
04:03PM 23MAY13 28820 lb

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** _____

Job # _____

Manifest # _____

Scale Ticket

Gross

Tare

WEIGHT TICKET
9ND-NWSCC 4010/2 (Rev. 6-79)

TRUCK/TRACTOR NO. 338

TRAILER NO.

RR CAR NO.

EMPTY WT-STENCIL

GROSS

TARE

SCC ☐☐☐

IDENTIFICATION

DEBRIS ☐ YES ☐ NO

PASSENGER ☐ ON ☐ OFF

-LBS

ER

DISPATCH NUMBER 2473 - 110,79

☒ U.S. Bulk Transport, Inc. LOT 28% ☐ U.S. Bulk Transport IC., Inc.

Form Approved. OMB No. 2050-0039

4. Manifest Tracking Number 011773535 JJK

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

Type	11. Total Quantity	12. Unit Wt./Vol.	13 Waste Codes

ed above by the proper shipping name, and are classified, packaged, l governmental regulations. If export shipment and I am the Primary

uantity generator) is true.

Month Day Year

Signature

Month Day Year

☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

DESIGNATED FACILITY

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name Signature Month Day Year

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

TRANSPORTER'S COPY

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** U.S 362

Job # _____

Manifest # G 11 D 3536 JSK

Scale Ticket

Gross

04:39PM 23MAY13 77680 lb

Tare

04:58PM 23MAY13 33060 lb

Truck 211

Form Approved OMB No. 2050-0039

Page 1 of 1 | 3. Emergency Response Phone | 4. Manifest Tracking Number 000530142 ...

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN
GEN: 121853

U.S. EPA ID Number

U.S. EPA ID Number

U.S. EPA ID Number

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 6164

Job # ________

Manifest # 000530142 ...

Scale Ticket

Gross 79340 lb

Tare 31100 lb

9a HM		10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1.	1		1418		
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information

15. GENERATOR'S ... fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled ... applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify ... Acknowledgment of Consent. I certify that the ... (a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name | Signature | Month 5 | Day 22 | Year 13

16. International Shipments | Port of entry/exit: | Transporter signature (for exports only): | Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name | Signature | Month 5 | Day 22 | Year 13
Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

18. Discrepancy
18a. Discrepancy Indication Space | Quantity | Type | Residue | Partial Rejection | Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name | Signature | Month | Day | Year

GENERATOR | INT'L | TRANSPORTER | DESIGNATED FACILITY

Truck 212

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. TRANSPORTER'S COPY

[redacted]

A13

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US139

Job # _____

Manifest # 001773534 JJK

Scale Ticket

Gross

04:50PM 23MAY13 78580 lt

Tare

05:21PM 23MAY13 33700 :

3044 38812

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date___/___/___**Unit #** 3881L

Job # _____

Manifest # 011223526JJK

Scale Ticket

Gross

10:49AM 24MAY13 79040 lb

Tare

11:03AM 24MAY13 28660 lb

(1)

Truck 214

2 15

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 38805

Job # _____

Manifest # 011733533JJK

Scale Ticket

Gross
10:57AM 24MAY13 78680 lb

Tare
11:21AM 24MAY13 29060 lb

216

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date ___/___/___ **Unit #** 58

Job # _____

Manifest # 011773571 JJK

Scale Ticket

Gross
11:16AM 24MAY13 76140 lb

Tare
11:33AM 24MAY13 26940 lb

#17

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US 338

Job # _____

Manifest # 011773520JJK

Scale Ticket

Gross

11:19AM 24MAY13 77660 lb

Tare

11:40AM 24MAY13 30080 l

218

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US362

Job # _____

Manifest # 011773529 JJK

Scale Ticket

Gross
12:11PM 24MAY13 76500 1

Tare
12:35PM 24MAY13 32780

+19

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** US 104

Job # _____

Manifest # 011773528 JJK

Scale Ticket

Gross
11:59AM 24MAY13 76800 lb

Tare
12:29PM 24MAY13 30980 lb

220

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** 38812

Job # _____

Manifest # 011773540 JJK

Scale Ticket

Gross
04:00PM 24MAY13 78200

Tare
04:21PM 24MAY13 28460 lt

3726 EAST STATE ROAD 64 3044 38812
WINSLOW, IN 47598
8127892647

SITE	CELL	OPERATOR	TICKET #
N2		40081	**460764**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN/3044	5/28/13 10:15 am	5/28/13 10:34 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,900.00LBS Scale In
TARE 28,880.00LBS Scale Out
NET 51,020.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.51	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

V

Truck 221

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**460802**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN/3057	5/28/13 11:48 am	5/28/13 12:09 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 80,200.00LBS Scale In
TARE 28,480.00LBS Scale Out
NET 51,720.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.86	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 222

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**460816**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3043	5/28/13 12:37 pm	5/28/13 12:47 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,780.00LBS Scale In
TARE 28,420.00LBS Scale Out
NET 50,360.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.18	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

LD# 426477
CRANE
3043 38822

Total
Paid
Change
Check #
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Richard Crawford

CUSTOMER COPY

Truck 223

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

3044
38812

#224

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**460844**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	5/28/13 2:03 pm	5/28/13 2:21 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,940.00LBS Scale In
TARE 28,740.00LBS Scale Out
NET 50,200.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.10	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

(2)

Truck 224

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**460882**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057/BEELMAN	5/28/13 3:38 pm	5/28/13 3:57 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,320.00LBS Scale In
TARE 28,340.00LBS Scale Out
NET 48,980.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.49	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 225

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

SITE	CELL	OPERATOR	TICKET #
N2		40081	**460940**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	5/29/13 8:53 am	5/29/13 9:03 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,520.00LBS Scale In
TARE 28,580.00LBS Scale Out
NET 48,940.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.47	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check #
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

Truck 226

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

3044
38812

SITE	CELL	OPERATOR	TICKET #
N2		40081	**460957**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	5/29/13 9:38 am	5/29/13 9:53 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,580.00LBS Scale In
TARE 28,800.00LBS Scale Out
NET 50,780.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.39	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 227

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**460954**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057/BEELMAN	5/29/13 9:27 am	5/29/13 9:43 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,620.00LBS Scale In
TARE 28,520.00LBS Scale Out
NET 50,100.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.05	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 228

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461007**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	5/29/13 12:13 pm	5/29/13 12:24 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,580.00LBS Scale In
TARE 28,420.00LBS Scale Out
NET 50,160.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.08	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check #
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

Truck 229

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461032**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057/BEELMAN	5/29/13 1:02 pm	5/29/13 1:20 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,580.00LBS Scale In
TARE 28,380.00LBS Scale Out
NET 49,200.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.60	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:______________________

CUSTOMER COPY

Truck 230

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

3044
38817

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**461035**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
BEELMAN 3044	5/29/13 1:21 pm	5/29/13 1:35 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,080.00LBS Scale In
TARE 28,600.00LBS Scale Out
NET 49,480.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.74	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

(2)

Truck 231

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461084**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	5/29/13 3:36 pm	5/29/13 3:46 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,100.00LBS Scale In
TARE 28,200.00LBS Scale Out
NET 50,900.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.45	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

LO# 430878
CRANIC
3043 38872

SIGNATURE: Richard Crawford

Total
Paid
Change
Check #
Recpt #

CUSTOMER COPY

TRUCK 232

233

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date 5/30/13 **Unit #** 38802

Job # _____

Manifest # 011773538 JSK

Scale Ticket

Gross

09:47AM 30MAY13 78080

Tare

10:14AM 30MAY13 28420

30-44-38812

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date 5 / 30 / 13 **Unit #** 38812

Job # _____

Manifest # 011773532 JJK

Scale Ticket

Gross

10:07AM 30MAY13 77480 lb

Tare

10:40AM 30MAY13 28860 lb

1

Truck 234

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date 5 /30/13 **Unit #** 38822

Job # _____

Manifest # 011773173 JJK

Scale Ticket

Gross

10:10AM 30MAY13 78380 lb

Tare

10:42AM 30MAY13 28700 lb

Truck 235

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date __/__/__ **Unit #** RV-132

Job # _____

Manifest # 011773543 JJK

Scale Ticket

Gross

12:47PM 30MAY13 60820 lb

Tare

01:29PM 30MAY13 41740 lb

237

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date 5/30/12 **Unit #** 38802

Job # _____

Manifest # 011773569 JJK

Scale Ticket

Gross
03:35PM 30MAY13 79960

Tare
04:02PM 30MAY13 28200

3044
38812

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date 5/30/13 **Unit #** 38812

Job # _____

Manifest # 01173537 JJK

Scale Ticket

Gross
03:49PM 30MAY13 79780 lb

Tare
04:18PM 30MAY13 28540 lb

(2)

Truck 238

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date 5 / 30 / 13 **Unit #** 38522

Job # _____
LDII 432936 30
CRARIC 38

Manifest # Richard 73 [illegible]

Scale Ticket

Gross
03:52PM 30MAY13 78720 lb

Tare
[illegible] 30MAY13 28340 lb

CRARIC 38522
3043 Rear unfull

Truck 239

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**461307**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	5/31/13 8:49 am	5/31/13 8:59 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,680.00 LBS Scale In
TARE 28,680.00 LBS Scale Out
NET 48,000.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
24.00	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

Total
Paid
Change
Check#
Recpt #

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**461327**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	5/31/13 9:11 am	5/31/13 9:37 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,020.00 LBS Scale In
TARE 28,820.00 LBS Scale Out
NET 49,200.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
24.60	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

Total
Paid
Change
Check#
Recpt #

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**461328**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057/BEELMAN	5/31/13 9:12 am	5/31/13 9:41 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,320.00 LBS Scale In
TARE 28,520.00 LBS Scale Out
NET 48,800.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
24.40	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461534**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	6/3/13 8:56 am	6/3/13 9:09 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,980.00LBS Scale In
TARE 28,720.00LBS Scale Out
NET 49,260.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.63	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461596**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 42	6/3/13 10:52 am	6/3/13 11:05 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 64,360.00LBS Scale In
TARE 26,640.00LBS Scale Out
NET 37,720.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
18.86	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461597**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 48	6/3/13 10:52 am	6/3/13 11:05 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 65,780.00LBS Scale In
TARE 27,440.00LBS Scale Out
NET 38,340.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.17	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461603**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 49	6/3/13 11:04 am	6/3/13 11:18 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 66,880.00LBS Scale In
TARE 26,540.00LBS Scale Out
NET 40,340.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.17	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 246

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

McUnit
3044
38812

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461616**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	6/3/13 11:33 am	6/3/13 11:52 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,500.00LBS Scale In
TARE 28,660.00LBS Scale Out
NET 50,840.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.42	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

C

Tare 247

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461625**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	6/3/13 12:19 pm	6/3/13 12:30 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,480.00LBS Scale In
TARE 28,540.00LBS Scale Out
NET 49,940.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.97	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TRUCK 248

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461659**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 48	6/3/13 2:02 pm	6/3/13 2:09 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 66,240.00LBS Scale In
TARE 27,280.00LBS Scale Out
NET 38,960.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.48	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

T - 11 249

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461686**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 49	6/3/13 3:26 pm	6/3/13 3:36 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 66,440.00LBS Scale In
TARE 26,340.00LBS Scale Out
NET 40,100.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.05	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461687**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 19	6/3/13 3:27 pm	6/3/13 3:37 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 67,080.00 LBS Scale In
TARE 25,780.00 LBS Scale Out
NET 41,300.00 LBS

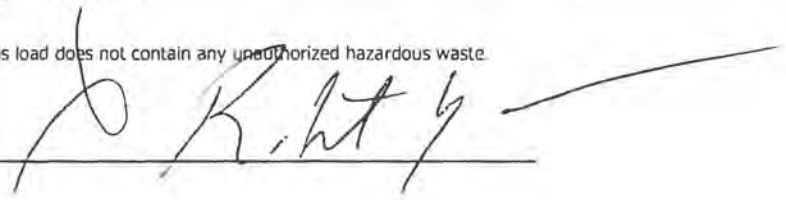
QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.65	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

Tax Total

Total
Paid
Change
Check #
Recpt #

hereby certify that this load does not contain any unauthorized hazardous waste

SIGNATURE: 

FACILITY COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461689**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	6/3/13 3:31 pm	6/3/13 3:44 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 80,120.00LBS Scale In
TARE 28,560.00LBS Scale Out
NET 51,560.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.78	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

6

Truck 707

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

LO# 436433
CRARIC
3043 38822

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461693**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	6/3/13 3:39 pm	6/3/13 3:51 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,440.00LBS Scale In
TARE 28,340.00LBS Scale Out
NET 48,100.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.05	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check #
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Richard Crawford

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

436935
Tk # 39257
Tk # 39802

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461700**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057/BEELMAN	6/3/13 4:00 pm	6/3/13 4:19 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,420.00LBS Scale In
TARE 28,260.00LBS Scale Out
NET 51,160.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.58	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

254

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461738**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BELMAN	6/4/13 8:42 am	6/4/13 8:52 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 76,740.00LBS Scale In
TARE 28,680.00LBS Scale Out
NET 48,060.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.03	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT/LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461741**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 42	6/4/13 8:51 am	6/4/13 9:00 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 63,800.00LBS Scale In
TARE 26,620.00LBS Scale Out
NET 37,180.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
18.59	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 256

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461751**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG19	6/4/13 9:20 am	6/4/13 9:28 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 66,020.00LBS Scale In
TARE 25,880.00LBS Scale Out
NET 40,140.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.07	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

3044
39812

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461750**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	6/4/13 9:15 am	6/4/13 9:27 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,880.00LBS Scale In
TARE 28,780.00LBS Scale Out
NET 49,100.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.55	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461754**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057	6/4/13 9:22 am	6/4/13 9:34 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,860.00LBS Scale In
TARE 25,800.00LBS Scale Out
NET 53,060.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
26.53	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461762**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 48	6/4/13 10:02 am	6/4/13 10:08 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 67,520.00LBS Scale In
TARE 27,400.00LBS Scale Out
NET 40,120.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.06	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461799**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	6/4/13 12:03 pm	6/4/13 12:13 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,080.00LBS Scale In
TARE 28,520.00LBS Scale Out
NET 50,560.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.28	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INT'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461817**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 42	6/4/13 12:56 pm	6/4/13 1:05 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 67,540.00LBS Scale In
TARE 26,420.00LBS Scale Out
NET 41,120.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.56	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 2662

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461806**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 19	6/4/13 12:31 pm	6/4/13 12:38 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 68,060.00LBS Manual In
TARE 25,700.00LBS Scale Out
NET 42,360.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
21.18	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

3044
3812

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461813**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	6/4/13 12:47 pm	6/4/13 12:59 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,320.00LBS Scale In
TARE 28,620.00LBS Scale Out
NET 50,700.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.35	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

2

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

ZAHLES
938854
Tk# 3057
Tk# 38802

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461815**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057/BEELMAN	6/4/13 12:48 pm	6/4/13 1:02 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,180.00LBS Scale In
TARE 28,440.00LBS Scale Out
NET 48,740.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.37	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:____________________________

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**461828**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 48	6/4/13 1:31 pm	6/4/13 1:40 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 67,140.00LBS Scale In
TARE 27,220.00LBS Scale Out
NET 39,920.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.96	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461857**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	6/4/13 3:26 pm	6/4/13 3:33 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,140.00LBS Manual In
TARE 28,420.00LBS Scale Out
NET 48,720.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.36	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

LO# 438852
CR & RiC
3043 38822

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Richard Woodard

CUSTOMER COPY

TRUCK 267

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461868**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 19	6/4/13 4:13 pm	6/4/13 4:22 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 67,220.00LBS Scale In
TARE 25,500.00LBS Scale Out
NET 41,720.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.86	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: _____

CUSTOMER COPY

TRUCK 268

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461869**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 42	6/4/13 4:15 pm	6/4/13 4:24 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 65,640.00LBS Scale In
TARE 26,280.00LBS Scale Out
NET 39,360.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.68	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461911**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	6/5/13 8:37 am	6/5/13 8:47 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,340.00LBS Scale In
TARE 28,680.00LBS Scale Out
NET 50,660.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.33	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

3044
39812

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461919**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	6/5/13 9:00 am	6/5/13 9:17 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,860.00LBS Scale In
TARE 28,740.00LBS Scale Out
NET 51,120.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.56	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

1

272

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

3057

Date ___/___/___ **Unit #** 38802

Job # _____

Manifest # 011773572 JSK

Scale Ticket

Gross

01:35PM 05.JUN13 79340 lb

Tare

01:57PM 05.JUN13 28460

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INT'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461922**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 19	6/5/13 9:14 am	6/5/13 9:20 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 67,580.00LBS Scale In
TARE 25,840.00LBS Scale Out
NET 41,740.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN		RATE	TAX	TOTAL
20.87	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461920**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 42	6/5/13 9:08 am	6/5/13 9:17 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 65,840.00LBS Scale In
TARE 26,620.00LBS Scale Out
NET 39,220.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.61	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INT'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461926**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 48	6/5/13 9:28 am	6/5/13 9:32 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 66,640.00LBS Manual In
TARE 27,440.00LBS Scale Out
NET 39,200.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.60	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

TE ROAD 64
47598

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461950**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 11	6/5/13 10:45 am	6/5/13 10:56 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 66,280.00LBS Scale In
TARE 26,920.00LBS Scale Out
NET 39,360.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.68	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461969**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	6/5/13 12:01 pm	6/5/13 12:11 pm

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,980.00LBS Scale In
TARE 28,500.00LBS Scale Out
NET 51,480.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.74	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

MIDRIC
3044 38812

447277

HERITAGE
ENVIRONMENTAL SERVICES, LLC

Heritage Environmental Service LLC, Landfill Roachdale, IN

Date__/__/__ **Unit #** 25812

Job # _____

Manifest # 011072344JK

Scale Ticket

Gross
03:21PM 05JUN13 37880 lb

Tare
03:31PM 05JUN13 28680 lb

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461979**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
young 42	6/5/13 12:42 pm	6/5/13 12:48 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 66,460.00LBS Scale In
TARE 26,440.00LBS Scale Out
NET 40,020.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.01	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461974**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 19	6/5/13 12:19 pm	6/5/13 12:26 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 61,920.00LBS Scale In
TARE 25,640.00LBS Scale Out
NET 36,280.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
18.14	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 280

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**461975**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 48	6/5/13 12:20 pm	6/5/13 12:26 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 63,480.00LBS Scale In
TARE 27,220.00LBS Scale Out
NET 36,260.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
18.13	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462035**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 11	6/5/13 3:04 pm	6/5/13 3:13 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 67,380.00LBS Scale In
TARE 26,640.00LBS Scale Out
NET 40,740.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.37	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

L·D# 04#3373
CRARIC
3043
38812

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462041**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	6/5/13 3:24 pm	6/5/13 3:35 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,520.00LBS Scale In
TARE 28,340.00LBS Scale Out
NET 51,180.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.59	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Richard Crawford

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-4S 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462034**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 48	6/5/13 3:03 pm	6/5/13 3:12 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 63,000.00LBS Scale In
TARE 27,040.00LBS Scale Out
NET 35,960.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
17.98	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462047**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG19	6/5/13 3:50 pm	6/5/13 3:57 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 67,040.00LBS Scale In
TARE 25,460.00LBS Scale Out
NET 41,580.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.79	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

T[illegible]285

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462046**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG42	6/5/13 3:48 pm	6/5/13 3:56 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 59,960.00LBS Scale In
TARE 26,240.00LBS Scale Out
NET 33,720.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
16.86	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462090**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057/BEELMAN	6/6/13 8:42 am	6/6/13 8:58 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 77,820.00LBS Scale In
TARE 28,480.00LBS Scale Out
NET 49,340.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.67	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

3044 38612

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462095**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	6/6/13 9:00 am	6/6/13 9:12 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,680.00LBS Scale In
TARE 28,720.00LBS Scale Out
NET 50,960.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.48	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

6

_ ROAD 64
.N 47598
-2647

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462096**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	6/6/13 9:01 am	6/6/13 9:14 am

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,480.00LBS Scale In
TARE 28,720.00LBS Scale Out
NET 50,760.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.38	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Cook 799

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462115**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 19	6/6/13 9:59 am	6/6/13 10:11 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 63,200.00LBS Scale In
TARE 25,920.00LBS Scale Out
NET 37,280.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
18.64	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462102**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 42	6/6/13 9:28 am	6/6/13 9:37 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 62,500.00LBS Scale In
TARE 26,660.00LBS Scale Out
NET 35,840.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
17.92	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

Truck 291

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462116**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 40	6/6/13 9:59 am	6/6/13 10:11 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 64,660.00LBS Scale In
TARE 26,520.00LBS Scale Out
NET 38,140.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.07	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462117**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 28	6/6/13 10:01 am	6/6/13 10:13 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 64,600.00LBS Scale In
TARE 25,900.00LBS Scale Out
NET 38,700.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.35	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462151**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057/BEELMAN	6/6/13 12:10 pm	6/6/13 12:22 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,740.00LBS Scale In
TARE 28,420.00LBS Scale Out
NET 50,320.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.16	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

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3044
38812

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

4460 11

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462156**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	6/6/13 12:29 pm	6/6/13 12:43 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,580.00LBS Scale In
TARE 28,560.00LBS Scale Out
NET 51,020.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.51	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

(2)

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462158**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	6/6/13 12:36 pm	6/6/13 12:46 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,500.00LBS Scale In
TARE 28,400.00LBS Scale Out
NET 51,100.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.55	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

LO# 446016
CRANE
3043 38822

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE: Richard Crawford

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462161**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 42	6/6/13 12:40 pm	6/6/13 12:50 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 64,280.00LBS Scale In
TARE 26,440.00LBS Scale Out
NET 37,840.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
18.92	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check #
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

TRUCK 297

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462183**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 19	6/6/13 1:47 pm	6/6/13 1:55 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 66,000.00LBS Scale In
TARE 25,720.00LBS Scale Out
NET 40,280.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.14	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Tank 798

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462185**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
TRK 40	6/6/13 1:49 pm	6/6/13 1:57 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 65,920.00LBS Scale In
TARE 26,300.00LBS Scale Out
NET 39,620.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.81	TN	C-Soil - EXT	YD	0 00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 299

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462186**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 28	6/6/13 1:50 pm	6/6/13 1:58 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 62,800.00LBS Scale In
TARE 25,680.00LBS Scale Out
NET 37,120.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
18.56	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INT'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462217**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057/BEELMAN	6/6/13 3:43 pm	6/6/13 4:00 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,700.00LBS Scale In
TARE 28,120.00LBS Scale Out
NET 51,580.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.79	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

3044
38812

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462221**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	6/6/13 3:59 pm	6/6/13 4:12 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,220.00LBS Scale In
TARE 28,380.00LBS Scale Out
NET 50,840.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.42	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COPY

(3)

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462222**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043/BEELMAN	6/6/13 4:02 pm	6/6/13 4:13 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,460.00LBS Scale In
TARE 28,300.00LBS Scale Out
NET 50,160.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.08	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

LO# 446010
CRARIC
3043 38822

SIGNATURE: Richard Crawford

Total
Paid
Change
Check #
Recpt #

CUSTOMER COPY

Truck 303

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INT'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462223**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 42	6/6/13 4:06 pm	6/6/13 4:15 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 63,720.00LBS Scale In
TARE 26,280.00LBS Scale Out
NET 37,440.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
18.72	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462273**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043	6/7/13 8:43 am	6/7/13 8:43 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 80,160.00LBS Manual In
TARE 28,640.00LBS Scale Out
NET 51,520.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.76	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck Dec

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462278**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057/BEELMAN	6/7/13 8:42 am	6/7/13 8:53 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,320.00LBS Manual In
TARE 28,540.00LBS Scale Out
NET 50,780.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.39	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

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3044
38812

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

449304

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462287**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	6/7/13 8:55 am	6/7/13 9:11 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,220.00LBS Scale In
TARE 28,720.00LBS Scale Out
NET 49,500.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
24.75	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462294**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 19	6/7/13 9:16 am	6/7/13 9:24 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 66,100.00LBS Scale In
TARE 26,000.00LBS Scale Out
NET 40,100.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.05	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462297**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 48	6/7/13 9:22 am	6/7/13 9:32 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 62,980.00LBS Scale In
TARE 27,900.00LBS Scale Out
NET 35,080.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
17.54	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462300**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 42	6/7/13 9:31 am	6/7/13 9:40 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 65,780.00LBS Scale In
TARE 26,620.00LBS Scale Out
NET 39,160.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.58	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462307**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 49	6/7/13 10:02 am	6/7/13 10:16 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 67,400.00LBS Scale In
TARE 26,540.00LBS Scale Out
NET 40,860.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.43	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

191

Truck 211

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462335**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 40	6/7/13 11:42 am	6/7/13 11:50 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 67,000.00LBS Scale In
TARE 26,480.00LBS Scale Out
NET 40,520.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.26	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

312

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462330**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 11	6/7/13 11:33 am	6/7/13 11:43 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 65,960.00LBS Scale In
TARE 26,800.00LBS Scale Out
NET 39,160.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.58	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Tank 312

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462340**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043	6/7/13 11:57 am	6/7/13 12:07 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,300.00LBS Scale In
TARE 28,540.00LBS Scale Out
NET 50,760.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.38	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 214

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462347**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057	6/7/13 12:07 pm	6/7/13 12:19 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,680.00LBS Scale In
TARE 28,280.00LBS Scale Out
NET 50,400.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.20	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

3044
38812

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462355**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	C
3044/BEELMAN	6/7/13 12:27 pm	6/ 12:

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,980.00LBS Scale In
TARE 28,520.00LBS Scale Out
NET 51,460.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
25.73	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

I hereby certify that this load does not contain any unauthorized hazardous waste.

SIGNATURE:_____

CUSTOMER COI

TRUCK 316

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462351**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 19	6/7/13 12:25 pm	6/7/13 12:34 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 62,940.00LBS Scale In
TARE 25,780.00LBS Scale Out
NET 37,160.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
18.58	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462354**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 48	6/7/13 12:30 pm	6/7/13 12:39 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 63,340.00LBS Scale In
TARE 27,660.00LBS Scale Out
NET 35,680.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
17.84	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check #
Recpt #

SIGNATURE:_____

CUSTOMER COPY

Truck 318

ACKFOOT LANDFILL
26 EAST STATE ROAD 64
NSLOW, IN 47598
27892647

L001
A CRANE/SULLIVAN INTN'L GROUP
B521-203-45 00
50 WOMBLE ROAD SUITE 100
N DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462360**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 42	6/7/13 12:44 pm	6/7/13 12:53 pm

ONTRACT: CRANE/ABF13034
BOL:

GROSS 65,620.00LBS Scale In
TARE 26,440.00LBS Scale Out
NET 39,180.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.59	TN	C-Soil - EXT	YD	0.00	MT	100.00			

ank you for using Blackfoot Landfill.

Total
Paid
Change
Check#
Recpt #

reby certify that this load does not contain any unauthorized hazardous waste.

GNATURE:_____

CUSTOMER COPY

TRUCK 319

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INT'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		63017	**462367**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 49	6/7/13 1:22 pm	6/7/13 1:36 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 65,620.00LBS Scale In
TARE 26,360.00LBS Scale Out
NET 39,260.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.63	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

ACKFOOT LANDFILL
26 EAST STATE ROAD 64
INSLOW, IN 47598
27892647

1001
SA CRANE/SULLIVAN INTN'L GROUP
.# BS21-203-45 00
'50 WOMBLE ROAD SUITE 100
IN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462391**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 40	6/7/13 2:46 pm	6/7/13 2:54 pm

ONTRACT: CRANE/ABF13034
BOL:

GROSS 65,440.00LBS Scale In
TARE 26,260.00LBS Scale Out
NET 39,180.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.59	TN	C-Soil - EXT	YD	0.00	MT	100.00			

ank you for using Blackfoot Landfill.

reby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

GNATURE:_____

CUSTOMER COPY

3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TI. . #
N2		40081	**462390**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 11	6/7/13 2:44 pm	6/7/13 2:53 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 67,860.00LBS Scale In
TARE 26,560.00LBS Scale Out
NET 41,300.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.65	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**462406**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3043	6/7/13 3:21 pm	6/7/13 3:32 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,300.00 LBS Scale In
TARE 28,280.00 LBS Scale Out
NET 51,020.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
25.51	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

FACILITY COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**462411**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3057/BEELMAN	6/7/13 3:37 pm	6/7/13 3:54 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 79,480.00 LBS Scale In
TARE 28,080.00 LBS Scale Out
NET 51,400.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
25.70	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

FACILITY COPY

KFOOT LANDFILL
5 EAST STATE ROAD 64
SLOW, IN 47598
7892647

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462423**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 19	6/7/13 4:09 pm	6/7/13 4:18 pm

001
CRANE/SULLIVAN INTN'L GROUP
B521-203-4S 00
) WOMBLE ROAD SUITE 100
DIEGO, CA 92106

INVOICE
INBOUND

NTRACT: CRANE/ABF13034
BOL:

GROSS 65,320.00LBS Scale In
TARE 25,440.00LBS Scale Out
NET 39,880.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.94	TN	C-Soil - EXT	YD	0.00	MT	100.00			

k you for using Blackfoot Landfill.

by certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

NATURE:_____

CUSTOMER COPY

TRUCK 325

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**462428**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
3044/BEELMAN	6/7/13 4:11 pm	6/7/13 4:28 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 78,620.00 LBS Scale In
TARE 28,300.00 LBS Scale Out
NET 50,320.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
25.16	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

FACILITY COPY

EAST STATE ROAD 64
LOW, IN 47598
892647

01
RANE/SULLIVAN INTN'L GROUP
3521-203-45 00
WOMBLE ROAD SUITE 100
DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462420**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 48	6/7/13 4:07 pm	6/7/13 4:14 pm

TRACT: CRANE/ABF13034
BOL:

GROSS 68,180.00LBS Scale In
TARE 27,480.00LBS Scale Out
NET 40,700.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
0.35	TN	C-Soil - EXT	YD	0.00	MT	100.00			

you for using Blackfoot Landfill.

certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

ATURE:_____

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462421**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 42	6/7/13 4:08 pm	6/7/13 4:16 pm

CONTRACT: CRANE/ABF13034
BOL:

GROSS 65,860.00LBS Scale In
TARE 26,260.00LBS Scale Out
NET 39,600.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
19.80	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

CUSTOMER COPY

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001
NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

SITE	CELL	OPERATOR	TICKET #
N2		40081	**462583**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 48	6/10/13 10:12 am	6/10/13 10:19 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 67,500.00LBS Scale In
TARE 27,480.00LBS Scale Out
NET 40,020.00 LBS

QTY	UNIT	DESCRIPTION			ORIGIN	%	RATE	TAX	TOTAL
20.01	TN	C-Soil - EXT	YD	0.00	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

CUSTOMER COPY

329

BLACKFOOT LANDFILL
3726 EAST STATE ROAD 64
WINSLOW, IN 47598
8127892647

001001 - NSA CRANE/SULLIVAN INTN'L GROUP
GL# B521-203-45 00
2750 WOMBLE ROAD SUITE 100
SAN DIEGO, CA 92106

INVOICE
INBOUND

Work Order: 0			Route #: 0
SITE	CELL	OPERATOR	TICKET #
N2		40081	**462603**

TRUCK	CONTAINER	LICENSE
CRANEABF13034		

REFERENCE	IN	OUT
YOUNG 42	6/10/13 11:15 am	6/10/13 11:26 am

CONTRACT: CRANE/ABF13034
BOL:

GROSS 60,780.00 LBS Scale In
TARE 26,680.00 LBS Manual Out
NET 34,100.00

QTY	UNIT	DESCRIPTION		%	RATE	TAX	TOTAL
17.05	TN	C-Soil - EXT	MT	100.00			

Thank you for using Blackfoot Landfill.

I hereby certify that this load does not contain any unauthorized hazardous waste.

Total
Paid
Change
Check#
Recpt #

SIGNATURE:_____

FACILITY COPY

APPENDIX G-1.3

WASTE MANIFESTS – PHASE 1

SPECIAL WASTE DISPOSAL NOTIFICATION

TICKET #1
1ST LOAD
4/22

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator s estimate)	One-time only disposal
Contaminated Soil (2024)	B	ABF13034	23,281 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Roger Mazanec — 4-22-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8 1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [X] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No. and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

TICKET #2
1ST LOAD
4/22

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (207)	B	ABF13034	24,090 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date 4-22-13

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 3 (2016)	B	ABF13034	24.45 K,	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature

4-22-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

TICKET #4
1ST LOAD
4/22

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator s estimate)	One-time only disposal
Contaminated Soil 4 (3045)	B	ABF13034	23,263 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4-22-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Ticket #5
1st Load
4/22

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (LNAPL)	B	ABF13034	33,191 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: ~~Beelman~~ Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

6320/35671
Driver's signature

Date 4-22-13

Site Name: ~~Blackfoot Landfill~~ 6,36,9

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Ticket #6
1st Load
4/22

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (8 (30665)	B	ABF13034	17.673 cy	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Ed. Thomas — 4-22-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 7 (30=7)	B	ABF13034	2" 6.73 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature — 4/22/13 Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsiblities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil & (3045)	B	ABF13034	2343G	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 4-23-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 9 (3024)	B	ABF13034	23,155 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Roger Meanwell
Driver's signature

4-23-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 10 (30666)	B	ABF13034	20,609 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature — Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____

Ticket No.: _____

Ed Townsend — 4-23-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 11 (3037)	B	ABF13034	23,009 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

Date 4/23/13

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 12 (6300)	B	ABF13034	23,01X Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 4/24-13 — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 13 (2077)	B	ABF13034	21,454 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature

4-23-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 14 (2016)	B	ABF13034	23,518 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature — 4-23-13 Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 15 (3024)	B	ABF13034	22,218 Ky	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Roger Mesnarick — 4-23-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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(describe change below) (please use additional paper if necessary)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 1/2 (CS2O)	B	ABF13034	23,645	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — [signature] — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** **1 Racehorse Drive**, **East St. Louis, IL 62205**

[signature] — Date
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: ____
Ticket No.: ____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 17 (3037)	B	ABF13034	23,209 Ky	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

Date 4/23/13

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (8/30/17)	B	ABF13034	23,914 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature — 4-23-13 Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

Date 4-24-13

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 20 (3045)	B	ABF13034	22,864 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature

4-23-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/24/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — 4-24-13 Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10 8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10 8 1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10 8.1 8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10 8.1 7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/24/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — Mailing Address: 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8 1 7(d) (the special waste verification process, generator responsibilities), 329 IAC 10 8 1 9 (The special waste certification process generator responsibilities) and 329 IAC 10-8 1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10 8 1 8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10 8 1 7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 23 (30777)	B	ABF13034	23,000 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/24/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4/24/13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 24 (024)	B	ABF13034	22,555 Kg.	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/24/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Roger Mesmerick — 4-24-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No. and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 25 (30cy)	B	ABF13034	22,075 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/24/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4.24.13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No. _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034	25 CY	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No. _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 27 (3027)	B	ABF13034	27 364 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking

Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

4.25.13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 28 (30666)	B	ABF13034	22,5 [illegible]	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/25/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Ed Tousi — 4-25-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator s estimate)	One-time only disposal
Contaminated Soil 29 (3024)	B	ABF13034	23,618 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking
Roger Mesnarich — Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
4-25-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No. and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator s estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking

Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature

Date

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 32 (36 Yds)	B	ABF13034	24 (40 Yds)	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/25/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 4.25.13 — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Name (print or type)
Signature — Date: 4/25/13

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date: 4-25-13

Site Name: ***Blackfoot Landfill***

Volume Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(c). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 34 (2045)	B	ABF13034	23 (055 Yd)	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's Signature

4-25-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10 28-21 (facility responsibility for special waste disposal), 329 IAC 10-8 1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10 8 1 9 (The special waste certification process generator responsibilities) and 329 IAC 10-8 1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 35 (3037)	B	ABF13034	23,345 K,	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

Date 4/25/13

Site Name: ***Blackfoot Landfill***

Volume Weight: _____

Ticket No _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4-25-13
Date

Site Name: *Blackfoot Landfill*

Volume Weight: _____

Ticket No. _____

Authorized Signature

Date

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San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 37 (3827)	B	ABF13034	33,200 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature
4-25-13 — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature

Date

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4B-50

38

WS# 121853-7
@# 837371

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
	IN5170023498	1	812-854-4173	004369426 FLE

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE
300 HIGHWAY 361, CRANE IN 47522
Generator's Phone: 812-854-6160

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

6. Transporter 1 Company Name
BEELMAN TRUCK COMPANY

U.S. EPA ID Number
ILR000135236

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4340W COUNTY ROAD 1275 N, ROACHDALE IN 46172
Facility's Phone: 765-435-2704

U.S. EPA ID Number
IND 980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls, Solid, 9, PG III	001	DT	23.000	KG	NA
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
HRS TRANS# 5759692 PCB REMEDIATION WASTE, RQ=116, ERG#171 SWMU#17
PCB out of SERVICE DATE: 4/26/13 wt: 22982lbs (10350Kg) Approval #121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brewer
Signature: Thomas J. Brewer
Month: 04 Day: 26 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Materials
Transporter 1 Printed/Typed Name: Richard Crawford
Signature: Richard Crawford
Month: 4 Day: 26 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: DAVID RANEY
Signature:
Month: 04 Day: 26 Year: 13

EPA Form 8700-22 (Rev. 3/05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4B-50 39 WS# 121853-7

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN 5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 004369425 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beckman Truck Company | U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name: | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4340 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2774 | U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls, Solid, 9, PG III	001	DT	22,818	Kg	NA
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste, RQ=116, ERG #171 Subunit #17 Hestmans # 5759693
PCB out of Service Date: 4/26/13 wt: 22836 lbs (5024 ulh) Approval # 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 04 | Day: 26 | Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Leslie Zahner | Signature: | Month: 04 | Day: 26 | Year: 13

Transporter 2 Printed/Typed Name: | Signature: | Month: | Day: | Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month: | Day: | Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: | Signature: | Month: 04 | Day: 26 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 40CY005	B	ABF13034	22 Ton	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date: 4-26-13

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No. and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 41 (2007)	B	ABF13034	20,373 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature

Date 4-26-13

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [✓] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 42 (3037)	B	ABF13034	23,600 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St Louis, IL 62205

Driver's signature — Date 4/26/13

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [✓] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego. CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane. IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight generator's estimate	One-time only disposal
Contaminated Soil	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis. IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- ☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- ☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 44 (2007)	B	ABF13034	24 [illegible]	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date 4-26-13

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator s estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/26/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** **1 Racehorse Drive East St. Louis IL 62205**

Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4B-50

46 WS#127853-7

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5740023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 004369429 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company | U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name: | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4370 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: IND980503870

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls, Solid, 9, PG III	001	DT	22,432	KG	NA
	2.					
	3.					
	4. HES Manif# 5759694					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste, RQ=1lb, ERG #171 Shipper #17
PCB out of Service Date: 4/26/13 ok: 20409kg (44930lb) Approval #121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified packaged marked and labeled/placarded and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 04 | Day: 26 | Year: 13

INT'L

16. International Shipments: ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Charles P. Bubis 3033/38823 | Signature: C.P. Bubis | Month: 4 | Day: 26 | Year: 13
Transporter 2 Printed/Typed Name: | Signature: | Month: | Day: | Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space: ☐ Quantity ☐ Type ☐ Residue ☐ Partial Reject ☐ Full Reject
Manifest Reference Number:
18b. Alternate Facility (or Generator) | U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) | Month: | Day: | Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. | 2. | 3. | 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [illegible] | Signature: | Month: 04 | Day: 26 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

45-50 302/60 47 WS# 121853-7

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

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
	IN5170023498	1	812-854-4173	004369427 FLE

5. Generator's Name and Mailing Address
NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160

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

6. Transporter 1 Company Name: Beelman Truck Company — U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
Heritage Environmental Services
4370 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13 Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls, Solid, 9, PG III	001	DT	23,155	Kg	NA
	2.					
	3.					
	4.					

HGS MANS # S759695

14. Special Handling Instructions and Additional Information
PCB Remediation Waste, RQ=1lb, ERG #171 SWMU #17 wt: 23,155 kg (50980 lb)
PCB out of service date: 4/26/13 Approval # 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable International and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month: 04 Day: 26 Year: 13

INT'L
16 International Shipments ☐ Import to U.S ☐ Export from U.S Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER
17 Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Ed Niedbalski — Signature: Ed Niedbalski — Month: 4 Day: 26 Year: 13
Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY
18 Discrepancy
18a Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [illegible] — Signature — Month: 04 Day: 26 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED

'044-38812 4B-50 48

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023448
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369428 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 47522
Generator's Site Address (if different than mailing address)
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4370 W County Road 1275 N, Roachdale IN 46172
U.S. EPA ID Number: IND980503890
Facility's Phone: 765-435-2704

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls, Solid, 9, PG III	001	DT	23,045	Kg	NA
	2.					
	3.					
	4. HERITAGE # 5759696					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste, RQ-116, ERG #171 SWMU #17
PCB out of Service Date: 4/26/13 (50720lb) Approval #121853-7 WI: 2305545

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 04 Day: 26 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: RICHARD A. MCDEVITT
Signature: Richard A McDevitt
Month: 4 Day: 26 Year: 13
Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: DAVID BANGA
Signature
Month: 04 Day: 26 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4B-50

49

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369432 FLE

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4370 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND 980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls, Solid, 9, PG III	001	DT	23,209	KG	HA
	2.					
	3.					
	4.					

WES TH 5759697

14. Special Handling Instructions and Additional Information: PCB Remediation Waste, RQ=116, ERG #171, Manifest #17
a/c 23200 kg
PCB Out of Service Date: 4/26/13 (5104016) Approval #121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brenn
Signature:
Month: 04 Day: 26 Year: 13

INT'L

16. International Shipments: ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Richard Crawford
Signature: Richard Crawford
Month: 4 Day: 26 Year: 13
Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space: ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name:
Signature:
Month: 04 Day: 26 Year: 13

EPA Form 8700-22 (Rev. 3/05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's Signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No. _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8 1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10 8 1 9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8 1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8 1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 4/30/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

Date 4/30/13

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 5-2 (2024)	B	ABF13034	32,991 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — 4/30/13 Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Roger Mussmann — Driver's signature
4-30-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as. Generator Name. Transporter Name. Mailing Address. Telephone No . and Technical Contact. Changes may also be made in the Certification No.. Verification No.. and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator s estimate)	One-time only disposal
Contaminated Soil 45 (3034)	B	ABF13034	22,520 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 4/30/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Roger Mismarck

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
4-30-13

Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as: Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 54 (---)	B	ABF13034	[illegible]	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — [signature] — 4/30/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034	23,877 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/1/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5-1-13

Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- ☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil SW 033 11	B	ABF13034	22,080 tons	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/1/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — 5-1-13 Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92105

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034	23,727 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 9/1/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 9/1/13 — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 58(3024)	B	ABF13034	21,180 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/1/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Roger Mesnarich — 5-1-13

Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____

Ticket No.. _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 59 (13043)	B	ABF13034	23,030 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — Date: 5/1/13

Company Name: Beelman Trucking
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
Date: 5-1-13

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 60 (3600)	B	ABF13034	22,34[illegible] Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/1/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** 1 Racehorse Drive
East St. Louis, IL 62205

~~Driver's Signature~~ — 5-1-13

Date

Site Name: ***Blackfoot Landfill*** Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (21 Yards)	B	ABF13034	21.15 Tons	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — Date: 5/1/13

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date: 5/1/13

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (13 (2016)	B	ABF13034	20 C.Y. Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — [signature] — 5-1-13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

[signature] — 5-1-13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: ______
Ticket No.: ______

______ ______
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 63(3024)	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — Date: 5/13

Company Name: Beelman Trucking
Roger Mesnarich
Driver's signature

Mailing Address: 1 Racehorse Drive
~~East~~ St Louis, IL 62205
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8-1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8-1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8-1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No. and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8-1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8-1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil (04.(2).43)	B	ABF13034	21,970 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/1/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — 5-1-13 — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034	22,073 kg	

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Name (print or type)

Signature

5/3 — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

5/1/13 — Date

Site Name: ***Blackfoot Landfill***

Volume Weight: _____

Ticket No _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — Date: 5/13

Company Name: Beelman Trucking
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
Date: 5-13-13

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal) 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Phone: 812-854-6160

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process: generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process: generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 08 (2016)	B	ABF13034	23,709 Kg	/

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/2/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — 4-5-13 — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 09130431	B	ABF13034	21,700 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford — 5-2-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

_____ — _____
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process: generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process: generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 70 (3027)	B	ABF13034	32,945 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5-2-13 Date

Site Name: ***Blackfoot Landfill*** Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 71 (3037)	B	ABF13034	22.655 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — 5/2/13 Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 72 (2016)	B	ABF13034	22,934	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Name (print or type)
Signature — 5/2/13 Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5-2-2013 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

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☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 73 (3024)	B	ABF13034	22,390 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Roger Mesnarich
Driver's signature

5-2-2013
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process: generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 74 (3043)	B	ABF13034	22.44.5 Ky	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Lee Ford

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 15 (3037)	B	ABF13034	23,346 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date 5/2/13

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego. CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane. IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 76 (3027)	B	ABF13034	22,291 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Name (print or type)
Signature — Date 5/2/13

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis. IL 62205

Driver's signature
Date 5-2-13

Site Name: ***Blackfoot Landfill***

Volume Weight _____
Ticket No _____

Authorized Signature
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 77 (2010)	B	ABF13034	23,564 KG	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Signature — 5/2/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive East St. Louis, IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume Weight: _____ Ticket No _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(t), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight generator's estimate	One-time only disposal
Contaminated Soil 18 (3024)	B	ABF13034	33,745 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Sullivan — Thomas Brent — 5-2-13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Roger Mesnarich — 5-2-13

Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume Weight: _____

Ticket No: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8-1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8-1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8-1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil -19 (3043)	B	ABF13034	22,673 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Signature — 5-2-13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford
Driver's signature

5-2-13
Date

Site Name: ***Blackfoot Landfill***

Volume Weight _____

Ticket No. _____

_____ _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-6 (the special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied however, those photocopied signatures will be considered to have the same authority as the original signature.

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4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 30(30317)	B	ABF13034	32,000 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Signature — 5/2/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date 5/2/13

Site Name: ***Blackfoot Landfill***

Volume Weight _____

Ticket No _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the first load of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 61 (3043)	B	ABF13034	22,318 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/12
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Crawford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5-3-12
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8 1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8 1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10 8 1 7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 82 (2016)	B	ABF13034	23,345 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — 5-3-13 Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92105

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 53 (Tons)	B	ABF13034	21,360 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Roger Wisniewski — 5-3-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 74 (30 Cy)	B	ABF13034	22,309 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5/3/13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 85 (3027)	B	ABF13034	22,241 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date 5/3/13

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Thomas J. Brent — 5/5/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume Weight: _____

Ticket No: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (the special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-8

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight generator's estimate	One-time only disposal
Contaminated Soil 87 (2014)	B	ABF13034	22,570 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/5/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date 5-5-13

Site Name: ***Blackfoot Landfill***

Volume Weight _____

Ticket No. _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process: generator responsibilities), 329 IAC 10-8.1-9 (the special waste certification process: generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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San Diego, CA 92106

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator s estimate)	One-time only disposal
Contaminated Soil SS (3034)	B	ABF13034	22,282 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brem — Thomas J. Brem — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Roger Miesmaich — 5-3-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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Mailing Address: 1730 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 89 (3037)	B	ABF13034	20,836 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5/3/13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brem

Generator Location: NSA Crane
300 HWY 361
Crane IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight	One-time only disposal
Contaminated Soil 90 (3027)	B	ABF13034	22,518 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brem — Name (print or type)

Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date 5.3.13

Site Name: *Blackfoot Landfill*

Volume-Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (the special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated certification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary):

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as: Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(c). Generators may use their own Disposal Notification Form as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT a certificate for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4A-8

4B

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (estimate)	One-time only disposal
Contaminated Soil 91 (1060179)	B	ABF13034	20,125 KG	✓
Roll OFF dumpsters				

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/12
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume Weight:

Ticket No.

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (the special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an operation verification notice that reflects the change in regulatory status.
(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

~~48~~ 43

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight	One-time only disposal
Contaminated Soil 90 C roll off dumpster	B	ABB [illegible]		

I hereby certify that the above information is [illegible]

Thomas J. Brent

Name (print or type) | Signature | Date

Company Name: Beelman Trucking | Mailing Address: 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature | Date

Site Name: *Blackfoot Landfill*

Authorized Signature | Date

Pursuant to Solid Waste Rule 329 IAC [illegible] for specific waste [illegible] the special waste verification process, generator responsibilities [illegible] responsibilities, at 329 IAC 10-8.1-5(f), all special waste delivered [illegible] waste for generators to provide the disposal facility with [illegible] waste to be disposed. The solid waste disposal process [illegible] with the Special Waste Certification of the special waste [illegible] for the **first load** of the waste. The signature [illegible] however, those photocopied signatures [illegible]

Please check the appropriate box (to be completed by [illegible])

☑ No changes have been made to any [illegible] waste

☐ The following changes to a [illegible] have determined the change [illegible] waste

☐ The following changes to a [illegible] have repealed the waste determination [illegible]

☐ The following change to a [illegible] the waste determination and have [illegible] owner, operator, or permittee of the MSWLF [illegible] (describe change below) [illegible]

Disposal Facilities may [illegible] information areas. Such as: Collected [illegible] Changes may also be made [illegible]

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by [illegible] assist the MSWLF and non-MSWLF [illegible] comply with all regulations [illegible] determinated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 93(3043)	B	ABF13034	1.041 Ls	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Crawford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5-6-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4A-8

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 9-1-(30;7)	B	ABF13034	22,700 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/6/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature — 5-6-13 Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 95 (CNS)	B	ABF13034	17,69? Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 46 (30447)	B	ABF13034	22256Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

5·6·13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 9-1 (3020)	B	ABF13034	22,000 K.G	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent | Thomas J. Brent | 5/6/13
Name (print or type) | Signature | Date

Company Name: Beelman Trucking **Mailing Address:** 1 Racehorse Drive East St. Louis, IL 62205

Driver's signature | Date

Site Name: ***Blackfoot Landfill*** Volume/Weight: _____
Ticket No.: _____

Authorized Signature | Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 96 (3043)	B	ABF13034	22,780 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** **1 Racehorse Drive, East St. Louis, IL 62205**

Richard Crawford — 5-6-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- ☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- ☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 99 (33537)	B	ABF13034	24,182 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature — 5-6-13 Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 100 (3044)	B	ABF13034	22,355 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date 5.6.13

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (IDI: [illegible])	B	ABF13034	17,513 tons	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Michael Tyler — 5-6-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (62 (3030))	B	ABF13034	22,540 Yd	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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(describe change below) (please use additional paper if necessary)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		

I hereby certify that the above information is true and accurate to the best of my knowledge

Name (print or type) Signature Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

44-8

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator s estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/13

Name (print or type) Signature Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8-1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8-1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

105

105 4A-9

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369442 FLE

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane, In 47522
Generator's Site Address (if different than mailing address)
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beelman Truck Company — U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4370 W County Road 1275 N, Roachdale IN 46172 — U.S. EPA ID Number: IND980503890
Facility's Phone: 765-435-2704

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls	001	DT	20,873	Kg	NA
	2.					
	3.					
	4. wt. 21291 kg (46840 lb) HES Tran# 5841311					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 SWMU#47
PCB out of Service Date 5/8/13 Approval Code 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 8 Year 13

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: McKindle Beier — Signature: McKindle Beier — Month 5 Day 8 Year 13
Transporter 2 Printed/Typed Name — Signature — Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: DAVID TALBOT — Signature — Month 05 Day 08 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.
DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

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106 4A-9

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369443 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 47522
Generator's Site Address (if different than mailing address)
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4370 W County Road 1275 N, Roachdale IN 46172
U.S. EPA ID Number: IND980503890
Facility's Phone: 765-435-2704

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls	001	DT	22,691	Kg	NA
	2.					
	3.					
	4. HCS TRANS# 584310 (net: 22709 kg (49960 lb))					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG #171 SWMU #17
PCB Out of Service Date 5/8/13 Approval Code 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 8 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: RICHARD A. McDEVITT
Signature: Richard A. McDevitt
Month: 5 Day: 8 Year: 13
Transporter 2 Printed/Typed Name
Signature
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name
Signature
Month: 05 Day: 08 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-9

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

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4473
4. Manifest Tracking Number: 004369446 FLE

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522

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

Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILD 000135236

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In
U.S. EPA ID Number: IND980503890

Facility's Phone: 765-435-2704

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls	001	DT	22,700	Kg	NA
	2.					
	3.					
	4. wt: 22700kg (49940lb) HFS MANIS# 0841312					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 Sample #17
PCB out of Service Date 08/09/13 Approval Code 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brem
Signature: Thomas J. Brem
Month: 05 Day: 09 Year: 13

16. International Shipments ☐ Import to U.S. ☐ Export from U.S.
Transporter signature (for exports only)

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: JUSTIN KARCH
Signature:
Month: 05 Day: 09 Year: 13
Transporter 2 Printed/Typed Name
Signature
Month: Day: Year:

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Reject
Manifest Reference Number:
18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: DAVID BANGA
Signature:
Month: 05 Day: 09 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-9

108

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369447 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4340 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls	001	DT	22409	KG	NA
	2.					
	3.					
	4. wt: 22609 lbs (4974 01b) HCS Trans # 584313					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1/16 ERG #171 SWMU #17
PCB out of Service Date 5/9/13 Approval Code 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 9 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: R. CHARD A. McDEVITT
Signature: Richard A. McDevitt
Month: 5 Day: 9 Year: 13

Transporter 2 Printed/Typed Name
Signature
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: [illegible]
Signature:
Month: 05 Day: 09 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-9

109

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN 5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4473
4. Manifest Tracking Number: 004369445 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls	001	DT	21,845	Kg	NA
	2.					
	3.					
	4. HRS TMNS H584314 (with 2168215 (4814016))					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=116 ERG#171 Sub#17
PCB out of Service Date 5/9/13 Approval Code 12/853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Prem
Signature: Thomas J. Prem
Month: 5 Day: 9 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only) Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: McKindle Belen
Signature: McKindle Belen
Month: 5 Day: 9 Year: 13

Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: [illegible]
Signature
Month: 10 Day: 01 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 110 (3020)	B	ABF13034	22,955 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 5/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive East St. Louis, IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 5/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4A-8

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/10/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status.
(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4A-8

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034		

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Thomas J. Brent — 5/10/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

5-10-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process. generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status.
(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-9 114

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 004369444 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Site Address (if different than mailing address)
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beelman Truck Company | U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name | U.S. EPA ID Number

8. Designated Facility Name and Site Address: HERITAGE ENVIRONMENTAL SERVICES
4370 W County Road 1275 N, Roachdale IN 46172 | U.S. EPA ID Number: IND980503890
Facility's Phone: 765-435-2704

9a HM	9b U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls	001	DT	22,191	Kg	NA
	2.					
	3.					
	4. HAZTRANS#5041315 Wt: 22177lbs (4868Gal)					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=116 ERG #171 SWMU#17
PCB out of Service Date 5/10/13 Approval Code 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 5 | Day: 10 | Year: 13

INTL

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry exit
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Mckindle Beler | Signature: Mckindle Beler | Month: 5 | Day: 10 | Year: 13
Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. | 2. | 3. | 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name | Signature | Month: 05 | Day: 10 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (if [illegible])

4A-9

115

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369441 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6162
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company 3020/38810
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND 980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN 3432 Polychlorinated Biphenyls	001	DT	23044	Kg	NA
	2.					
	3.					
	4. HFS MANS # 5841316 Wt. 23004 lbs (5040 lb)					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=116 ERG#171 SWMU #14
PCB out of Service Date 5/10/13 Approval Code 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 10 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: David Baker
Signature:
Month: 5 Day: 10 Year: 13
Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Reject ☐ Full Reject
Manifest Reference Number:
18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: David Baker
Signature:
Month: 05 Day: 10 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-9

116

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369440 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-654-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4340 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503830

9a HM	9b U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls	001	DT	22,755	Kg	NA
	2.					
	3.					
	4.					

4. est 22718 kg (49980 lb)

HRS TRANS # 584317

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=116 ERG #171 SLINU #17
PCB out of Service Date 5/10/13 Approval Code 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 10 Year: 13

INT'L

16. International Shipments: ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A. MCDEVITT
Signature: Richard A. McDevitt
Month: 5 Day: 10 Year: 13

Transporter 2 Printed/Typed Name
Signature
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space: ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name
Signature
Month: 05 Day: 10 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369439 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale, IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls	001	DT	23,000	Kg	NA
	2.					
	3.					
	4. HCS MANIFEST# 5841318 cn 23036 kg (50680 lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 SWMU#17
PCB out of Service Date 5/13/13 Approval Code 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 13 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: RICHARD A. MCDEVITT
Signature: Richard A. McDevitt
Month: 5 Day: 13 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue P R ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [illegible]
Signature:
Month: 05 Day: 13 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)326-1221	000530096WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9583
Facility's Phone: (765)435-2704

U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	20,554	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/13/13
1.W7_Q837371_T#5847931

CL: 20545ICS (45200lb)

ERI:HERITAGE [3472377]

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 13 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Robert Richardson — Signature: — Month 5 Day 13 Year 13
Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: [illegible] — Signature: — Month 05 Day 13 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

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#69

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)926-1221	000530094WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 4 522-4000
Generator's Phone: (812)854-61 1

Generator site Address (if differ t than mailing address)
NSA RANE / T OMAS B
300 IGHWAY 3 1
CRAN , IN 47 2-4000
GEN: 121852

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD207347515

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4970 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9599
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980509820

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171		DT	18,727	K	
	2.					
	3					
	4					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF R VAL FROM SERVICE 5 / 13 13
1.W7_0937271_TMS

wt (8718 kg) (41801b)

ERI:HERITAGE 1347L375I

15 **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 13 Year 13

INT'L

16 International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Dick Smith — Signature — Month 5 Day 13 Year 13
Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: DAVID PARKA — Signature — Month 05 Day 13 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

US 139 120

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)826-1221	000530095WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: IZ1853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	19,527	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/13/13
1.W7_Q337371_T#5847929
cl: 19
ETI:HERITAGE

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packed, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: [signature] — Month/Day/Year:

INTL

16. International Shipments ☐ Import to U.S.
Transporter signature (for exports only): Sig

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Scott Fuller — Sig: [signature] — Month/Day/Year: 5/13/13
Transporter 2 Printed/Typed Name — Sig — Month/Day/Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐
18b. Alternate Facility (or Generator)
Facility's Phone:
18c. Signature of Alternate Facility (or Gen)

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and re

1.	2.	3.	
H132			

20. Designated Facility Owner or Operator Certification of receipt of hazardous materials covered by the manifest except as noted in
Printed/Typed Name: David Rama — Signature: [signature] — Month/Day/Year: 05/13/13

EPA Form 8700-22 (Rev. 8-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIR

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of 1
3. Emergency Response Phone: (800)326-1221
4. Manifest Tracking Number: 000530097WAS

5. Generator's Name and Mailing Address:
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address):
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name: — U.S. EPA ID Number:

8. Designated Facility Name and Site Address:
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	19,718	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/13/13
1.W7_Q837371_T#5847933
wt 19782 kg (43560 lb)
ERI:HERITAGE 10472578

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: [signature] — Month 5 Day 13 Year 13

16. International Shipments: Import to U.S. / Export from U.S. — Port of entry/exit: — Transporter signature (for exports only): — Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: [handwritten name] — Signature: [signature] — Month 5 Day 13 Year 13
Transporter 2 Printed/Typed Name: — Signature: — Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space: Quantity / Type / Residue / Partial Rejection / Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. H132 — 2. — 3. — 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [handwritten name] — Signature: [signature] — Month 05 Day 13 Year 13

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4473
4. Manifest Tracking Number: 004369438 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
A370 W County Road 1275N, Roachdale, In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls Solid, 9, PG III	001	DT	22,927	Kg	NA
	2.					
	3.					
	4. HHS Trans # 5841319 (M: 22955K) (50501b)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=116 ERG #171 SWMU #17
PCB out of Service Date 5/13/13 Approval Code 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 13 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Mckindle Beler
Signature: Mckindle Beler
Month: 12 Day: 13 Year: 13
Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1: 2: 3: 4:

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name:
Signature:
Month: 05 Day: 13 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-9

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

Form Approved, OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5700023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369436 FLE

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 47522
Generator's Site Address (if different than mailing address):
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4370 W County Road 1275N, Roachdale, IN 46172
U.S. EPA ID Number: IND980503890
Facility's Phone: 765-435-2704

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls Solid, 9, PG III	001	DT	23,027	Kg	NA
	2.					
	3.					
	4. HRS MANIFEST 584 1321 Wt: 22482 kgs (50560 lbs)					

14. Special Handling Instructions and Additional Information:
PCB Remediation Waste, RQ=1lb ERG #171 SWMU #17
PCB Out of Service Date 5/13/13 Approval Code 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 13 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: RICHARD A. MCDEVITT
Signature: Richard A. McDevitt
Month: 5 Day: 13 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: DAVID PRICE
Signature:
Month: 05 Day: 14 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-9 #104. 124

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

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
	IN5170023498	1	(800)326-1221	000530098WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB), ERG#171		DT	20,518	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5 / 13 / 13
1,W7_0807271_T#5847935

M: 20500 lbs (9510 kg)

ERI:HERITAGE [3472379]

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 13 Year 13

INT'L

16. International Shipments ☐ Import to U.S
Transporter signature (for exports only):

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Robert Richardson — Signature: Robert Richardson — Month 5 Day 13 Year 13
Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and re

1.	2.	3.	4.
H132			

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [illegible] — Signature: [illegible] — Month 05 Day 13 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-9 125 ω 302

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of 1
3. Emergency Response Phone: (800)325-1221
4. Manifest Tracking Number: 000530099WAS

5. Generator's Name and Mailing Address:
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-3160

Generator's Site Address (if different than mailing address):
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
G 1: 11185

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name: — U.S. EPA ID Number:

8. Designated Facility Name and Site Address:
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	18,473	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5 / 13 / 13
1.WT_0207371_T#5847327
ERG:HERITAGE [2472300]
cd: 18609kg (40940)

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 13 Year 13

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Nick Smith — Signature: [signature] — Month 5 Day 13 Year 13
Transporter 2 Printed/Typed Name: — Signature: — Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. H132 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [signature] — Signature: [signature] — Month 05 Day 13 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

GENERATOR — INT'L — TRANSPORTER — DESIGNATED FACILITY

4A-9 . . (139) ~~126~~ 126

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

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170022498	1	812-526-1221	000530100WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE THOMAS BRENT
4000
4-5150

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121553

TRANSPORTER

6. Transporter 1 Company Name: RT, INC — U.S. EPA ID Number: PAD987375715

7. Transporter 2 Company Name — U.S. EPA ID Number:

DESIGNATED FACILITY

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICE
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980525281

9a. HM	Proper Shipping Name, Hazard Class, ID Number.	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	POLYCHLORINATED BIPHENYLS, (PCB REMEDIATION WASTE), (RQ =	1	DF	19,618	I	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/13/13
1.W7_Q837371_T#5847939

wt: 19555 lbs (4302 kg)

ERI:HERITAGE 13472

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month: 5 — Day: 13 — Year: 13

INTL

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Scott Fuller — Signature: Scott F — Month: 5 — Day: 13 — Year: 13

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name — Signature — Month: 05 — Day: 13 — Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-9 127

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170013498	1	(300)326-1221	000530101WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	19,855	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/13/13
1.W7_Q837371_T#5847941

cal: 19818K, (43600lb)

ERI:HERITAGE [3472382]

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 13 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Dede Smith — Signature: Dede Smith — Month 5 Day 13 Year 13

Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: [illegible] — Signature: [illegible] — Month 05 Day 13 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-9

128

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369433 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA CRANE, 300 Highway 361, CRANE IN 47522
Generator's Site Address (if different than mailing address):
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR 000135236

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: HERITAGE ENVIRONMENTAL SERVICES, 4370 W County Road 1275 N, Roachdale, IN 46172
U.S. EPA ID Number: IND 980503890
Facility's Phone: 765-435-2704

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls Solid, 9, PG III	001	DT	21,891	Kg	NA
	2.					
	3.					
	4. Wt: 21882 lbs (4814 cib) HHS Manifest #5841320					

14. Special Handling Instructions and Additional Information: PCB REMEDIATION WASTE, RQ=116, ERG #171 SWMU #17
PCB out of Service Date 5/13/13 Approval Code #121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am Exporter I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brew
Signature: Thomas J. Brew
Month: 5 Day: 13 Year: 13

INTL

16. International Shipments: ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: William Morris
Signature: William Morris
Month: 5 Day: 13 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space: ☐

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name:
Signature:
Month: 05 Day: 14 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-9

129

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

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369430 FLE

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 47522
Generator's Site Address (if different than mailing address):
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beckman Truck Company
U.S. EPA ID Number: ILR000135256

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4340 W County Road 1275 N, Roachdale IN 46172
U.S. EPA ID Number: IND980503870
Facility's Phone: 765-435-2704

9a HM	9b U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls, Solid, 9, PG III	001	DT	19,882	Kg	NA
	2.					
	3.					
	4. HFS Manif # 5K41322 wt: 19864 KG (43700 lb)					

14. Special Handling Instructions and Additional Information
PCB REMEDIATION WASTE, RQ=1lb, ERG #171 SWMU #17
PCB out of SERVICE DATE: 5/13/13 Approval Code #121853-17

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby d... contents of this consignment are fully and accurately described above by the proper shipping name and are class... marked and labeled/placarded and are in all respects... transport according to applicable international and national governmental regulations. If export shipment and I a... Exporter, I certify that the contents of this consignment conform t... of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 4...) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 13 Year: 13

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only):

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: mcKindle Beler
Signature: McKindle Beler
Month: 5 Day: 13 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

18. Discrepancy

18a. Discrepancy Indication Space: Quantity ☐ Type ☐
X

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: DAVID RAICA
Signature:
Month: 05 Day: 14 Year: 13

EPA Form 8700-22 (Rev. 3-05). Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-7

130

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: I.. 1700234.
2. Page 1 of: 1
3. Emergency Response Phone: (800) 457-1
4. Manifest Tracking Number: 000530102WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE , TH , S PRENT
000
4-5100
G

Generator's Site Address (if different than mailing address)
N A CRANE / TH . I -
300 HIGHWAY 361
CRANE, IN 47522-5000
GEI: 121853

6. T C
RT, INC
U.S. EPA ID Number: FAD987347515

7. Transporter 2 Company Name
U.S. EPA ID Number

8. F N ess
ENTAL SERVICES
D 1275 N
12-9593
F
U.S. EPA ID Number

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	I E	1	D	19,273	L	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/13/13
1.W7_Q837371_T#5947943

wt 19273 KG (42490LB)

ERI:HERITAGE [3472383]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 13 Year: 13

INT'L

16. International Shipments ☐ Import to U.S.
Transporter signature (for exports only)

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Nick South
Signature: Nick South
Month: 5 Day: 13 Year: 13
Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space
18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone
18c. Signature of Alternate Facility (or Generator)

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and r
1. H132 2. 3.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [illegible]
Signature:
Month: 05 Day: 14 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-7 302-5 131

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UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
	IN5170023498	1	(800)326-1221	000530103WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
(812)854-6160
Generator's Phone:

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone (765)435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	18,509	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/14/13
1.W7_Q837371_TH5847945

cl 18518lbs (40740lb)

ERI:HERITAGE [3472384]

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 14 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Dale Smith — Signature — Month 5 Day 14 Year 13
Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2.	3	4
H132			

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name — Signature — Month 05 Day 14 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-7 "" #104

132

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)826-1221	000530104WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522 4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
301 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	21,482	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5 / 14 / 13
1,W7_0337371_T#5847947

wt. 21482 lbs (9726 kg)

ERI:HERITAGE [3472385]

15 GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 14 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Robert Richardson — Signature: Robert Richardson — Month 5 Day 14 Year 13
Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal and recycling systems)

1	2	3	4
H132			

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [illegible] — Signature: [illegible] — Month 05 Day 14 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-7 ~~135~~ 134 133

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023496	1	(800)326-1221	000530105WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
(812)854-6160
Generator's Phone:

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	20,618	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/14/13
1.W7_Q837371_T#5847949

cl: 20645lcs (45420lb)

ERI:HERITAGE [3472386]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month: 5 Day: 14 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Scott Fuller — Signature: Scott — Month: 5 Day: 14 Year: 13

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Residue ☐ Partial Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: David Brown — Signature — Month: 05 Day: 14 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-7

134

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369434 FLE

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 47522
Generator's Site Address (if different than mailing address):
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4340 W County Road 1275 N, Roachdale IN 46172
U.S. EPA ID Number: IND980503890
Facility's Phone: 765-435-2704

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls, Solid, 9, PG III	001	DT	22,282	Kg	NA
	2.					
	3.					
	4. gr. 22273kg (49000lb) HESTRANS# 841323					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste, RQ=1lb, ERG#171 SWMU#17
PCB Out of Service Date: 5/14/13 Approval Code #121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packed, marked and labeled/placarded and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am Exporter I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgement of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brem
Signature: Thomas J. Brem
Month: 5 Day: 14 Year: 13

16. International Shipments: ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: William Morris
Signature: William Morris
Month: 5 Day: 14 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

18. Discrepancy

18a. Discrepancy Indicator Space ☐

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

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

Printed/Typed Name: Dan Brea
Signature:
Month: 05 Day: 14 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STAT (IF REQUIRED)

4A-7

135

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369449 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 47522
Generator's Site Address (if different than mailing address):
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4340 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls Solid, 9, PG III	001	DT	22,173	KG	NA
	2.					
	3.					
	4. Wt: 22,173K (48780lb) HFS Manif # 581324					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=1lb, ERG #171 SWMU #17
PCB out of Service Date 5/14/13 Approval Code #121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 14 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/ex.t.:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Mckindle Beler
Signature: Mckindle Beler
Month: 5 Day: 14 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: Dawn Baker
Signature:
Month: 05 Day: 14 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-7

136

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369437 FLE

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: BEELMAN Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: HERITAGE ENVIRONMENTAL SERVICES
4370 W County Road 1275N, Brazildale, IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls Solid, 9, PG III	001	DT	22,827	Kg	NA
	2.					
	3.					
	4. HERITAGE#S841325 wt: 22827 kg (50220 lb)					

14. Special Handling Instructions and Additional Information
PCB REMEDIATION WASTE, RQ=1lb ERG #171 SLWMU #17
PCB out of SERVICE Date 5/14/13 Approval Code 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter: I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas T. Brent
Signature: Thomas T. Brent
Month: 5 Day: 14 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A MCDEVITT
Signature: Richard A. McDevitt
Month: 5 Day: 14 Year: 13

Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: DAVID RAMA
Signature:
Month: 05 Day: 14 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-7 137

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023496	1	(800)328-1221	000530107WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
(812)854-6160
Generator's Phone:

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	19,564	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/14/13
1.W7_Q237371_I#5847958
a/c: 19573Kg (43060lb)
ERI:HERITAGE [8472388]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 14 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Nick Smith — Signature — Month 5 Day 14 Year 13
Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name — Signature — Month 05 Day 14 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-7 302-5 138

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)326-1221	000530106WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	19,664	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/14/13
1.W7_0837271_T#5847951
GM: 19755KG (43460LB)
ERI:HERITAGE [3472387]

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month: 5 — Day: 14 — Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Nate Smith — Signature: [signature] — Month: 5 — Day: 14 — Year: 13

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name — Signature — Month: 05 — Day: 14 — Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

104 139

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

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)328-1221	000530108WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503990

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	21,664	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/14/13
1.W7_0837371_T#5847955

M:2169/145 (4/7/2014)

ERI:HERITAGE [3472389]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month: 5 Day: 14 Year: 13

INT'L

16. International Shipments ☐ Import to U.S ☐ Export from U.S Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Robert Richardson — Signature — Month: 5 Day: 14 Year: 13

Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name — Signature — Month: 05 Day: 14 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A6 . . 157 140

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

Form Approved. OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST	1 Generator ID Number 1700224	2 Page 1 of 1	3 Emergency Response Phone (800)326-1221	4. Manifest Tracking Number 000530109WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE TRANSPORT
SOUTH [illegible]

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMA [illegible]
[illegible]
CRANE,
IN 1

G

8 T C N

7. Transporter 2 Company Name | U.S. EPA ID Number

8 F

F

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X		1	TC	20,418		
	2.					
	3.					
	4.					

wt 20436 KG (44960 lb)

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 5 | Day: 14 | Year: 13

INTL

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only) Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Scott Fuller | Signature: Scott | Month: 5 | Day: 14 | Year: 13

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number

18b. Alternate Facility (or Generator) | U.S. EPA ID Number

Facility's Phone

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: [illegible] | Signature | Month: 05 | Day: 14 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 141

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170022498
2. Page 1 of 1
3. Emergency Response Phone: (800)326-1221
4. Manifest Tracking Number: 000530110WAS

5. Generator's Name and Mailing Address: NSA CRANE THOMAS BRENT 1000 ... 54-5160

Generator's Site Address (if different than mailing address): NSA CRANE / THOMAS BRENT 300 HIGHWAY 361 CRANE, IN 47522-4000 GEN: 1...

6. Transporter 1 Company Name: ...RT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address: ...ENTAL SERVICES ... D 1275 N ... 72-9593 ... 5-2704 — U.S. EPA ID Number

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.
X	...LYCHLORINATED BIPHENYLS, PCB REMEDIATION WASTE), (RQ =		DT	18,400	K
	2.				
	3.				
	4.				

14. Special Handling Instructions and Additional Information: EARLIEST DATE OF R... OF 5/15/13 1.W7_QE...71_THE.

364KG (40400 lb) (3472...)

15. GENERATOR'S/OFFEROR'S CERTI... marked and labeled/placarded, and a... Exporter, I certify that the contents of... I certify that the waste minimization s... ...fied, packaged ... the Primary

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: [signature] — Month Day Year: 5 15 13

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit: Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Dick Smith — Signature: [signature] — Month Day Year: 5 15 13
Transporter 2 Printed/Typed Name — Signature — Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and r...
1. H132 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [signature] — Signature: [signature] — Month Day Year: 05 15 13

4A-6 · 302-5 142

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023488	1	(800)926-1221	000530111WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	18,191	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/15/13
1.W7_0837371_I#5847961
N: 18200 KG (40040 LB)
ERI:HERITAGE [3472392]

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: [signature] — Month 5 Day 15 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Nate Smith — Signature: [signature] — Month 5 Day 15 Year 13

Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: [illegible] — Signature: [signature] — Month 05 Day 15 Year 13

EPA Form 8700-22 (Rev. 3-05). Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

143

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 004369431 FLE

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company | U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services, 9370 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls, Solid, 9, PG III	001	DT	22318	Kg	NA
	2.					
	3.					
	4. HRS Trans # 5847857 wt: 22327 lbs (4912014)					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste, RQ=116, ERG#171 SWMU#17
PCB out of Service Date: 5/15/13 Approval Code#121853

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 5 | Day: 10 | Year: 13

INT'L

16. International Shipments ☐ Import to U.S ☐ Export from U.S Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: By RICHARD A. McDEVITT | Signature: Richard A. McDevitt | Month: 5 | Day: 15 | Year: 13
Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) | U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. | 2. | 3. | 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name | Signature | Month: 05 | Day: 15 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-60 . 104 144

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170026498	1	(800)328-1231	000530112WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121253

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987947515

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503990

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGII,(PCB REMEDIATION WASTE),(RQ = 1 LB), ERG#171	1	DT	21,145	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/15/13
1.W7_083071_T#5847963
wt: 21145kg (46520lb)
ERI:HERITAGE 13472993

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas P. Brent — Signature: — Month/Day/Year: 5/15/13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Robert Richardson — Signature: — Month/Day/Year: 5/15/13

Transporter 2 Printed/Typed Name — Signature — Month/Day/Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number:

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month/Day/Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name — Signature — Month/Day/Year: 05/15/13

EPA Form 8700-22 (Rev. 3-05). Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 139 145

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)326-1221	000530113WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC
U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4770 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	20,009	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/15/13
1.W7_Q837371_T#5847965

ERI:HERITAGE [34723PA]

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 15 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Scott Fuller
Signature: Scott
Month: 5 Day: 15 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name:
Signature:
Month: 05 Day: 15 Year: 13

EPA Form 8700-22 (Rev. 3-05). Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

146

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: INS170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4123
4. Manifest Tracking Number: 004369450 FLE

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Service
4370 W Caudy Road 1275 N, Rensdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980513890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	1. RQ, UN3432, Polychlorinated Biphenyls solid, 9 PG III	001	DT	22436	Kg	NA
	2.					
	3.					
	4. HGS TRANS# 5847859 net: 22445kg (49380lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste, RQ=116, ERG #171 SWMU #17
PCB out of Service Date 5/15/13 Approval Code #121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas F. Brewer
Signature: Thomas F. Brewer
Month: 5 Day: 15 Year: 13

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: William Morris
Signature: William Morris
Month: 5 Day: 15 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: D Ann Brba
Signature:
Month: 05 Day: 15 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

147

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369452 FLE

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160

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

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Roachdale IN 46172
U.S. EPA ID Number:
Facility's Phone: 765-435-2704

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls solid, 9 PG III	001	DT	18,882	Kg	NA
	2.					
	3.					
	4. IHS TRANS#6847860 wt: 18900 lbs (4158016)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste, RQ = 1lb, ERG #171 SLUMU #17
PCB out of Service Date _____ Approval Code #121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 15 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Material(s)

Transporter 1 Printed/Typed Name: McKindle Beler
Signature: McKindle Beler
Month: 5 Day: 15 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name:
Signature:
Month: 05 Day: 15 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6. 302-5 148

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)326-1221	000530114WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	20,027	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/15/13
1.W7_Q837371_T#5847967
cl 20027 kg (44000 lb)
ERI:HERITAGE [3472395]

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport accord ng to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 15 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Nate Smith — Signature: Nate Smith — Month 5 Day 15 Year 13
Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name — Signature — Month 05 Day 15 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 . 1 BOC 149

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170033498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: (87 ...-1.2 | 4. Manifest Tracking Number: 000530115WAS

GENERATOR

5. Generator's Name and Mailing Address:
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
(812)854-6160
Generator's Phone

Generator's Site Address (if different than mailing address):
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121858

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC | US EPA ID Numc: I I 3475..

7. Transporter 2 Company Name | US EPA ID Nmbe

8. Designated Facility Name and Site Address:
HERITAGE ENVIRONMENTAL SERVICES
477 W COUNTY ROAD 1275 N
ROA HDALE, IN 46172-9593
(765)435-2704
Facility's Phone

US EPA ID Num: IND ...

9a HM	9b U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. P, UN3432, POLYCHLORINATED BIPHENYLS, SOLID, 9, PGIII, (PCB REMEDIATION WASTE), (RQ = 1 LB, ERG#171	1	DT	19,118	L	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information:
EARLIEST DATE OF REMOVAL FROM SERVICE 5/15/13 wt: 19118 LBS (9206 lb) ERI: HERITAGE
cl: ~~19836 LBS~~ (9364 lb) [247339]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: [signature] | Month: 5 | Day: 15 | Year: 13

INT'L

16. International Shipments: ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Nick Smith | Signature: [signature] | Month: 5 | Day: 15 | Year: 13

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space: ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: [illegible] | Signature: [signature] | Month: 05 | Day: 15 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE

4A-6 150

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4473 | 4. Manifest Tracking Number: 004369457 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company | U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name: | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Reachdale IN 46172
Facility's Phone: 765-435-3704 | U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls Solid, 9 PG III	001	DT	22,855	001	NA
	2.					
	3.					
	4. C.I. 22891/KS (503601b) HSTRAMS# 5847861					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste, RQ=1lb, ERG #171 SWMU #17
PCB out of Service Date 5/15/13 - Approval Code #72185-3-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/p acarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 5 | Day: 15 | Year: 13

INT'L

16. International Shipments ☐ Import to U.S ☐ Export from U.S Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: RICHARD A. MIDEVIK II | Signature: Richard A. Midevik II | Month: 5 | Day: 15 | Year: 13
Transporter 2 Printed/Typed Name: | Signature: | Month: | Day: | Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) | U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. | 2. | 3. | 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [illegible] | Signature: [illegible] | Month: 05 | Day: 15 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number	2. Page 1 of	ergency Response Phone	
	IN5 [illegible]	1	(80 [illegible] 2E-1221	000530116WAS

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS *EPNT
300 HIGHWAY 361
[illegible]

nerator's Site Address (if different than mailing address)
A CRANE / THOMAS DEPNT
C HIGHWAY 361

6 T 1C

7 T

8 De

F

GENERATOR

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X		1	DT	20,709	P	

15 **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 5 | Day: 15 | Year: 13

INT'L

16 International Shipments ☐ Import to U.S.
Transporter signature (for exports only ng

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Robert Richardson | Signature: Robert Richardson | Month: 5 | Day: 15 | Year: 13
Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number
18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone
18c. Signature of Alternate Facility (or Generator) | Month | Day | Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
3.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [illegible] | Signature | Month: 05 | Day: 15 | Year: 13

[illegible] S ATEDT

4A-6 BSG 152 +52

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)326-1221	000530117WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRE T
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	20,100	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/15/13
1.W7_Q837371_T#5847973
wt: 20100kg (44220lb
ERI:HERITAGE (3472398)

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas Brent — Month: 5 Day: 15 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Scott Fuller — Signature: Scott F — Month: 5 Day: 15 Year: 13

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: [illegible] — Signature: [illegible] — Month: 05 Day: 15 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

153

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369453 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4340 W County Road 1275N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls solid, 9, PG III	001	DT	22,691	Kg	NA
	2.					
	3.					
	4. HFS Trans# 5847862 (M:22760kg (49940lb)					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=1lb ERG#171 SUMU#17
PCB Out of Service Date 5/15/13 Approval Code 137853-1

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 15 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: William Morris
Signature: William Morris
Month: 5 Day: 15 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name:
Signature:
Month: 05 Day: 15 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

154

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

Form Approved OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369455 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Roachdale In
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503810

9a HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls	001	DT	23,055	Kg	NA
	2.					
	3.					
	4. 4M1 23045125 (50700lb) HCS TRANS # 5847863					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=116 ERG #171 SUMU#17
PCB out of Service Date 5/15/13 Approval Code 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 15 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: McKindle Beler
Signature: McKindle Beler
Month: 5 Day: 15 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: David Ralph
Signature:
Month: 05 Day: 15 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 302 155

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)326-1221	00053011 8WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-5000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD 373 515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ - 1 LB),ERG#171	1	DT	18,927	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/16/13
1.W7_0837371_I#5847975

cl 1883619 (414401)

ERI:HERITAG [ ]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month: 5 — Day: 16 — Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Nick Smith — Signature — Month: 5 — Day: 16 — Year: 13

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name — Signature — Month: 05 — Day: 16 — Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 302-5 156

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)326-1221	000530119WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
(812)854-6160
Generator's Phone:

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987947515

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4770 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND[illegible]

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	19,491	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/16/13
1.W7_Q837271_T#5847977
cn: 19482kg (42860lb)
EPI:HERITAGE

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month: 5 — Day: 16 — Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Nate Smith — Signature: [signature] — Month: 5 — Day: 16 — Year: 13

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: [illegible] — Signature: [signature] — Month: 05 — Day: 16 — Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 139 +ST 157

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)326-1221	000530120WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 12185

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	20,464	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/16/13
1.W7_Q837371_T#5947979
cl: 2049514 (4498016)
ERI:HERITAGE [J 7.4 1]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month: 5 — Day: 16 — Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Scott Fuller — Signature: Scott — Month: 5 — Day: 16 — Year: 13

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4
H132			

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

Printed/Typed Name: David BANTA — Signature — Month: 05 — Day: 16 — Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6.

158

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369451 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-8704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	18,344	Kg	NA
	2.					
	3.					
	4. HFS MAM # 5847864					

wt: (18373 K) (40420 lb)

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1L6 ERG #171 SWMU #17
PCB Out of Service Date 5/16/13 Approval Code 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brown
Signature: Thomas J. Brown
Month: 5 Day: 16 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: McKinzie Beler
Signature: McKinzie Beler
Month: 5 Day: 16 Year: 13
Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a
Printed/Typed Name: [illegible]
Signature:
Month: 05 Day: 16 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 #104 159

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)328-1221	000530121WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
(812)854-6180
Generator's Phone:

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

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number:

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4770 W COUNTY ROAD 1475 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435 2704
U.S. EPA ID Number: IND980503390

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	20,564	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/16/13
1.W7_Q937371_T#5847961
wt: 20582kg (45280lb)
ERI:HERITAGE

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month: 5 — Day: 16 — Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Robert Richardson — Signature: Robert Richardson — Month: 5 — Day: 16 — Year: 13

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: David Bahr — Signature — Month: 05 — Day: 16 — Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

160

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023478 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 004369454 FLE

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160

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

6. Transporter 1 Company Name: Beelman Truck Company | U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls solid, 9, PG III	001	DT	21,818	Kg	NA
	2.					
	3.					
	4. UN3432 TRANS # 5847865					

m: 21836kg (48040lb)

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ = 116 ERG #171 SW/MU #17
PCB Out of Service Date 5/16/13 Approval Code 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature | Month: 5 | Day: 16 | Year: 13

INT'L

16. International Shipments ☐ Import to U.S ☐ Export from U.S Port of entry/exit
Transporter signature (for exports only): Date leaving U.S

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: William Morris | Signature: William Morris | Month: 5 | Day: 16 | Year: 13

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name | Signature | Month: 05 | Day: 16 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

161

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	812-854-473	004369456 FLE

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160

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

6. Transporter 1 Company Name: Beelman Truck Company — U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4340 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704 — U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls solid, 9, PG III	001	DT	22,909	KG	NA
	2.					
	3.					
	4. HRS MANIF # 5847866					

wt 22882lbs (50340lbs)

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 SW846#17
PCB Out of Service Date 5/16/13, Approval Code#121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brea — Signature: Thomas J. Brea — Month 5 Day 16 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A. McDEVITT — Signature: Richard A. McDevitt — Month 5 Day 16 Year 13

Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name — Signature — Month 05 Day 16 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 307 162

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)328-1221	000530122WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGH AY 361
CRANE, IN 7522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4 0
GEN: 121855

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347535

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	20,336	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/17/13
I.M7_0827371_I#5847983
cyl: 2034514 (4436013)
ERI:HERITAGE [3472403]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name	Signature	Month	Day	Year
Thomas J. Brent	Thomas J. Brent	5	17	13

INT'L

16. International Shipments ☐ Import to U.S ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
Dick Smith	Dick Smith	5	17	13
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month / Day / Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name	Signature	Month	Day	Year
DAVID BARCA		05	17	13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 302-5 163

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023499	1	(800)326-1221	000530123WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
(812)854-616
Generator's Phone:

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47[illegible] -
GEN: 121C53

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: I I [illegible]

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	19,882	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/17/13
1.W7_0837371_I#5847985
ERI:HEPITAGE

alt: 1987365 (4372016)

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas F. Brent — Signature: Thomas F. Brent — Month: 5 Day: 17 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Dale Smith — Signature: Dale Smith — Month: 5 Day: 17 Year: 13

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: [illegible] — Signature — Month: 05 Day: 17 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 139 ~~164~~ 164

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	[illegible]326-1221	000530124WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 122351

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number:

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4970 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: INR000038990

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	19,964	K	
	2.					
	3.					
	4					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5 17 13
1.W7_0937371_T#5847987

wt. 19973kg (43940lb)

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 17 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Scott Fuller — Signature: [signature] — Month 5 Day 17 Year 13

Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e. codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: [illegible] — Signature: [signature] — Month 05 Day 17 Year 13

EPA Form 8700-22 (Rev. 3-05). Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 #104 165

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023492	1		000530125WAS

GENERATOR

5. Generator's Name and Mailing Address
N-A CRANE / THOMAS BRENT
300 HIGHWAY 3E1
CRANE, N 47E -
(81_) [illegible]

Generator's S te Address (if different than mailing address)
[illegible]

Generator's Phone:

6. Transporter 1 Company Name
U.S. BULK TRANS ORP, [illegible]

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 4E172-9593
(765)435-2704

U.S. EPA ID Number [illegible]

Facility's Phone:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED IPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(P[illegible] = 1 LB),ERG#171	1	DT	21,191	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5 17 13
1.W7_Q937371_T#5847989

wt: 21200 lbs (4664 0 lb)
[3472405]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name	Signature	Month	Day	Year
Thomas J. Brent	Thomas J. Brent	5	17	13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only) Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
Robert Richardson	Robert Richardson	5	17	13
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]	05	17	13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

166

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 004369448 FLE

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company | U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name | U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1 RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	22,473	Kg	NA
	2.					
	3.					
	4 HES TRANS #584786) mt: 22500kg (49500lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=116 ERG #171 SWMU #17
PCB out of Service Date 5/17/13 Approval Code 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature | Month 5 | Day 17 | Year 13

INT'L

16. International Shipments ☐ Import to U.S ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only) Date leaving U.S

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: William Morris | Signature: William Morris | Month 5 | Day 17 | Year 13

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

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

Printed/Typed Name | Signature | Month 05 | Day 21 | Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

167

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	812-854-4173	004369459 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 46172
Generator's Phone: 812-854-6160

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

6. Transporter 1 Company Name: Bellmark Truck Company — U.S. EPA ID Number: ILR001352236

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N. Roachdale IN 46172 — U.S. EPA ID Number:
Facility's Phone: 765-435-2704

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	22,750	Kg	NA
	2.					
	3.					
	4. ITS TRANS# 5847868 wt 22755 KS (50060#)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1/16 ERG #171 SWMU #17
PCB out of Service Date 5/17/13 Approval Code # 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name: Thomas J. Brence — Signature: [signature] — Month 5 Day 17 Year 13

INTL

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A. McDEVITT — Signature: [signature] — Month 5 Day 17 Year 13

Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2.	3.	4.

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

Printed/Typed Name: [illegible] — Signature: [signature] — Month 05 Day 17 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

168

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369458 FLE

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 46172

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

Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beelman Truck Company — U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name: / — U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4370 W County Road 1275N, Roachdale In 46172 — U.S. EPA ID Number: IND980503890

Facility's Phone: 765-435-2704

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	2,464	Kg	N/A
	2.					
	3.					
	4. HES TRANS # 5847869 ... 2248 kg (4946 lb)					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=1 16 ERG #171 SWMU #17

PCB out of Service Date 5/17/13 → Approval Code # 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brown — Signature: [signature] — Month 5 Day 17 Year 13

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: McKindle Beler — Signature: McKindle Beler — Month 5 Day 17 Year 13
Transporter 2 Printed/Typed Name: — Signature: — Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number:

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: David Barba — Signature: [signature] — Month 05 Day 17 Year 13

GENERATOR / INT'L / TRANSPORTER / DESIGNATED FACILITY

4A-6 139 ~~169~~ 169

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: (800)328-1221
4. Manifest Tracking Number: 000530126WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BPEN
300 HIGHWAY 361
CRANE, IN 47522-4100
Generator's Phone: (812)854-6167

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS P NT
1

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, N
U.S. EPA ID Number:

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMEN AL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9599
Facility's Phone: (765)435-2704
U.S. EPA ID Number:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLY HLORINA EI BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(PQ = LIP),ERG#171	1	DT	20,455	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5 17 13
1.W7_Q837371_I#5347991

cl: 20391kg (44860lb)
[3472407]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brew
Signature: Thomas J. Brew
Month: 5 Day: 17 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Scott Fuller
Signature: Scott
Month: 5 Day: 17 Year: 13
Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e. codes for hazardous waste treatment, disposal, and recycling systems)
1. H132 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name:
Signature:
Month: 05 Day: 21 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 302-5 170

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)326-1221	000530127WAS

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4001
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA . E TH
A E
RA , N

6. Transporter 1 Company Name: U.S. BULF TRANSPORT, INC — U.S. EPA ID Number: [illegible]

7. Transporter 2 Company Name: — U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9536
Facility's Phone: (765)435-2704
U.S. EPA ID Number: [illegible]

GENERATOR

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	20,082	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVI 5 17 13
1.W7_0837371_T#5 93
w/ 20055kg (44160lb)
[3477403]

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: [signature] — Month 5 Day 17 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Nate Smith — Signature: [signature] — Month 5 Day 17 Year 13
Transporter 2 Printed/Typed Name: — Signature: — Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [handwritten name] — Signature: [signature] — Month 05 Day 17 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 171

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023490	1	(800)328-1221	000530128WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS EK
300 HIGHWAY 361
CRANE, IN 47522-5001
Generator's Phone: (812)854-6161

Generator's Site Address (if different than mailing address)
NSA CRANE
300 HIGHWAY 361
CRANE, IN 47522-5001

6. Transporter 1 Company Name
U.S. BULK TRANSPORT, INC.
U.S. EPA ID Number

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4770 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9594
Facility's Phone: (765)435-2704
U.S. EPA ID Number

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1 RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII, RESPONSE RADIATION WASTE PQ = 1 TP1,RF,#171	1	PT	19,255	K	
	2					
	3					
	4					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5 17 13
1.W7_032_71_T 5547995
col: 19182kg (42200lb)
ERI:HERITAGE [3472409]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: [signature]
Month: 5 Day: 17 Year: 13

INT'L

16. International Shipments ☐ Import to U.S ☐ Export from U.S Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Nick Smith
Signature: [signature]
Month: 5 Day: 17 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: [illegible]
Signature: [signature]
Month: 05 Day: 17 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

172

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369468 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated biphenyls solid, 9, PG III	001	DT	22,455	Kg	NA
	2.					
	3.					
	4. HRSTMAUS# 5847810 wt. 22400kg (4928olb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=116 ERC #171 SWMU #17
PCB out of Service Date 5/17/13 Approval Code # 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 17 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: William Morris
Signature: William Morris
Month: 5 Day: 17 Year: 13
Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name:
Signature:
Month: 05 Day: 12 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQU

#104

673

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Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN517(-	1	(800)328-1221	000530129WAS

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS J.
300 HIGHWAY 361
CRANE, IN 47522-4.0
(812 95 .

Generator's Site Address (if different than mailing address)
[illegible] RENT
[illegible]

Generator's Phone:

6. Transporter 1 Company Name
U.S. BULK TPA [illegible]

U.S. EPA ID Number
[illegible]

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRON
4377 W COUNTY RD I 1
ROACHDALE, IN 46172
(765) [illegible]

U.S. EPA ID Number
[illegible]

Facility's Phone

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ - 1 LB),ERG#171	1	DT	17,881	K	
	2.					
	3.					
	4					

GENERATOR

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMO [illegible] 5 20 13
1.W7_0827371_T458472[illegible]

ERI:HERITAGE [3472410]

cn 179185 (3942016)

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name	Signature	Month	Day	Year
Thomas J. Brent	Thomas J. Brent	5	20	13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only) Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
Robert Richardson	Robert Richardson	5	20	13
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]	05	20	13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

174

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369460 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Bedman Truck Company
U.S. EPA ID Number: ILR000132534

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls solid, 9, PG III	001	DT	22,327	Kg	NA
	2.					
	3.					
	4. wt. 22355 kg (49180 lb) HES TRANS # 5847871					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=116 ERG#171 SWMU#17
PCB out of Service Date 5/20/13 Approval Code# 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 20 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: RICHARD A. McDEVITT
Signature: Richard A. McDevitt
Month: 5 Day: 20 Year: 13
Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: DAVID MAA
Signature:
Month: 05 Day: 20 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

175

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369461 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 125N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated biphenyls	001	DT	24,127	Kg	NA
	2.					
	3.					
	4. HRS Mans # 584782 — M 24100lbs (5302014)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=116 ERG#171 SWMU#17
PCB out of Service Date 5/20/13 Approval Code # 171853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brewer
Signature: Thomas J. Brewer
Month: 5 Day: 20 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: McKindle Beler
Signature: McKindle Beler
Month: 5 Day: 20 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name:
Signature:
Month: 05 Day: 20 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

176

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 004369462 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company | U.S. EPA ID Number: ILR 000132536

7. Transporter 2 Company Name: | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4340 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2404 | U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
Y	1. RQ, UN3432 Polychlorinated biphenyls	001	DT	22,800	KG	NA
	2.					
	3.					
	4. Hers mans# 5847873 wt: 22836lb (5024016)					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=116 EPA#171 SWMU#17
PCB out of Service Date 5/20/13 Approval Code # 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 5 | Day: 20 | Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Bruce Pritchett | Signature: Bruce Pritchett | Month: 5 | Day: 20 | Year: 13

Transporter 2 Printed/Typed Name: | Signature: | Month: | Day: | Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month: | Day: | Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

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

Printed/Typed Name: David Barga | Signature: | Month: 05 | Day: 20 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

9A-6 · 104 177

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

Form Approved OMB No 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: (812) 326-12..
4. Manifest Tracking Number: 000530130WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-61 0

Generator's Site Address (if different than mailing address)
NSA RANE HOM S BR NT
3 HIGHWA' ..1
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, I
U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 127 N
ROACHDALE, IN 46172 9599
Facility's Phone: (765)435-2704
U.S. EPA ID Number: 1 900503290

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ - 1 LB),ERG#171	1	DT	21,036	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM S
1.W7_Q-37_71_T#5547999
5 20 13
wt 21009 kg (4622016)

15 **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 20 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Robert Richardson
Signature:
Month: 5 Day: 20 Year: 13
Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e. codes for hazardous waste treatment, disposal, and recycling systems)
1. H132 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: David Baker
Signature:
Month: 05 Day: 20 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

178

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170002 3498	1	812-854-447	004369463 FLE

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160

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

6. Transporter 1 Company Name: Brelman Truck Company — U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172 — U.S. EPA ID Number:
Facility's Phone: 765-435-2704

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls	001	DT	23,255	Kg	NA
	2.					
	3.					
	4. HES Manifest # 5847874 — est: 23264 kg (51180 lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG #171 SWMU #17
PCB Out of Service Date 5/20/13 Approval Code # 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas I. Brew — Signature: [signature] — Month: 5 Day: 20 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A. MCDEVITT — Signature: [signature] — Month: 5 Day: 20 Year: 13

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: [illegible] — Signature: [signature] — Month: 05 Day: 20 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

179

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN517	1		000530131WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS P
300 HIGHWAY 361
CRANE, IN 47522-400
(812 5 1-

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

Generator's Phone:

6. Transporter 1 Company Name
U.S. BULK TRANSPORT,

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTA
4570 W COUNTY POAD 12
ROACHDALE, IN 46172-95
(765)435-27

U.S. EPA ID Number
IND050839

Facility's Phone:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,8,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	18,073	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5 20 13
1.W7_Q837371_T#5849001

on: 18082 lbs
(3978 lb
3473 L)

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name	Signature	Month	Day	Year
Thomas J. Brent	Thomas J. Brent	5	20	13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
Al Vahlkamp	Al Vahlkamp	5	20	13
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e. codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name	Signature	Month	Day	Year
		05	20	13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 #104 180

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)326-1221	000530132WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BREN
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-5160

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

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICE
4879 W COUNTY ROAD 1175 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704

U.S. EPA ID Number: IN 980502330

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1 RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ - 1 LB),EPG#171	1	DT	19,900	K	
	2					
	3					
	4					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5 21 13
1.W7_2837371_T#58480

CL: 19918KS (438201) [3472413]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 21 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Robert Richardson — Signature: Robert Richardson — Month 5 Day 21 Year 13

Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: David Brown — Signature — Month 05 Day 21 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 181

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN S170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 004369464 FLE

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company | U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Rockdale IN 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: INDSRCS03890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated biphenyls	001	DT	22,318	KG	NA
	2.					
	3.					
	4. This TMANS# 5842875 m: 2231815 (4910011)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG #171 SUBMIT#17
PCB Out of Service Date 5/21/13 Approval Code #121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 5 | Day: 21 | Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A. MCDEVITT | Signature: Richard A. McDevitt | Month: 5 | Day: 21 | Year: 13

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: DAVID BAHA | Signature | Month: 05 | Day: 21 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 139 182

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

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
	IN5170029498	1	(800)925-1221	000530133WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS
300 HIGHWAY 361
CRANE, IN 47522-
(812)3[illegible]

Generator's Site Address (if different than mailing address)
NSA C[illegible]
300 H[illegible]
CRANE [illegible]
GEN: [illegible]

Generator's Phone:

6. Transporter 1 Company Name
U.S. PUEK TPA. -TO[illegible], [illegible]

U.S. EPA ID Number
[illegible]

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTA[illegible]
4370 W COUNTY ROAD 1[illegible]
ROACHDALE, IN 46172-9[illegible]
Facility's Phone: (765)435-27[illegible]

U.S. EPA ID Number
IND980502890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	19,791	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOV[illegible]
1,W7_0827371_T#5[illegible]
5 21 13
WT 19685LBS (4330016)
ERI:HERITAGE [3472414]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name	Signature	Month	Day	Year
Thomas J. Brew	Thomas J. Brew	5	21	13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
Scott Fuller	Scott	5	21	13
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e. codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]	05	21	13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-Q

183

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369465 FLE

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls	001	DT	15,245	KG	NA
	2.					
	3.					
	4. Hermans # 5847876 wt. 15227 kg (33500 lb)					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=1lb ERG #171 SWMU #17
PCB out of Service Date 5/21/13 Approval Code # 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month/Day/Year: 5/21/13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: McKinley Beler #410245
Signature: McKinley Beler
Month/Day/Year: 5/21/13

Transporter 2 Printed/Typed Name
Signature
Month/Day/Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month/Day/Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2	3	4

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

Printed/Typed Name
Signature
Month/Day/Year: 05/21/13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

184

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369466 FLE

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 47522
Generator's Site Address (if different than mailing address):
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Service, 4370 W County Road 1275 N, Roachdale, IN 46172
U.S. EPA ID Number: IND980503870
Facility's Phone: 765-435-2704

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls	001	DT	21,836	Kg	NA
	2.					
	3.					
	4. (HRS MANS # 5847837) GW: 21836 lbs (4804014)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG #171 SLSMU #17
PCB out of Service Date 5/21/13 Approval Code # 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brewer
Signature: Thomas J. Brewer
Month: 5 Day: 21 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Bruce Pritchett
Signature: Bruce Pritchett
Month: 5 Day: 21 Year: 13
Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1: 2: 3: 4:

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name:
Signature:
Month: 05 Day: 21 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

44-6 M JLL 185

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)326-1221	000530134WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN
GEN: 121-5

6. Transporter 1 Company Name
U.S. BULK TRANSPORT, INC

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4770 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704

U.S. EPA ID Number

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt/Vol	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	19,564	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5 21 13
1.W7_0837371_I#5348007

wt: 19582kgs (43080lb)

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name	Signature	Month	Day	Year
Thomas J. Brent	Thomas J. Brent	5	21	13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
Al Vahlkamp	Al Vahlkamp	5	21	13
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name	Signature	Month	Day	Year
		05	21	13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-C

186

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170 [illegible]498	1	(800)326-1221	000530135WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-616

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
I. HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC
U.S. EPA ID Number: PAD927[illegible]47_5

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4270 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number:

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	21,718	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5 21 13
1.W7_Q837371_T#5848009

ca. 21,727 kg (47800 lb)

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month 5 Day 21 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Eric N. Cuttill TDK-338 Signature: E Cuttill
Month 5 Day 21 Year 13
Transporter 2 Printed/Typed Name: Signature:
Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [illegible] Signature:
Month 05 Day 21 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

187

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 004369467 FLE

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Brelman Truck Company
U.S. EPA ID Number: ILR000135236

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated biphenyls solid, 9, PG III	001	DT	22,000	Kg	NA
	2.					
	3.					
	4. HRS TRANS# 5847878 M. 22036lbs (4848016)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1/6 ERG#171 SWMU#17
PCB out of Service Date 5/21/13 Approval Code# 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 21 Year: 13

INTL

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A. McDEVITT
Signature: Richard A. McDevitt
Month: 5 Day: 21 Year: 13

Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: DAVID BAREA
Signature
Month: 05 Day: 21 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 121 188

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IND170022498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: (800)328-1221 | 4. Manifest Tracking Number: 000530136WAS

GENERATOR

5. Generator's Name and Mailing Address:
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address):
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC | U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name | U.S. EPA ID Number

8. Designated Facility Name and Site Address:
HERITAGE ENVIRONMENTAL SERVICES
4270 W COUNTY ROAD 127E N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503630

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN2432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTES),(RQ - (LB),ERG#171	1	DT	20,607	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information:
EARLIEST DATE OF REMOVAL FROM SERV E 5 21 13
1.W7_0327371_TH594 11
wt: 20691 kg (45520 lb)
E H 17

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature | Month 05 | Day 21 | Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Scott Fuller | Signature | Month 05 | Day 21 | Year 13

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: DAVID BREA | Signature | Month 05 | Day 21 | Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 #312 189

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IC234	1	(800)328-1221	000530137WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
(812)854-6190

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: IC234

Generator's Phone:

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4879 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9599
Facility's Phone: (765)435-2704

U.S. EPA ID Number: IND980503999

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(PQ = 1 LB),ERG#171	1	DT	20,527	P	
	2.					
	3.					
	4					

14. Special Handling Instructions and Additional
EARLIE LIT REM
I.W. 7 480

5 22 13

ref. 205364 (45180(b))

ERI:HERITAGE [71418]

15 **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month 5 Day 22 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Al Vahlkamp — Signature — Month 5 Day 22 Year 13

Transporter 2 Printed/Typed Name — Signature — Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2.	3	4
H132			

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

Printed/Typed Name — Signature — Month 05 Day 22 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

164 190

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)328-1221	000530139WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
(812)854-6180
Generator's Phone:

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980500390

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	21,309	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/22/13
1.W7_0837371_T#58A8017

CM. 213276 (4/9/2013)

ERI:HERITAGE [3472420]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month: 5 — Day: 22 — Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Robert Richardson — Signature — Month: 5 — Day: 22 — Year: 13

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name: Dawn Bonna — Signature — Month: 05 — Day: 22 — Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

TIK 338 191

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: (800)326-1221
4. Manifest Tracking Number: 000530138WAS

5. Generator's Name and Mailing Address:
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address):
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name: — U.S. EPA ID Number:

8. Designated Facility Name and Site Address:
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9592
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	21,809	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/22/13
1.W7_Q837371_T#5848015
ERI:HERITAGE [3472419]
cr/ 21818kg (48000lb)

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: [signature] — Month 5 Day 22 Year 13

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Eric N. Cuttill — Signature: [signature] — Month 5 Day 22 Year 13
Transporter 2 Printed/Typed Name: — Signature: — Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. H132 2. 3.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [signature] — Signature: [signature] — Month 05 Day 22 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

GENERATOR / INT'L / TRANSPORTER / DESIGNATED FACILITY

139 192

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)326-1221	000530140WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address)
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4970 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704

U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group (if any))	10. Containers No	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	20,200	K	
	2.					
	3.					
	4					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5/22/13
1,W7_Q837271_I#5848019

wt. 20191 lbs (9442 lbs)

ERI:HERITAGE [3472421]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name	Signature	Month	Day	Year
Thomas J. Brent	Thomas J. Brent	5	22	13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
Scott Fuller	Scott Fuller	5	22	13
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month / Day / Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

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

Printed/Typed Name	Signature	Month	Day	Year
[illegible]	[illegible]	05	22	13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

1 & 3

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5700023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 011773566 JJK

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company | U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Roachdale IN 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: IND980503840

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt/Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	22,791	Kg	NA
	2.					
	3.					
	4. HRS TRANS #5847879 wt: 22 800 kg (50160 lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=116 ERG#171 SWMU#17
PCB Out of Service Date 5/22/13 Approval Code #121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 5 | Day: 22 | Year: 13

INTL

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A. MIDEVITT | Signature: Richard A. McDevitt | Month: 5 | Day: 22 | Year: 13

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2.	3.	4

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

Printed/Typed Name | Signature | Month: 05 | Day: 22 | Year: 13

EPA Form 8700-22 (Rev. 3-06) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

194

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4473
4. Manifest Tracking Number: 011773579 JJK

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 127SN, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	16,391	Kg	NA
	2.					
	3.					
	4. HFS TMNS # 584788 (1432lbs / 30920lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=116 ERG#171 SWMU #17
PCB out of Service Date 5/22/13 Approval Code # 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter. I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 22 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: McKinzie Beler
Signature: McKinzie Beler
Month: 5 Day: 22 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name:
Signature:
Month: 05 Day: 22 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

195

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 011773578 JJK

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	22,445	KG	NA
	2.					
	3.					
	4. Approx 22427kg (49340lbs) LARS MANS# 5847881					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb EIC#171 SWMU #17
PCB Out of Service Date 5/22/13 Approval Code# 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brant
Signature: Thomas J. Brant
Month 5 Day 22 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Bruce Pritchett
Signature: Bruce Pritchett
Month 5 Day 22 Year 13

Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2.	3.	4

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name
Signature
Month 05 Day 22 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

196

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170028455	1	(800)925-1221	000530141WAS

GENERATOR

5. Generator's Name and Mailing Address
NSA CRANE / THOMAS BRENT
P O BOX 5

Generator's Site Address (if different than mailing address
NSA CRANE
A
L 47522-4

Ge

6. Transporter 1 Company Name
U.S. BULK TRANSPORT, INC.

U.S. EPA ID Number
PAD987307515

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone (765)483-2704

U.S. EPA ID Number
IND980558681

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DF	21,027	P	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARL E[illegible] IAT[illegible] R
1.W7_Q[illegible]

CS 5.22.13

wt 21036 kg (46280 lb)

EP[illegible] A [illegible]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J Brent
Month 5 Day 22 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/ex
Transporter signature (for exports only): Date leaving U.S.

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Al Vahlkamp
Signature:
Month 5 Day 22 Year 13

Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name
Signature
Month 05 Day 22 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

GNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

#104 197

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
IN5170023498	1	(800)328-1221	000530142WAS

GENERATOR

5. Generator's Name and Mailing Address

Ge e

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

R / TH A
I Y E
A
1 E

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name — U.S. EPA ID Number

8. De S — U.S. EPA ID Number

Fa I

9a HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. [illegible]	1	DT	21,918	P	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Info

EAR E: I E OF REMOV
1.W7_2 - _I#5348021

21927lb
(48240lb)

20609lb
48340lb

STAGE [illegible]

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brew — Signature: Thomas Brew — Month: 5 — Day: 22 — Year: 13

INT'L

16. International Shipments ☐ Import to U.S ☐ Export from U.S Port of entry/exit:

Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Robert Richardson — Signature: Robert Richardson — Month: 5 — Day: 22 — Year: 13

Transporter 2 Printed/Typed Name — Signature — Month — Day — Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month — Day — Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	
H132			

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

Printed/Typed Name: [illegible] — Signature: [illegible] — Month: 05 — Day: 22 — Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

148

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

GENERATOR

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 800-326-1224
4. Manifest Tracking Number: 011773524 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Site Address (if different than mailing address): GEN 121853
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: U.S. Bulk Transport, Inc — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name: — U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale, In 46172
Facility's Phone: 765-435-2704 — U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	1	DT	22,473	K	
	2.					
	3.					
	4. cwt: 22391kg (49260lb) HES MANS# 584882					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 EGI: Heritage (3472422)
PCB out of Service Date 5/22/13 1-W7-Q837371-T# 5848077 005 22 13

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: [signature] — Month/Day/Year: 5/22/13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Eric N. Cuttill — Signature: [signature] — Month/Day/Year: 5/22/13
Transporter 2 Printed/Typed Name: — Signature: — Month/Day/Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number:
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [signature] — Signature: [signature] — Month/Day/Year: 05/22/13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

199

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

GENERATOR

1. Generator ID Number: IN5170023438
2. Page 1 of: 1
3. Emergency Response Phone: (800)326-1221
4. Manifest Tracking Number: 000530143WAS

5. Generator's Name and Mailing Address:
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
Generator's Phone: (812)854-6160

Generator's Site Address (if different than mailing address):
NSA CRANE / THOMAS BRENT
300 HIGHWAY 361
CRANE, IN 47522-4000
GEN: 121853

6. Transporter 1 Company Name: U.S. BULK TRANSPORT, INC — U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name: — U.S. EPA ID Number:

8. Designated Facility Name and Site Address:
HERITAGE ENVIRONMENTAL SERVICES
4370 W COUNTY ROAD 1275 N
ROACHDALE, IN 46172-9593
Facility's Phone: (765)435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ,UN3432,POLYCHLORINATED BIPHENYLS, SOLID,9,PGIII,(PCB REMEDIATION WASTE),(RQ = 1 LB),ERG#171	1	DT	19,991	K	
	2.					
	3.					
	4.					

14. Special Handling Instructions and Additional Information
EARLIEST DATE OF REMOVAL FROM SERVICE 5 / 22 / 13
1.W7_Q837371_T#5848025

w/ 19973 kgs (43940 lb)

ERI:HERITAGE [3472424]

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: [signature] — Month 5 Day 22 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Scott Fuller — Signature: Scott [signature] — Month 5 Day 22 Year 13
Transporter 2 Printed/Typed Name: — Signature: — Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
H132			

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [handwritten name] — Signature: [signature] — Month 05 Day 22 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-U

200

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number
INS170023498	1	812-854-4473	011773576 JJK

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company — U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name — U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Rockdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND 980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, Page III	001	DT	23,009	Kg	NA
	2.					
	3.					
	4. TRS TRANS #5847883 GW: 22900 lbs (5038 lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ-116 ERG#171 SWMU#17
PCB out of Service Date 5/22/13 Approval Code 121853-2

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: Thomas J. Brent — Month: 5 Day: 22 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A. MCDEVITT — Signature: Richard A. McDevitt — Month: 5 Day: 22 Year: 13

Transporter 2 Printed/Typed Name — Signature — Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) — Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: [illegible] — Signature: [signature] — Month: 05 Day: 22 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4H-6 201

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4473
4. Manifest Tracking Number: 011773577 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1375 N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1 RQ, UN3432 Polychlorinated Biphenyls Solid, 9, Page III	001	DT	24,000	Kg	NA
	2					
	3					
	4 HRS Trans # 5847884 cn: 23773(c) (523(a)(1))					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQF116 ERG #171 SWMU #17
PCB out of Service Date 5/22/13 Approval Code # 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month Day Year: 5 22 13

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: McKinley Baker #416029 6183-58 449444 Beelman
Signature: McKinley Baker
Month Day Year: 5 22 13

Transporter 2 Printed/Typed Name
Signature
Month Day Year

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name
Signature
Month Day Year: 05 23 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

202

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 011773575 JJK

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	22,945	Kg	NA
	2.					
	3.					
	4. HFS MANS# 5847885 Wt: 22427kg (50446lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=116 ERG#171 SWMU#17
PCB out of Service Date 5/23/13 Approval Code # 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brew
Signature: Thomas J. Brew
Month: 5 Day: 23 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Bruce Pritchett
Signature: Bruce Pritchett
Month: 5 Day: 23 Year: 13
Transporter 2 Printed/Typed Name
Signature
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name
Signature
Month: 05 Day: 23 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

T.K-338 203

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 800-326-1221 | 4. Manifest Tracking Number: 011773520 JJK

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane In 47522
Generator's Site Address (if different than mailing address): GEN 121853
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: U.S. Bulk Transport, INC | U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name | U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4370 W County Road, 1275 N Roachdale In 46172 | U.S. EPA ID Number: IND980503870
Facility's Phone: 765-435-2704

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
	1. RQ, UN3432 Polychlorinated biphenyls Solid, 9, Page III	001	DT	22,013	K	
	2.					
	3.					
	4. Wt. 22,013 lbs (4842.0 lb) ITFS TMMS # 5847886					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 ERI: Heritage (3472422)
PCB out of Service Date 5/23/13 I.D. WT-9837371 ~~IN5948021~~ 5/23/13

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable International and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name | Signature | Month | Day | Year

INTL
16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER
17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name	Signature	Month	Day	Year
Thomas J. Brewer		5	23	13
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year
Eric N. Cuttill		5	23	13

DESIGNATED FACILITY
18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) | Month | Day | Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. | 2. | 3. | 4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name	Signature	Month	Day	Year
Ann Parma		05	23	13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

104 204

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 800-326-1221
4. Manifest Tracking Number: 011773521 JJK

5. Generator's Name and Mailing Address: NSA Crane, 300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address): GEN 121853

6. Transporter 1 Company Name: U.S. Bulk Transport, Inc
U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services, 4370 W County Road, 1275N, Roachdale IN 46172
Facility's Phone: 765-354-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	1	DT	21,482	K	
	2.					
	3.					
	4. HAZTRANS # 5847888 cl: 21455 KS (47200lb)					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=1lb ERG #171 ERI: Heritage (3472422)
PCB out of Service Date 5/23/13 I. W7-Q837371 T# 5848021

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature
Month: 5 Day: 23 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Robert Richardson
Signature
Month: 5 Day: 23 Year: 13
Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name
Signature
Month: 05 Day: 23 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

205

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 800-826-1221 | 4. Manifest Tracking Number: 011773519 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160

Generator's Site Address (if different than mailing address): GEN 121853

6. Transporter 1 Company Name: U.S. Bulk Transport, Inc | U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road, 1275N, Roachdale In 46172
Facility's Phone: 765-354-2704 | U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	1	DT	20,673	K	
	2.					
	3.					
	4. HCS Trans # 5847887 wt: 20645 kg (45420 lb)					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=1lb ERG#171 ERI:Heritage (3472422)
PCB out of Service Date 5/23/13 L Wt - QB37371 - T# 5848021

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 5 | Day: 23 | Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Al Vahlkamp | Signature: Al Vahlkamp | Month: 05 | Day: 23 | Year: 13

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: David Baker | Signature | Month: 05 | Day: 23 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. **DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)**

1 of 206

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 800-326-1221 | 4. Manifest Tracking Number: 011773525 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160

Generator's Site Address (if different than mailing address): GEN121853

6. Transporter 1 Company Name: U.S. Bulk Transport, Inc | U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4340 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	1	DT	19,482	K	
	2.					
	3.					
	4. Wt. (9345lbs) (4256lb) HRS MANS # 5847689					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 ERI: Heritage (3472422)
PCB out of Service Date 5/23/13 I. WL-Q837371 T# 5848021

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262 27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: | Month 5 | Day 23 | Year 13

INT'L
16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER
17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Scott Fuller | Signature: | Month 5 | Day 23 | Year 13
Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY
18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) | Month | Day | Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. | 2. | 3. | 4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [illegible] | Signature: | Month 05 | Day 23 | Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

207

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 011773572 JJK

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132356

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Rockville In 47872
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, Page III	001	DT	22,473	KG	NA
	2.					
	3.					
	4. wt 22500lbs (49500lbs) HCS TRANS # 5847890					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=116 ERG#171 SWMU#17
PCB out of Service Date 5/23/13 Approval Code# 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature
Month 5 Day 23 Year 13

INTL

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A. MCDEVITT
Signature
Month 5 Day 23 Year 13

Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name
Signature
Month 05 Day 23 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-0 208

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4473
4. Manifest Tracking Number: 011773574 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132356

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980502890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, Page III	001	DT	22,255	Kg	NA
	2.					
	3.					
	4. HRS Trans # 5847891					

est. 22309kg (49080lb)

14. Special Handling Instructions and Additional Information
PCB Remediation Waste PEQ=116 ERG#171 SW846#7
PCB out of Service Date 5/23/13 Approval Code 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brewer
Signature: Thomas J. Brewer
Month 5 Day 23 Year 13

INT'L
16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER
17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: McKindle Baker
Signature: McKindle Baker
Month 5 Day 23 Year 13
Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY
18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: DAVID RANA
Signature
Month 05 Day 23 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 011773568 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Site Address (if different than mailing address)
Generator's Phone: 812-854-6160

6. Transporter 1 Company Name: Beelman Truck Company — U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name: / — U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704 — U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PGE III	001	DT	22,382	Kg	NA
	2.					
	3.					
	4. HCS MAN # 5847892 — ad: 22382(s) (49240lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=116 ERG #171 SWMU #17
PCB Out of Service Date 5/23/13 Approval Code #121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent — Signature: [signature] — Month 5 Day 23 Year 13

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Bruce Fitchett — Signature: [signature] — Month 5 Day 23 Year 13
Transporter 2 Printed/Typed Name: — Signature: — Month Day Year

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) — U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) — Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [handwritten name] — Signature: [signature] — Month 05 Day 23 Year 13

Side labels: GENERATOR, INT'L, TRANSPORTER, DESIGNATED FACILITY

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 TRK-338 210

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170Z3498
2. Page 1 of: 1
3. Emergency Response Phone: 800-326-1221
4. Manifest Tracking Number: 011773535 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160

Generator's Site Address (if different than mailing address): GEN 121853

6. Transporter 1 Company Name: U.S. Bulk Transport, Inc
U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Reachdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	1	DT	22,482	K	
	2.					
	3.					
	4. HFS Trans# 5847895 Wt 22418 lbs (443201)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 ERI: Heritage(3472422)
PCB out of Service Date 5/23/13 I.W.-Q837371_T#5848021

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas Brent
Month: 5 Day: 23 Year: 13

INT'L
16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER
17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Eric N. Cuffill
Signature: EN Cuffill
Month: 5 Day: 25 Year: 13
Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY
18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) Month: Day: Year:
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: Ann Rapp
Signature:
Month: 05 Day: 23 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

211

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170Z3498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 800-326-1224 | 4. Manifest Tracking Number: 011773536 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160

Generator's Site Address (if different than mailing address): GEN 121853

6. Transporter 1 Company Name: U.S. Bulk Transport, Inc | U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Roachdale In 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	1	DT	20,264	K	
	2.					
	3.					
	4. HES TRANS # 5847893 — M: 20282lbs (9046.2kg)					

14. Special Handling Instructions and Additional Information
PCB REMEDIATION WASTE RQ=1lb ERG#171 ERI: Heritage (3472422)
PCB out of Service Date 5/23/13 I.W7-Q837371 T#5848021

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 5 | Day: 23 | Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Al Volkaert | Signature: Al Volkaert | Month: 05 | Day: 23 | Year: 13

Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: Dawn Dana | Signature | Month: 05 | Day: 23 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6 #104 212

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UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 800-424-1221
4. Manifest Tracking Number: 011773537 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160

Generator's Site Address (if different than mailing address): GEN121853

6. Transporter 1 Company Name: U.S. Bulk Transport, Inc
U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	1	DF	21,618	K	
	2.					
	3.					
	4. Wt 21627 kg (47580 lb) HCS manif # 5847846					

14. Special Handling Instructions and Additional Information
PCB REMEDIATION WASTE RQ=1lb ERG#171 ERI: HERITAGE (3472422)
PCB out of Service Date 5/23/13 I. WT-Q837371 T#5848021

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature:
Month 5 Day 23 Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Robert Richardson
Signature:
Month 5 Day 23 Year 13
Transporter 2 Printed/Typed Name:
Signature:
Month Day Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name:
Signature:
Month 5 Day 23 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-6

213

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170233498
2. Page 1 of: 1
3. Emergency Response Phone: 800-326-1224
4. Manifest Tracking Number: 011773534 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160

Generator's Site Address (if different than mailing address): GEN121853

6. Transporter 1 Company Name: U.S. Bulk Transport, Inc
U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	1	DT	20,291	K	
	2.					
	3.					
	4. ltfs tracking # 5847859			gr: 20400 KG (44880 lb)		

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=116 ERG#171 ERI: Heritage (3472422)
PCB out of Service Date 5/23/13 I.W7-Q837371-T#5848021

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

GENERATOR

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 10 Day: 23 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Scott Fuller
Signature: Scott
Month: 5 Day: 23 Year: 13

Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: Dawn Barga
Signature:
Month: 10 Day: 23 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

214

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4473
4. Manifest Tracking Number: 011773570 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132356

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Service
4370 W County Road 1275N, Roachdale In 46172
Facility's Phone: 765-435-7004
U.S. EPA ID Number: IND980503850

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, Page III	001	DT	22909	Kg	NA
	2.					
	3.					
	4. (w/ 22400 kg (50380 lb) IHES TRANS # 5847897)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=116 ERG#171 SWMU#17
PCB out of Service Date 5/24/13 Approval Code #121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month 5 Day 24 Year 13

INT'L
16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER
17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Richard A. McDevitt
Signature: RICHARD A. MCDEVITT
Month 5 Day 24 Year 13
Transporter 2 Printed/Typed Name
Signature
Month Day Year

DESIGNATED FACILITY
18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: DAN BAKER
Signature
Month 05 Day 24 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

215

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 011773533 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company | U.S. EPA ID Number: IND000132356

7. Transporter 2 Company Name | U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale, In 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	22,555	kg	NA
	2.					
	3					
	4 HES TRANS # 5928767 GW: 22555kg (49620lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste PQ=1lb ERG#171 SW846#7
PCB out of Service Date 5/24/13 Approval Code 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

GENERATOR — Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature | Month 5 Day 24 Year 13

INT'L — 16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit: | Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER — 17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Bruce Pritchett | Signature | Month 5 Day 24 Year 13
Transporter 2 Printed/Typed Name | Signature | Month Day Year

DESIGNATED FACILITY — 18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) | Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. | 2. | 3. | 4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: DAWN PARKS | Signature | Month 05 Day 24 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

216

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 011773571 JJK

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Roachdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt/Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9 PG III	001	DT	22,292	Kg	NA
	2.					
	3.					
	4. HRS MANS # 5928168 Wt: 22364 kg (49200 lb)					

14. Special Handling Instructions and Additional Information: PCB Remediation Waste RQ=116 ERG #171 Sump #17
PCB out of Service Date 5/24/13 Approval Code #121853-7

15 GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 24 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: McKindle Baker
Signature: McKindle Baker
Month: 5 Day: 23 Year: 13

Transporter 2 Printed/Typed Name
Signature
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name
Signature
Month: 05 Day: 24 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-4 TRK-338 217

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 800-326-1221
4. Manifest Tracking Number: 011773527 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address): GEN12853

6. Transporter 1 Company Name: U.S. Bulk Transport, Inc
U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt/Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	1	DT	21,645	K	
	2.					
	3.					
	4. HRS TRANS # 5928769 Wt. 21627 lbs (4758 Ltr)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 ERI: Heritage (317 2422)
PCB out of Service Date 5/24/13 I. Wt - Q833371 - T#5848021

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brew
Signature: Thomas J. Brew
Month Day Year: 5 24 13

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Eric N. Cuttill
Signature: Eric N. Cuttill
Month Day Year: 5 24 13

Transporter 2 Printed/Typed Name:
Signature:
Month Day Year:

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month Day Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2.	3.	4

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name:
Signature:
Month Day Year: 05 24 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-4

218

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170234 98
2. Page 1 of: 1
3. Emergency Response Phone: 800-326-1224
4. Manifest Tracking Number: 011773529 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160

Generator's Site Address (if different than mailing address): GEN 121853

6. Transporter 1 Company Name: U.S. Bulk Transport, Inc
U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	1	DT	19,873	K	
	2.					
	3.					
	4. LTRS TRANS# 5928771 wt: 19873 lbs (4372014)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 ERI: Heritage (3472422)
PCB out of Service Date 05/24/13 I.W7-Q837371-T#5848021

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 24 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Al Vahlkamp
Signature: Al Vahlkamp
Month: 5 Day: 24 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: D. Bruce Bailey
Signature:
Month: 05 Day: 24 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-4 #104 219

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 800-424-9300 | 4. Manifest Tracking Number: 011773528 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address): GEN 121853

6. Transporter 1 Company Name: U.S. Bulk Transport, Inc | U.S. EPA ID Number: PAD987347515

7. Transporter 2 Company Name | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	1	DT	20,845	K	
	2.					
	3.					
	4. wt 20827 lbs (4582 lbs) ITRS TRANS # 5928770					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste PQ=116 ERG#171 ERI: Heritage (3472422)
PCB out of Service Date: 5/24/13 I. WT-Q837271 T# 5848021

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 5 | Day: 24 | Year: 13

INT'L
16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER
17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Robert Richardson | Signature | Month: 5 | Day: 24 | Year: 13
Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY
18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) | Month | Day | Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. | 2. | 3. | 4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: DAWN PAUA | Signature | Month: 05 | Day: 24 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

220

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 011773540 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Bellman Truck Company | U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name: | U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432, Polychlorinated Biphenyls Solid, 9, PG III	001	DT	22,600	KG	NA
	2.					
	3.					
	4. HRS TRANS #5928772 wt: 226019 (49746 lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 SWMU#17
PCB out of Service Date 5/24/13 Approval Code 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month: 5 | Day: 24 | Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A. McDEVITT | Signature: Richard A. McDevitt | Month: 5 | Day: 24 | Year: 13

Transporter 2 Printed/Typed Name: | Signature: | Month: | Day: | Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month: | Day: | Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: DAVID PARKA | Signature: | Month: 05 | Day: 24 | Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4X-6 221 **SPECIAL WASTE DISPOSAL NOTIFICATION**

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 221	B	ABF13034	23,163 K	

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/28/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard W. McDaniel — 5·28·13

Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION 222

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 222 (3157)	B	ABF13034	2359 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/28/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4A-5

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 223 (3043)	B	ABF13034	22,864 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/28/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Richard Crawford — Date
Driver's signature

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (IDW C-049)	B	ABF13034	[illegible]	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/28/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 225 (3057)	B	ABF13034	22,209 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/28/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsiliy for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsiblilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 226 (3043)	B	ABF13034	22,300 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/29/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Richard Hanford — 5-29-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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(describe change below) (please use additional paper if necessary)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (actual or estimate)	One-time only disposal
Contaminated Soil 227 (3049)	B	ABF13034	23,027 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Sullivan — 5-29-13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Richard A. McDaniel

Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

5-29-13

Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8-1.7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8-1.9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the first load of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8-1.8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8-1.7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 228 (3,5,7)	B	ABF13034	44,645 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/29/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date 5-29-13

Pursuant to ~~Solid~~ Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (ABF13034)	B	ABF13034		✓
			~2,115 Kg	

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/29/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Richard Leonard
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

5-29-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Manifest #112

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator s estimate)	One-time only disposal
Contaminated Soil 230 (305T)	B	ABF13034	22,373 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J Brent — 5/29/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

5-29-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

44-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Manifest # 113

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator s estimate)	One-time only disposal
Contaminated Soil 231 (3044)	B	ABF13034	22,455 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 5/29/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McDaniel
Driver's signature

5-29-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Manifest # 114

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 232 (3043)	B	ABF13034	23,082 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/29/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford — 5-29-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4M-4

233

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: TN6170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 011773538 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beckman Truck Company
U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	22,600	Kg	NA
	2.					
	3.					
	4. HCS Manif # 5928773					

14. Special Handling Instructions and Additional Information
PCB REMEDIATION WASTE RQ=1lb ERG#171 SWMU #17 WT 49660 lbs
PCB out of Service 5/30/13 Approval Code # 121853-7 22,578K

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

GENERATOR

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 30 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Leslie Ahuel
Signature:
Month: 5 Day: 30 Year: 13

Transporter 2 Printed/Typed Name
Signature
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: Brian Williams
Signature: Brian Williams
Month: 5 Day: 30 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-4

234

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 011773532 JJK

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132556

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Rockdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PAGE III	001	DT	22,109	Kg	NA
	2.					
	3.					
	4. HESTrans# 5928774					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 Summit #17 wt 48,620 lbs 22,100 Kg
PCB out of Service Date 5/30/13 Approval Code#121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 30 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A. MCDEVITT
Signature:
Month: 5 Day: 30 Year: 13

Transporter 2 Printed/Typed Name
Signature
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: Brian Williams
Signature: Brian Williams
Month: 5 Day: 30 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

255 235 4A-4

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 011773573 JJK

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132356

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W. County Road 1275N, Roachdale In 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, Page III	001	DT	22,672	Kg	NA		
	2.							
	3.							
	4. 22,582 Kgs WT 49,680 lbs HES Trans # 5928775							

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ = 1lb FRG #171 SWMU #17
RCB out of Service Date 5/30/13 Approval Code # 121853-7

15. **GENERATOR'S/OFFEROR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 30 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Richard Crawford
Signature: Richard Crawford
Month: 5 Day: 30 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number:
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: Brian Williams
Signature: Brian Williams
Month: 5 Day: 30 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-G Kollott 236

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of 1 | 3. Emergency Response Phone: 800-326-1221 | 4. Manifest Tracking Number: 011773543 JJK

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address): GEN 121853

6. Transporter 1 Company Name: Heritage Environmental Services | U.S. EPA ID Number: IND058484114

7. Transporter 2 Company Name | U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: IND980503870

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	CM	9,500	Kg	
	2.					
	3.					
	4. HRS TRANS # 5928716 wt: 86731bs (19080lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=lb EPA #171 ERI: Heritage (3555950) Box # RQ-432 1. W7_Q837371_1 # S921721
PCB out of Service Date 5/30/2013

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas P. Breen | Signature | Month 5 | Day 30 | Year 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit: Date leaving U.S.
Transporter signature (for exports only):

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Jack Moore | Signature | Month 05 | Day 30 | Year 13
Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator) | Month | Day | Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1	2.	3.	4

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name | Signature | Month 05 | Day 30 | Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-T 237 Transiterra

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4173
4. Manifest Tracking Number: 011773569 JJK

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-1160
Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name:
U.S. EPA ID Number:

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND 980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	23,418	Kg	NA
	2.					
	3.					
	4. HESTrans# 5928777 WT 51,760 lbs 23,522 Kg RQ=116					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste ERG#171 SWMU #17
PCB out of Service Date: 5/30/13 Approval Code#: 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 30 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Leslie Johnson
Signature:
Month: 5 Day: 30 Year: 13

Transporter 2 Printed/Typed Name:
Signature:
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. 2. 3. 4.

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

Printed/Typed Name: Brian Williams
Signature: Brian Williams
Month: 5 Day: 30 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

44-4

238

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4473
4. Manifest Tracking Number: 011773539 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane IN 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company
U.S. EPA ID Number: ILR000132536

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale IN 46172
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND980503890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	23,227	Kg	NA
	2.					
	3.					
	4. 23,291 Kg WT 51,240 lbs HES Trans# 5928778					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ = 1lb ERG# 171 SWMU# 17
PCB out of Service Date 5/30/13 Approval Code 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

GENERATOR

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 30 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: RICHARD A. MCDEVITT
Signature: Richard A. McDevitt
Month: 5 Day: 30 Year: 13

Transporter 2 Printed/Typed Name
Signature
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: Brian Williams
Signature: Brian Williams
Month: 5 Day: 31 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4M-T

239

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498
2. Page 1 of: 1
3. Emergency Response Phone: 812-854-4473
4. Manifest Tracking Number: 011773531 JJK

GENERATOR

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6110
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beckman Truck Company
U.S. EPA ID Number: ILR000132356

7. Transporter 2 Company Name
U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Rockville In 47872
Facility's Phone: 765-435-2704
U.S. EPA ID Number: IND098050390

9a. HM	9b U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt/Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	22,809	Kg	NA
	2.					
	3.					
	4. HES Trans # 5928779 M 22900 lb (50380 lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 SWMU#17
PCB out of Service Date 5/30/13 Approval Code #21853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent
Signature: Thomas J. Brent
Month: 5 Day: 30 Year: 13

INT'L

16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Richard Crawford
Signature: Richard Crawford
Month: 5 Day: 30 Year: 13

Transporter 2 Printed/Typed Name
Signature
Month: Day: Year:

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

Manifest Reference Number:

18b. Alternate Facility (or Generator)
U.S. EPA ID Number
Facility's Phone:

18c. Signature of Alternate Facility (or Generator)
Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.

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

Printed/Typed Name: ANN BANGA
Signature:
Month: 05 Day: 30 Year: 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 240 (3043)	B	ABF13034	21,891 lcy	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas I Brent — Signature — 5/31/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Richard Crawford — 5-31-13

Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status.
(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 241 (3044)	B	ABF13034	22,318 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas I Brent — Signature — 5/31/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McDaniel — 5-31-13

Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No. _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status.
(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as: Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 242 (3057)	B	ABF13034	22,182 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas I Brent — Signature — 5/31/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5-31-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (3043) 2/3	B	ABF13034	23,838 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date 6-3-13

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 224 (42)	B	ABF13034	17,264 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Young Trucking — **Mailing Address:** 8647 E. State Road 45, Unionville, IN 47468

Driver's signature — Date: 5-3-13

Site Name: *Blackfoot Landfill* — Volume/Weight: ____ Ticket No.: ____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 295 (48)	B	ABF13034	17,472 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45**
Unionville, IN 47468

Harry Ames — 6/3/13
Driver's signature — Date

Site Name: ***Blackfoot Landfill*** Volume/Weight: _____
Ticket No.: _____

_____ _____
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 246 (48)	B	ABF13034	18,373 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13

Name (print or type) — Signature — Date

Company Name: Young Trucking — **Mailing Address:** **8647 E. State Road 45, Unionville, IN 47468**

Driver's signature — Date 6-3-13

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 247 (7041)	B	ABF13034	22,000 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A McDevitt — 6.3.12
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 248 (3093)	B	ABF13034	22,755 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Hanford — 6-3-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 249 (48)	B	ABF13034	17,864 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Larry Ames — 6/3/13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 2501 #1	B	ABF13034	15 12.5 tons	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Young Trucking — **Mailing Address:** **8647 E. State Road 45 Unionville, IN 47468**

Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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(describe change below) (please use additional paper if necessary)

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 251 C197	B	ABF13034	18,800 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Young Trucking — **Mailing Address:** **8647 E. State Road 45, Unionville, IN 47468**

Driver's signature — 6-3-13 Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 252 (3044)	B	ABF13034	23,300 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 6·3·13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 253 (3043)	B	ABF13034	21,836 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford — 6-3-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 254 (3057)	B	ABF13034	23,300 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

6-3-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92105

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 255 (3043)	B	ABF13034	21,845 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/4/13
Name (print or type) — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Richard Crawford — 6-4-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 256 (42)	B	ABF13034	16,873 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/4/13 — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature

6-4-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 257 (19)	B	ABF13034	18,236 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/4/13 — Date

Company Name: Young Trucking
Driver's signature

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468
6-4-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 258 (3044)	B	ABF13034	22,282 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Signature — 6/4/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — 6.4.13 — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8-1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8-1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8-1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status.

(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8-1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8-1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil ~~3M~~ 259 (3057)	B	ABF13034	22,855 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/4/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — Mailing Address: 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — 6-4-13 Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 260 (48)	B	ABF13034	18,209 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/4/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Darryl Arms — 6/4/13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsilily for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-10

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator s estimate)	One-time only disposal
Contaminated Soil 261 (3043)	B	ABF13034	25,045 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/3/13

Name (print or type) | Signature | Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Warford — 6-4-13

Driver's signature | Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature | Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the first load of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-10

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 2602(42)	B	ABF13034	18,727 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/4/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — Date: 6-4-13

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 2(63(19)	B	ABF13034	19,136 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/4/13

Name (print or type) — Signature — Date

Company Name: Young Trucking — **Mailing Address:** **8647 E. State Road 45, Unionville, IN 47468**

Driver's signature — Date: 6-4-13

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

TA-10

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator s estimate)	One-time only disposal
Contaminated Soil 264 (3044)	B	ABF13034	23,027 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/4/13

Name (print or type) | Signature | Date

Company Name: Beelman Trucking

Richard M. McDonald

Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

6-4-13

Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process: generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-10

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 265 [30577]	B	ABF13034	22,064 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/5/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

6-4-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No. and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-10

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 266 (48)	B	ABF13034	18,127 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — 6/4/13 Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Larry Ames
Driver's signature

6/4/13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-B

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 267 (3043)	B	ABF13034	22,136 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/5/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford

Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 268 (19)	B	ABF13034	18,927 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/4/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Richard L. Young — 6-4-13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 269 (42)	B	ABF13034	17,873 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Name (print or type)
Signature
6/4/13 — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature
6-4-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8 1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight (generator estimate)	One-time only disposal
Contaminated Soil 270 (3043)	B	ABF13034	23,100 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Signature — 6/5/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford — 6-5-13

Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume Weight _____

Ticket No _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8-1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8-1-9 (the special waste certification process, generator responsibilities) and 329 IAC 10-8-1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8-1-8(e). Generators may use their own Disposal Notification Form as long it complies with all regulatory requirements under 329 IAC 10-8-1-7(e). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight	One-time only disposal
Contaminated Soil 271 (3044)	B	AHF 15034	23,182 Kg	✓

I hereby certify that the above information [illegible] is complete and accurate.

Thomas J. Brent — [signature] — 6/5/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McDermitt
Driver's signature

6.5.13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Load No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC [illegible] verification process, generator responsibilities [illegible] 329 IAC 10-8.1-5(f), all special waste [illegible] generators to provide the disposal facility [illegible] disposed. The solid waste disposal [illegible] with the Special Waste Certification [illegible] for the first load of the waste. The signature [illegible] however, those photocopied signatures [illegible]

Please check the appropriate box [illegible] by Generator:

☑ No changes have been made to any [illegible]

☐ The following change to a relevant law [illegible] have determined the change does [illegible]

☐ The following changes to a relevant law [illegible] repeated the waste determination and [illegible]

☐ The following change to a relevant law [illegible] the waste determination and have determined [illegible] owner, operator or permittee of the MSWLF [illegible]
(describe change below) (please use additional [illegible]

Disposal Facilities may make corrections [illegible] information areas. Such as, Generator No. [illegible] Changes may also be made in the [illegible]

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by [illegible] assist the MSWLF and non MSWLF [illegible] complies with all regulatory [illegible] contaminated wastes.

272 41

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 011773542 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812-854-6160
Generator's Site Address (if different than mailing address): ILR 000132356

6. Transporter 1 Company Name: Buckman Truck Company | U.S. EPA ID Number: IND078050389O

7. Transporter 2 Company Name | U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275N, Roachdale In 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	23,118	KG	NA
	2.					
	3.					
	4. HM's # 5928780 Wt: 23127kg (50880lb)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 SWMU #17
PCB out of Service Date 6/5/13 Approval Code # 121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month 6 | Day 5 | Year 13

INT'L
16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER
17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: Leslie Zahner | Signature | Month 6 | Day 5 | Year 13
Transporter 2 Printed/Typed Name | Signature | Month | Day | Year

DESIGNATED FACILITY
18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) | Month | Day | Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. | 2. | 3. | 4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name | Signature | Month 06 | Day 05 | Year 13

EPA Form 8700-22 (Rev. 3-05). Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 273 (19)	B	ABF13034	18,955 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/5/13
Name (print or type) — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — 6-5-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact Changes may also be made in the Certification No Verification No and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e) Generators may use their own Disposal Notification Form as long it complies with all regulatory requirements under 329 IAC 10-8 1-7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Phone: 812-854-6160

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Waste Name	Category A or B	Verification No	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 274 (42)	B	ABF13034	17,809 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Name (print or type)
[signature] — Signature
5/3 — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

[signature] — Driver's signature
5-5-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No _____

_____ Authorized Signature
_____ Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal) 329 IAC 10-8 1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process generator responsibilities) and 329 IAC 10-8 1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature

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4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Phone: 812-854-6160

Technical Contact Thomas Brent

Generator Location **NSA Crane**
300 HWY 361
Crane, IN 47522

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 275 (48)	B	ABF13034	17,091 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/5/13

Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Larry Almond — 6/5/13

Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No. _____

_____ _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8-1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8-1-9 (The special waste certification process generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 276 (11)	B	ABF13034	17,955 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Signature — 6/5/13

Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — 6-5-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight _____

Ticket No _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8 1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied however, those photocopied signatures will be considered to have the same authority as the original signature

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No , and Technical Contact Changes may also be made in the Certification No , Verification No and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8 1-8(e) Generators may use their own Disposal Notification Form as long it complies with all regulatory requirements under 329 IAC 10 8 1 -7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight	One-time only disposal
Contaminated Soil 27 (3043)	B	ABF 13034	23,300 Kg	✓

I hereby certify that the above information is true and correct to the best of my knowledge.

Thomas J. Brent — Signature — 6/5/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — Mailing Address: 1 Racehorse Drive, East St Louis IL 62205

Richard Canfield

Driver's signature — Date

Site Name: *Blackfoot Landfill*

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 [illegible] verification process, generator responsibilities [illegible] 329 IAC 10-8.1-5(b), all special waste delivered [illegible] generators to provide the disposal facility [illegible] disposed. The solid waste disposal process [illegible] with the Special Waste Certification [illegible] for the first load of the waste. The signature [illegible] however, those photocopied signatures [illegible]

Please check the appropriate box [illegible]

☑ No changes have been made [illegible]

☐ The following change to a [illegible] have determined the change [illegible]

☐ The following changes to a [illegible] repeated the waste determination [illegible]

☐ The following change to a [illegible] the waste determination and [illegible] owner/operator of permitted [illegible] (describe change below) (please [illegible]

Disposal Facilities may make corrections [illegible] information areas. Such as: Generator Name, Mailing Address, Generator Location, Technical Contact. Changes may also be made to the Waste Name, Category, Verification No., Volume Weight, One-time only disposal.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by [illegible] assist the MSWLF and non-MSWLF [illegible] complies with all regulatory [illegible] contaminated wastes.

278 4D

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number: IN5170023498 | 2. Page 1 of: 1 | 3. Emergency Response Phone: 812-854-4173 | 4. Manifest Tracking Number: 011773544 JJK

5. Generator's Name and Mailing Address: NSA Crane
300 Highway 361, Crane In 47522
Generator's Phone: 812+854-6160
Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name: Beelman Truck Company | U.S. EPA ID Number: ILR000132356

7. Transporter 2 Company Name | U.S. EPA ID Number

8. Designated Facility Name and Site Address: Heritage Environmental Services
4370 W County Road 1275 N, Roachdale In 46172
Facility's Phone: 765-435-2704 | U.S. EPA ID Number: IND078058890

9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No.	10. Containers Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. RQ, UN3432 Polychlorinated Biphenyls Solid, 9, PG III	001	DT	4,191	KG	NA
	2.					
	3.					
	4. HESTMAN# S928781 Wt. 41824g (92001b)					

14. Special Handling Instructions and Additional Information
PCB Remediation Waste RQ=1lb ERG#171 SWMU#17
PCB out of Service Date 6/5/13 Approval Code #121853-7

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent.
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Offeror's Printed/Typed Name: Thomas J. Brent | Signature: Thomas J. Brent | Month 6 Day 5 Year 13

INTL
16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit:
Transporter signature (for exports only): Date leaving U.S.:

TRANSPORTER
17. Transporter Acknowledgment of Receipt of Materials
Transporter 1 Printed/Typed Name: RICHARD A. McDEVITT | Signature: Richard A. McDevitt | Month 6 Day 5 Year 13
Transporter 2 Printed/Typed Name | Signature | Month Day Year

DESIGNATED FACILITY
18. Discrepancy
18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) | U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) | Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)
1. 2. 3. 4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a
Printed/Typed Name: [illegible] | Signature | Month 06 Day 05 Year 13

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 279(42)	B	ABF13034	18,264 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/5/13

Name (print or type) | Signature | Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Driver's signature — 6-5-13

Driver's signature | Date

Site Name: *Blackfoot Landfill*

Volume/Weight _____

Ticket No. _____

Authorized Signature | Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8 1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8 1 9 (The special waste certification process generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied. however, those photocopied signatures will be considered to have the same authority as the original signature

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 280 (19)	B	ABF13034	16,545 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Signature — 6 5 13

Name (print or type) — Signature — Date

Company Name: Young Trucking — **Mailing Address:** 8647 E. State Road 45, Unionville, IN 47468

Driver's signature — Date 6-5-13

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____ Ticket No _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8 1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste
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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Phone: 812-854-6160

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 281 (48)	B	ABF13034	16,555 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Signature — 6/5/13

Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Larry Jones — 6/5/13

Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No. _____

_____ — _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8 1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume/Weight generator's estimate	One-time only disposal
Contaminated Soil 282 (11)	B	ABF13034	18,300 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

James J. Bier — Signature — 5/3

Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — 6-5-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight

Ticket No

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28 21 (facility responsibility for special waste disposal) 329 IAC 10-8 1-7(d) (the special waste verification process; generator responsibilities) 329 IAC 10-8 1 9 (The special waste certification process generator responsibilities) and 329 IAC 10-8 1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary).

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No. and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8 1-8(e). Generators may use their own Disposal Notification Form as long it complies with all regulatory requirements under 329 IAC 10-8 1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume Weight	One-time only disposal
Contaminated Soil 283 (3043)	B	ABF13034	23,236 lbs	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/5/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Richard Crawford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6-5-13
Date

Site Name: *Blackfoot Landfill*

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-2(c)(5), [illegible] Special Waste Disposal [illegible] 329 IAC 10-8-1 to the Special Waste certification process, generator responsibilities [illegible] 329 IAC 10-8-1.5(d), all special waste [illegible] generators to provide the disposal facility [illegible] disposed. The solid waste disposal [illegible] with the Special Waste Certification [illegible] for the first load of the waste. The signature [illegible] however, these photocopied signatures [illegible]

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any [illegible]

☐ The following change to a relevant [illegible] have determined the change [illegible]

☐ The following changes to a relevant [illegible] repeated the waste determination [illegible]

☐ The following change to a relevant [illegible] the waste determination and have determined [illegible] owner, operator, or permittee of the MSWLF [illegible] (describe change below) (please use additional pages if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY [illegible] information areas. Such as: Generator Name, Transporter Name, Manifest [illegible] Changes may also be made in the Certification [illegible]

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for [illegible] assist the MSWLF and non MSWLF [illegible] complies with all regulatory [illegible] contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 284 (48)	B	ABF13034	16,318 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Name (print or type) | Signature | Date 6/5/13

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature

Date 6/5/13

Site Name: *Blackfoot Landfill*

Volume/Weight

Ticket No

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28 21 (facility responsibility for special waste disposal) 329 IAC 10-8 1 7(d) (the special waste verification process, generator responsibilities) 329 IAC 10-8 1 9 (The special waste certification process generator responsibilities) and 329 IAC 10-8 1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste The signature on the disposal notifications for subsequent loads of the same waste may be photocopied however, those photocopied signatures will be considered to have the same authority as the original signature

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have repeated the waste determination and have determined this change did not cause a change in regulatory status

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste I have received from the owner, operator, or permittee of the MSWLF unit or non MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use and contains all regulatory requirements Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8 1-8(e) Generators may use their own Disposal Notification Form as long it complies with all regulatory requirements under 329 IAC 10 8 1 7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes

4A-S

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume/Weight generator's estimate	One-time only disposal
Contaminated Soil 285 (A)	B	ABF 13034	18,964 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

[illegible] | [illegible] | 6-5-13

Name (print or type) | Signature | Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

RLH 17

Driver's signature

6-6-13

Date

Site Name: *Blackfoot Landfill*

Volume/Weight:

Load No.:

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8-1.7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8-1.9 (the special waste certification process, generator responsibilities), and 329 IAC 10-8-1.5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

[✓] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

[ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

[ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined that change did not cause a change in regulatory status.

[ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification form that reflects the change in regulatory status.

(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as: Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8-1 thru. Generators may use their own Disposal Notification Form as long it complies with all regulatory requirements under 329 IAC 10-8-1.7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 286(42)	B	ABF13034	15,182 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — 5/3

Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — Date 6-5-13

Site Name: ***Blackfoot Landfill***

Volume/Weight

Ticket No

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28 21 (facility responsibility for special waste disposal) 329 IAC 10-8 1-7(d) (the special waste verification process; generator responsibilities) 329 IAC 10-8 1 9 (The special waste certification process generator responsibilities) and 329 IAC 10-8 1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste The signature on the disposal notifications for subsequent loads of the same waste may be photocopied however, those photocopied signatures will be considered to have the same authority as the original signature

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have determined the change could not have led to a change in regulatory status and I did not repeat the waste determination for this waste

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have repeated the waste determination and have determined this change did not cause a change in regulatory status

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name Transporter Name Mailing Address Telephone No and Technical Contact Changes may also be made in the Certification No Verification No and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use and contains all regulatory requirements Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8 1 8(e) Generators may use their own Disposal Notification Form as long it complies with all regulatory requirements under 329 IAC 10 8 1 7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes

FA-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
287 (3rd)				
Contaminated Soil	B	ABF13034		

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent | Thomas J Brent | 6/6/13
Name (print or type) | Signature | Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature | Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 7

Ticket No.:

Authorized Signature | Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 288 (3044)	B	ABF13034	23,173 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard A. McDonald
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6/6/13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator s estimate)	One-time only disposal
Contaminated Soil 289 (3043)	B	ABF13034	23,091 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J Brent — Thomas J Brent — 6-6-13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Woodard
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6-6-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 290 (19)	B	ABF13034	17,000 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

R. Hall
Driver's signature

6-6-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

_____ _____
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 291 (42)	B	ABF13034	16,282 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — 6-6-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 292(40)	B	ABF13034	17,300 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45 Unionville, IN 47468**

Steve Bunger — 6/6/2013
Driver's signature — Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 293 (28)	B	ABF13034	17,564 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Sandy Harper — 6-6-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 294 (3057)	B	ABF13034	22,891 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

6-6-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1 9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 295 (3044)	B	ABF13034	23,173 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard M. McDonald
Driver's signature

6/6/13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.. _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 296 (3043)	B	ABF13034	23,150 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Richard Crawford — 6-6-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

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(describe change below) (please use additional paper if necessary)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 297 (42)	B	ABF13034	17,327 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Driver's signature — 6-6-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 298 (19)	B	ABF13034	18,291 Ky	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

K. Lut T. Y
Driver's signature

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

6-6-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 299 (40)	B	ABF13034	18,009 lbs	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 6/6/13

Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45**
Unionville, IN 47468

Driver's signature — Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date 6/6/2013

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 300 (28)	B	ABF13034	16,882 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Randy Harper
Driver's signature

6-6-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. (**describe change below**) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-S

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator's estimate)	One-time only disposal
Contaminated Soil 301 (3057)	B	ABF13034	23,450 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J Brent — Thomas J Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 6-6-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

AA-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator s estimate)	One-time only disposal
Contaminated Soil 302 (3044)	B	ABF13034	23,155 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Thomas Brent — 6.6.13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6.6.13
Date

Site Name: ***Blackfoot Landfill***

Volume Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight (generator s estimate)	One-time only disposal
Contaminated Soil 303 (3043)	B	ABF13034	22,860 KG	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Thomas Brent — 6.6.13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Hempfack
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6-6-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 304 (42)	B	ABF13034	17,027 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — 6-6-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 305 (3043)	B	ABF13034	23,282 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford — 6-7-13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No , and Volume/Weight of the Waste Information Section.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 306 (3057)	B	ABF13034	23,100 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 6/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

6-9-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 307 (3044)	B	ABF13034	22,473 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McDaniel — 6/7/13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 308 (19)	B	ABF13034	18,264 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking
R. Lacy
Driver's signature

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468
6-7-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 309(48)	B	ABF13034	15,945 lbs	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45**
Unionville, IN 47468

Driver's signature — 6/7/13
Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

Company Name: Sullivan Intermodal Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact:

Generator Location:

Phone: 512-554-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 310 (42)	B	ABF13034	17,782 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13

Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45 Unionville, IN 47468**

Driver's signature — Date 6-7-13

Site Name: *Blackfoot Landfill* Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the **same waste** may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 311 (49)	B	ABF13034	18,555 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 6/19/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 6-7-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 312(40)	B	ABF13034	18,373 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Steve Bunge
Driver's signature

6/7/2013
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 313 (11)	B	ABF13034	17,827 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J Brent — Signature
6/7/13 — Date

Company Name: Young Trucking — Driver's signature

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468
6-7-13 — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 314 (30437)	B	ABF13034	23,100 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Lambert
Driver's signature

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205
6-7-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 315 (3057)	B	ABF13034	22,941 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 6/19/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature — 6-7-13 Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 316 (3044)	B	ABF13034	23,327 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 6/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McDowell — 6/9/13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 317 (19)	B	ABF13034	16,873 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J Brent — 6/7/13

Name (print or type) — Signature — Date

Company Name: Young Trucking — **Mailing Address:** **8647 E. State Road 45, Unionville, IN 47468**

Driver's signature — 6-7-13 — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 318 (48)	B	ABF13034	16,354 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45 Unionville, IN 47468**

Larry Allen — 6/7/13
Driver's signature — Date

Site Name: ***Blackfoot Landfill*** Volume/Weight: _____ Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 319 (92)	B	ABF13034	17,818 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45**
Unionville, IN 47468

Driver's signature — Date 6-7-13

Site Name: *Blackfoot Landfill* Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 320 4A-5	B	ABF13034	11,836.53	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Driver's signature — Date 6-7-13

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 321 (11)	B	ABF13034	18,736 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Driver's signature

6-7-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 322 (407)	B	ABF13034	17,818 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45 Unionville, IN 47468**

Jim Burge — 6/7/2013
Driver's signature — Date

Site Name: *Blackfoot Landfill* Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 323 (3043)	B	ABF13034	23,191 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford — 6-7-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 324 (3057)	B	ABF13034	23,355 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 6/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 6-7-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 325 (19)	B	ABF13034	18,095 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — Date

Company Name: Young Trucking
Driver's signature

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468
6-9-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8 1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8 1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 326 (3044)	B	ABF13034	23,636 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 6/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McDaniel — 6-9-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 327 (48)	B	ABF13034	18,336 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — Date 6/7/13

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the first load of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 328 (42)	B	ABF13034	17,982 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — Date: 6-7-13

Site Name: ***Blackfoot Landfill***

Volume/Weight: _____

Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 329 (48)	B	ABF13034	18,291 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 6/10/13
Name (print or type) — Signature — Date

Company Name: Young Trucking
Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Larry Ames — 6/10/13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____
Ticket No.: _____

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 330 (42)	B	ABF13034	15,509 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Thomas J. Brent — 6/10/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature

6-10-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: _____

Ticket No.: _____

Authorized Signature

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the first load of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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APPENDIX G-1.4

SPEICAL WASTE DISPOSAL NOTIFICATIONS – PHASE 1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 1 (3024)	B	ABF13034	23,281 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Roger Mesnarich — 4-22-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: 25.63

Ticket No. 456325

Authorized Signature — 4-22-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (30667)	B	ABF13034	17,672 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Ed Thouni
Driver's signature

4-22-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 19.61

Ticket No.: 45633

Authorized Signature

4.22.13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 3 (2016)	B	ABF13034	24,245 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** **1 Racehorse Drive, East St. Louis, IL 62205**

Driver's signature — 4-22-13 Date

Site Name: *Blackfoot Landfill* — Volume/Weight: 26.67

Ticket No.: 454323

Authorized Signature — 4.22.13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 4 (3045)	B	ABF13034	23,263 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — 4-22-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.52
Ticket No.: 456321

Carl Vogt — 4-22-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 2 (2077)	B	ABF13034	24,090 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4-22-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.50

Ticket No.: 456337

Authorized Signature

4-22-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsiblities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 5 (6300)	B	ABF13034	23,181 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

6301/35271
Driver's signature

4-22-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 26.02

Ticket No.: 456332

Authorized Signature

4.22.13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 7 (3037)	B	ABF13034	23,672 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/22/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

Date 4/22/13

Site Name: *Blackfoot Landfill*

Volume/Weight: 26.19

Ticket No.: 456364

Carol Vick

Authorized Signature

Date 4-22-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 20 (3045)	B	ABF13034	22,804 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4-23-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.14

Ticket No.: 456880

Carol Voegle
Authorized Signature

4-23-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 12 (6300)	B	ABF13034	23,018 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature

4-24-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.35

Ticket No.: 456463

Carol Vidge
Authorized Signature

4-23-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 9 (3024)	B	ABF13034	23,155 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Roger Mesparick — 4-23-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.46
Ticket No.: 456457

Carol Jay — 4-23-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 13 (2077)	B	ABF13034	21,454 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature

4-23-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 2363
Ticket No.: 456477

Carol Vogler
Authorized Signature

4-23-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 11 (3037)	B	ABF13034	23,609 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4/23/13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.97

Ticket No.: 456466

Authorized Signature

4-23-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 3045	B	ABF13034	2343b	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature

4-23-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.76
Ticket No.: 456508

Carol Vinyard

Authorized Signature

4-23-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 14 (2016)	B	ABF13034	23,518 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 4-23-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 2580

Ticket No.: 456478

Authorized Signature — 4-23-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 17 (3037)	B	ABF13034	23,209 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** **1 Racehorse Drive East St. Louis, IL 62205**

Driver's signature — Date 4/23/13

Site Name: *Blackfoot Landfill* — Volume/Weight: 25.53

Ticket No.: 456533

Authorized Signature — Date 4-23-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 16 (16300)	B	ABF13034	23,645	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

6300/34641
Driver's signature

4-23-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 26.09

Ticket No.: 456523

Connie Gotschie
Authorized Signature

4.23.13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 15 (3024)	B	ABF13034	22,818 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Roger Mesnarich — 4-23-13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.11
Ticket No.: 456521

Connie Houchin — 4-23-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 19 (2016)	B	ABF13034	22,973 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature — 4-24-13 Date

Site Name: *Blackfoot Landfill* Volume/Weight: 25.28

Ticket No.: 456553

Carol Vogle — 4-29-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 18 (2077)	B	ABF13034	23,964 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/23/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4-23-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 26.37
Ticket No.: 456549

Authorized Signature

4-23-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 25 (3027)	B	ABF13034	22,045 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/24/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4-24-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 24.02
Ticket No.: 456638

Authorized Signature

4-24-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 23 (30377)	B	ABF13034	23,636 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/24/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4/24/13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.88

Ticket No.: 456634

Carol Vinyard
Authorized Signature

4-24-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 10 (30666)	B	ABF13034	20,609 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/24/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Ed Thomas 3066
Driver's signature

4-24-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 22.61

Ticket No.: 456614

Carl Vogt
Authorized Signature

4-24-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 21 (2016)	B	ABF13034	23,691 Kg	

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/24/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4-24-13
Date

Site Name: *Blackfoot Landfill*

Carol Vorfer
Authorized Signature

Volume/Weight: 26.06
Ticket No.: 456623
4-24-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 22 (2077)	B	ABF13034	23,136 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/24/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date: 4-24-13

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.45

Ticket No.: 456627

Authorized Signature — Date: 4-24-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 24 (3024)	B	ABF13034	22,555 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/24/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Roger Messmick — 4-24-13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.80

Ticket No.: 45663

Carol Vogel — 4-24-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 28 (30666)	B	ABF13034	22,527 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Ed Tourin — Driver's signature
4-25-13 — Date

Site Name: ***Blackfoot Landfill***

Carol Hughes — Authorized Signature
Volume/Weight: 24.74
Ticket No.: 456581
4-25-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 30 (3037)	B	ABF13034	22,900 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
4/25/13 — Date

Site Name: ***Blackfoot Landfill***
Authorized Signature

Volume/Weight: 25.15
Ticket No.: 456802
4-25-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 31 (3045)	B	ABF13034	23,245 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — 4/25/13 Date

Company Name: Beelman Trucking

Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
4-25-13 Date

Site Name: ***Blackfoot Landfill***

Authorized Signature

Volume/Weight: 25.48
Ticket No.: 456806
4-25-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 29 (3024)	B	ABF13034	23,618 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Roger Mesnarich — Driver's signature
4-25-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.94
Ticket No.: 45680

Carol Wolfe — Authorized Signature
4-25-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 37 (3027)	B	ABF13034	23,200 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — Date: 4/25/13

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date: 4-25-13

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.55
Ticket No.: 456897

Authorized Signature — Date: 4.25.13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 35 (3037)	B	ABF13034	23,345 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature
4/25/13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.60
Ticket No.: 456875

Carol Wolfe — Authorized Signature
4/25/13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 32 (2077)	B	ABF13034	24,345 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4-25-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 26.76 / 45683S

Carol Vuyk
Authorized Signature

Ticket No.: 42573
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 33 (30066)	B	ABF13034	23,191 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Ed Tower — Driver's signature.
4-25-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.52
Ticket No.: 456847

Connie Houchin — Authorized Signature
4-25-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator s estimate)	One-time only disposal
Contaminated Soil 34 (3045)	B	ABF13034	23,655 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
4-25-13 — Date

Site Name: ***Blackfoot Landfill***
Authorized Signature

Volume/Weight: 2593
Ticket No.: 456863
4-25-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 36 (3024)	B	ABF13034	21,045 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Roger Mesnarich — Driver's signature
4-25-13 — Date

Site Name: *Blackfoot Landfill*
Volume/Weight: 23.12
Ticket No.: 456873

Authorized Signature
4-25-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 27 (3027)	B	ABF13034	23,264 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature

4-25-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 2556

Ticket No.: 456824

Carol Vaughn — Authorized Signature

4-25-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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(describe change below) (please use additional paper if necessary)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 26 (2077)	B	ABF13034	23,591 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/25/13 — Date

Company Name: Beelman Trucking

Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

4-25-13 — Date

Site Name: *Blackfoot Landfill*

Carl Vonfeldt — Authorized Signature

Volume/Weight: 25.92
Ticket No.: 456769

4-25-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 45 (3045)	B	ABF13034	23,382 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4-26-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.77

Ticket No.: 457012

Carol Vaske

Authorized Signature

4-26-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 44 (2077)	B	ABF13034	24,082 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature — 4-26-13 Date

Site Name: *Blackfoot Landfill* — Volume/Weight: 26.41

Ticket No.: 456990

Authorized Signature — 4-26-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 42(3037)	B	ABF13034	23,600 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** **1 Racehorse Drive, East St. Louis, IL 62205**

Driver's signature — Date: 4/26/13

Site Name: *Blackfoot Landfill* — Volume/Weight: 25.91

Ticket No.: 456972

Carol Vaile — 4-26-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 40 (30666)	B	ABF13034	23,218 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Ed Thomas — 4-26-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.52
Ticket No.: 456982

Carol Vaughn — 4-26-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 41 (3027)	B	ABF13034	22,373 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

4-26-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 24.61

Ticket No.: 456988

Carol Vuffer

4-26-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-23-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 43 (3024)	B	ABF13034	23,336 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Roger Mesnarich — 4-26-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: 25.67 / 45698

Carol Vogle — 4-26-13
Authorized Signature — Date — Ticket No.:

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 50 (3045)	B	ABF13034	23,482 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/26/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Matt
Driver's signature

4-26-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 26.02

Ticket No.: 457070

Carl Vogt
Authorized Signature

4-26-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

4/C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 51 (3037)	B	ABF13034	23,234 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 4/30/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date: 4/30/13

Site Name: ***Blackfoot Landfill*** — Volume/Weight: 25.60

Carol Douglas — Ticket No.: 457404

Authorized Signature — Date: 4-30-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 52 (3024)	B	ABF13034	22,991 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/30/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Roger Messarich
Driver's signature

4-30-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.45
Ticket No.: 457403

Carol Unfle
Authorized Signature

4-30-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 53 (3024)	B	ABF13034	22,536 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 4/30/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Roger Mesnarich — 4-30-13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.83

Ticket No.: 457477

Carol Vogler — 43013
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 54 (3037)	B	ABF13034	23,818 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
4/30/13 — Date

Company Name: Beelman Trucking
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
4/30/13 — Date

Site Name: *Blackfoot Landfill*
Carol Vuyk
Authorized Signature

Volume/Weight: 26.21
Ticket No.: 457479
4-30-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 58(3024)	B	ABF13034	21,782 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
5/1/13 — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Roger Mesnarich — Driver's signature
5-1-13 — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 23.95 T
Ticket No.: 457551

Janet Chaulton — Authorized Signature
5-1-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 57 (3037)	B	ABF13034	23,727 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — Date: 5/1/13

Company Name: Beelman Trucking
3037
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
Date: 5/1/13

Site Name: ***Blackfoot Landfill***

Volume/Weight: 26.21 T
Ticket No.: 457547

Janet Charlton
Authorized Signature

Date: 5-1-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 56 (3027)	B	ABF13034	23,082 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — Date: 5/1/13

Company Name: Beelman Trucking
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
Date: 5-1-13

Site Name: *Blackfoot Landfill*
Authorized Signature

Volume/Weight: 25.23 T
Ticket No.: 45744
Date: 5-1-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (63(3024)	B	ABF13034	22,291 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/1/13
Name (print or type) — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Roger Mesnarich — 5-1-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: 24.49 T

Ticket No.: 457616

Janet Charlton — 5-1-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (62 (20167)	B	ABF13034	22,036 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — 5/1/13 Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5-1-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 24.23 T

Ticket No.: 457613

Janet Charlton — Authorized Signature
5-1-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 55 (2016)	B	ABF13034	23,877 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature
5/1/13 — Date

Company Name: Beelman Trucking

Driver's signature

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

5-1-13 — Date

Site Name: ***Blackfoot Landfill***

Janet Charlton — Authorized Signature

Volume/Weight: 26.41 I
Ticket No.: 457614
5-1-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil Cel (3037)	B	ABF13034	23,218 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature
5/1/13 — Date

Company Name: Beelman Trucking
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5/1/13 — Date

Site Name: *Blackfoot Landfill*
Janet Charlton — Authorized Signature

Volume/Weight: 25.53 T
Ticket No.: 457606
5-1-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 59 (3043)	B	ABF13034	23,036 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/1/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Wagner
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5-1-13
Date

Site Name: *Blackfoot Landfill*
Connie Houchin
Authorized Signature

Volume/Weight: 25.33
Ticket No.: 457596
5-1-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 60 (3027)	B	ABF13034	22,945 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature
5/1/13 — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature
5-1-13 — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.28 T
Ticket No.: 457602

Janet Charlton — Authorized Signature
5-1-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (64 (3043)	B	ABF13034	21,982 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
5/1/13 — Date

Company Name: Beelman Trucking
Richard Crawford — Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5-1-13 — Date

Site Name: *Blackfoot Landfill*
Connie Bucher — Authorized Signature

Volume/Weight: 24.17
Ticket No.: 457656
5-1-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-454-5160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil (05 (3037)	B	ABF13034	22,073 Kg	/

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/1/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

5/1/13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.39

Ticket No.: 457663

Connie Goucher

5-1-13
Date

Authorized Signature

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 66 (30277)	B	ABF13034	22,782	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature
5/1/13 — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature
5-1-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 23.07
Ticket No. 457667

Authorized Signature
5-1-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 67 (3024)	B	ABF13034	21,382 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Roger Messmer — 5-2-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* Volume/Weight: 23.52

Ticket No.: 457694

Authorized Signature — 5-2-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 09L30431	B	ABF13034	21,700 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Richard Crawford — 5-2-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* Volume/Weight: 23.87

Ticket No.: 457696

Connie Goucher — 5.2.13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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(describe change below) (please use additional paper if necessary)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 68 (2016)	B	ABF13034	23,709 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Driver's signature — 5-2-13 Date

Site Name: *Blackfoot Landfill* — Volume/Weight: 26.05

Ticket No.: 457691

Authorized Signature — 5-2-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 70 (3027)	B	ABF13034	22,945 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** **1 Racehorse Drive, East St. Louis, IL 62205**

Driver's signature — 5-2-13 Date

Site Name: *Blackfoot Landfill* — Volume/Weight: 25.23

Carol Vogle — Ticket No.: 457706

Authorized Signature — 5-2-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- ☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 71 (3037)	B	ABF13034	22,655 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — 5/2/13 Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature
5/2/13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.95
Ticket No.: 457703

Authorized Signature
5-2-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities) 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034	22,954	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

2016 — 5-2-2013
Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: 25.27

Ticket No.: 457747

Carol Vaylor — 5-2-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 74 (13043)	B	ABF13034	22,445 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Crawford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5-2-13
Date

Site Name: ***Blackfoot Landfill***
Carl Vogle
Authorized Signature

Volume/Weight: 24.66 / 45,755
Ticket No.: 5273
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 73 (3024)	B	ABF13034	22,390 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

Roger Messarich — 5-2-2013
Driver's signature — Date

Site Name: *Blackfoot Landfill* Volume/Weight: 20.59 / 45-7751

Carol Vogle — Ticket No.: 5-2-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 75 (3037)	B	ABF13034	23,546 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — Date: 5/2/13

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.90
Ticket No.: 457764

Authorized Signature — Date: 5-2-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 76 (3027)	B	ABF13034	22,291 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

5-2-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.51

Ticket No.: 457770

Authorized Signature

5-2-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8 1-7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 80(30377)	B	ABF13034	22,636 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

5/2/13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.90

Ticket No.: 457818

Carol Vonfle

Authorized Signature

5-2-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8 1-7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 78 (3024)	B	ABF13034	22,745 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Roger Messarich — 5-2-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.04

Ticket No.: 457813

Carol Vinje — 5-2-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-2 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd. Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 77 (2016)	B	ABF13034	23,864 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — 5-2-13 Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: 26.25

Ticket No.: 457809

Carl Vogt — 5-2-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4C

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 79 (3043)	B	ABF13034	22,673 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/2/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Richard Crawford — 5-2-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: 24.93

Ticket No.: 457811

Carol Wolfe — 5-2-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8 1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 82 (2016)	B	ABF13034	23,345 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — 5-3-13 Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: 25.6 t

Ticket No.: 457865

Carol Vaughn — 5-3-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 81 (3043)	B	ABF13034	22,318 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Crawford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5-3-12
Date

Site Name: *Blackfoot Landfill*
Carol Vogle
Authorized Signature

Volume/Weight: 24.61
Ticket No.: 457857
5-3-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 84 (30371)	B	ABF13034	22,809 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5/3/13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.11
Ticket No.: 457871

Authorized Signature — 5-3-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the Information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 83 (3024)	B	ABF13034	21,836 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Roger Mersovich
Driver's signature

5-3-13
Date

Site Name: ***Blackfoot Landfill***

Carol Vonder
Authorized Signature

Volume/Weight: 24.02
Ticket No.: 457869
5-3-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 85 (3027)	B	ABF13034	22,291 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

5-3-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.52
Ticket No.: 457875

Carl Wolfe

5-3-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the Information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

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This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4C

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 86 (3043)	B	ABF13034	22,000 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Lunsford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5-3-13
Date

Site Name: *Blackfoot Landfill*
Carol Vick
Authorized Signature

Volume/Weight: 25.95
Ticket No.: 457918
5-3-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-8

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 87 (2016)	B	ABF13034	23,873 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5-3-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 26.24
Ticket No.: 459128

Carl Vaughn — 5-3-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-31 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status: and I did not repeat the waste determination for this waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-8

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 89 (3037)	B	ABF13034	22,836 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

#3037
Driver's signature — 5/3/13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.11
Ticket No.: 457936

Connie Goucher — 5.3.13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-8

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 88 (3034)	B	ABF13034	22,282 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Roger Messmich #3024
Driver's signature

5-3-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 24.52

Ticket No.: 457935

Connie Vouchia
Authorized Signature

5-3-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-8

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 90 (3027)	B	ABF13034	22,518 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

#3027
Driver's signature

5.3.13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.84

Ticket No.: 457949

Carol Vinyard
Authorized Signature

5-3-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 99 (3057)	B	ABF13034	23,182 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's Signature — 5-6-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.50

Ticket No.: 458196

Authorized Signature — 5-6-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-8

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034	22091 Kg	

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Crawford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5-6-13
Date

Site Name: *Blackfoot Landfill*

Janet Charlton
Authorized Signature

Volume/Weight: 24.18 T
Ticket No.: 458068
5-6-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 95 (e183)	B	ABF13034	17,691 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

McBride Belen — 5-6-13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 19.52
Ticket No.: 458125

Connie Hutchison — 5.6.13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 96 (3044)	B	ABF13034	22,236 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McDaniel
Driver's signature

5-6-13
Date

Site Name: ~~Blackfoot Landfill~~

Volume/Weight: 24.43
Ticket No.: 45822

Authorized Signature

5-6-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

4A-8

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 44(3057)	B	ABF13034	22,700 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5-6-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 24.98
Ticket No.: 458115

Authorized Signature — 5.6.13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 97 (3020)	B	ABF13034	22,609 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — 5-6-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.85 T
Ticket No.: 458133

Connie Holschi — 5-6-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 98 (3043)	B	ABF13034	22,782 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford — 5-6-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.09T
Ticket No.: 458147

Janet Charlton — 5-6-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 101 ((e)83)	B	ABF13034	17,873 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

McKindle Belen — 5-6-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* Volume/Weight: 19.65

Connie Touchet — Ticket No.: 458205
Authorized Signature — 5-6-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 102 (3020)	B	ABF13034	22,545 lb	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beckman Trucking — **Mailing Address:** **1 Racehorse Drive, East St. Louis, IL 62205**

Driver's signature — 5-6-13 Date

Site Name: *Blackfoot Landfill* — Volume/Weight: 24.89

Ticket No.: 458216

Connie Goodlet — 5-6-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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3044

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 100 (3044)	B	ABF13034	22,355 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** **1 Racehorse Drive, East St. Louis, IL 62205**

Richard A. McTeer — 5.6.13
Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: 24.62

Ticket No.: 458210

Connie Houchin — 5-6-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 103 (61837)	B	ABF13034	22,355 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — 5/8/13 Date

Company Name: Beelman Trucking **Mailing Address:** **1 Racehorse Drive**
East St. Louis, IL 62205

McKindle Belen — Driver's signature
5-8-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 23.96
Ticket No.: 458470

Carol Dyk — Authorized Signature
5-8-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 110 (3020)	B	ABF13034	22,955 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

5-9-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.40

Ticket No.: 458688

Authorized Signature

5-9-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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3044

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil III (3044)	B	ABF13034	22,427 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

5.9.13
Date

Site Name: *Blackfoot Landfill*

Carl Vaughn
Authorized Signature

Volume/Weight: 24.80
Ticket No.: 45-8699

5-9-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

4A-8

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 112 (3020)	B	ABF13034	22,945 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/10/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5-10-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.28

Ticket No.: 458746

Carol Vogler — 5-10-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

3044

SPECIAL WASTE DISPOSAL NOTIFICATION

4A-8

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 113 (3044)	B	ABF13034	22,255 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/10/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard A. McDaniel
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5/10/13
Date

Site Name: *Blackfoot Landfill*
Carl Vonfle
Authorized Signature

Volume/Weight: 24.39
Ticket No.: 45876
5/10/13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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3044 4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 224 (3044)	B	ABF13034	22,773 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 5/28/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McDaniel — 5-28-13

Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.10

Ticket No.: 460844

Carol Voyles — 5-28-13

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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SPECIAL WASTE DISPOSAL NOTIFICATION

4A-5

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 223 (3043)	B	ABF13034	22,864 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/28/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Lunsford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5-28-13
Date

Site Name: *Blackfoot Landfill*
Carol Vaughn
Authorized Signature

Volume/Weight: 25.18
Ticket No.: 460816
5-28-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION 222

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

TR#3051

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 222 (3157)	B	ABF13034	23~~0~~9	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/28/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5-28-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.86

Ticket No.: 460802

Carol Wolfe — 5-28-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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3044 HK-6 221 **SPECIAL WASTE DISPOSAL NOTIFICATION**

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034	23,163 K	

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/28/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard W. McDaniel — 5.28.13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.51
Ticket No.: 460764

Carol VanLe — 52813
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

3057

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 225 (3057)	B	ABF13034	22,209 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/28/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

5-28-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 24.49

Ticket No.: 4 6088 2

Carl Duff

5-28-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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3044 4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Manifest # 113

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 231 (3044)	B	ABF13034	22,455 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/29/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McDaniel
Driver's signature

5.29.13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.74

Ticket No.: 461035

Connie Mitchell
Authorized Signature

5.29.13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status.
(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

3057

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Manifest #113

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 230 (3057)	B	ABF13034	22,373 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/29/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 5-29-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.60

Ticket No.: 461032

Authorized Signature — 5.29.13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Manifest # 114

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 232 (30437)	B	ABF13034	23,082 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/29/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Lunsford
Driver's signature

5-29-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.45
Ticket No.: 461087

Carol Wolfe
Authorized Signature

5-29-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 329(3043)	B	ABF13034	22,773 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/29/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Hagford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5-29-13
Date

Site Name: *Blackfoot Landfill*
Authorized Signature

Volume/Weight: 25.08
Ticket No.: 461007
5-29-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

TRK 3057

Company Name: Sullivan International Group
Mailing Address: 1750 Wemble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 228 (3057)	B	ABF13034	22,664 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/29/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

5-29-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.05

Ticket No.: 460957

Carol Vafe

5-29-13
Date

Authorized Signature

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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3044

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator s estimate)	One-time only disposal
Contaminated Soil 227 (3044)	B	ABF13034	23,027 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/29/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard A. McDevitt
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5-29-13
Date

Site Name: *Blackfoot Landfill*
Authorized Signature

Volume/Weight: 25-39
Ticket No.: 460957
5-29-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- ☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 226 (3043)	B	ABF13034	22,300 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 5/29/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Crawford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
5-29-13
Date

Site Name: ***Blackfoot Landfill***
Carol Vogler
Authorized Signature

Volume/Weight: 24.47
Ticket No.: 460940
5-29-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 240 (3043)	B	ABF13034	21,891 lcy	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas I Brent — Signature — 5/31/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford
Driver's signature

5-31-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 2400

Ticket No.: 461307

Carol Vide
Authorized Signature

5-31-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

3057

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 242 (3057)	B	ABF13034	22,182 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas I Brent — Thomas I. Brent — 5/31/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

5-31-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 24.40

Ticket No.: 461328

Carl Vogler

5-31-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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3044 4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 241 (3044)	B	ABF13034	22,318 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas I Brent — Signature — 5/31/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McDaniel — 5.31.13

Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.60

Ticket No.: 461327

Carl Wiegle — 5.31.13

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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044 4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 252 (3044)	B	ABF13034	23,300 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

6·3·13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.78

Ticket No.: 461689

Carl Voyle

Authorized Signature

6-3-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 250L 49?	B	ABF13034	18,255 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Young Trucking — **Mailing Address:** **8647 E. State Road 45, Unionville, IN 47468**

Driver's signature — Date: 6-3-13

Site Name: *Blackfoot Landfill* — Volume/Weight: 20.05

Ticket No.: 46168

Carol VanLey — Date: 6-3-13
Authorized Signature

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 251 C197	B	ABF13034	18,800 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

R. Matt T. Y
Driver's signature

6-3-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 20.65
Ticket No.: 461687

Carol Vaught
Authorized Signature

6-3-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

3057

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 254 (3057)	B	ABF13034	23,300 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/3/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 6-3-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.58

Ticket No: 46700

Authorized Signature — 6-3-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 253(3043)	B	ABF13034	21,836 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/3/13
Name (print or type) — Date

Company Name: Beelman Trucking

Mailing Address: **1 Racehorse Drive**
East St. Louis, IL 62205

Richard Crawford
Driver's signature

6-3-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.05
Ticket No.: 461693

Authorized Signature

6-3-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 225 (30#3)	B	ABF13034	22,[illegible] Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Driver's signature — Richard Warfield

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6-3-13
Date

Site Name: *Blackfoot Landfill*
Carol Vogt
Authorized Signature

Volume/Weight: 24.63
Ticket No.: 461534
6-3-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 224 (42)	B	ABF13034	17,264 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Driver's signature — 5-3-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 18.86

Ticket No.: 461596

Authorized Signature — 6-3-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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(describe change below) (please use additional paper if necessary)

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9454A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 247 (3044)	B	ABF13034	23,000Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/3/13
Name (print or type) — Date

Company Name: Beelman Trucking
Richard A McDevitt
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6.3.13
Date

Site Name: *Blackfoot Landfill*
David Voyle
Authorized Signature

Volume/Weight: 25.42
Ticket No.: 461616
6-3-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- ☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- ☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
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- ☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status.

(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 246 (49)	B	ABF13034	18,373 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Driver's signature

6-3-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 20.17
Ticket No.: 461603

Authorized Signature

6-3-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 245 (48)	B	ABF13034	17,472 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Barry Amos — 6/3/13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 19.17

Ticket No.: 46159

Carol Vaught — 6-3-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsiblities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY In the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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9M-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 248 (3043)	B	ABF13034	22,755 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/3/13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Harford — 6-3-13

Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.97

Ticket No.: 46625

Carol Vaughn — 6-3-13

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4A-2

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 249 (48)	B	ABF13034	17,864 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/3/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Larry Ames — 6/3/13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 1948
Ticket No.: 461659

Carol Wolfe — 6-3-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the first load of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 268 (19)	B	ABF13034	18,927 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/4/13 — Date

Company Name: Young Trucking
Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Robert J. Young — Driver's signature
6-4-13 — Date

Site Name: *Blackfoot Landfill*
Volume/Weight: 20.81
Ticket No.: 461868

Carol Voyle — Authorized Signature
6-4-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 256 (42)	B	ABF13034	16,873 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/4/13 — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature

6-4-13 — Date

Site Name: *Blackfoot Landfill*

Authorized Signature

Volume/Weight: 18.59
Ticket No.: 461741
6-4-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 255 (3043)	B	ABF13034	21,845 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/5/13
Name (print or type) — Date

Company Name: Beelman Trucking
Richard Crawford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6-4-13
Date

Site Name: *Blackfoot Landfill*
Carl Wiggle
Authorized Signature

Volume/Weight: 24.03
Ticket No.: 461738
6-4-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

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3044 4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 258 (3044)	B	ABF13034	22,282 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/4/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Richard A. McDonald — 6-4-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: 24.35

Carol Von — Ticket No.: 461750
Authorized Signature — 6-4-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

3057

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 3C 259 (3057)	B	ABF13034	22,855 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/4/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's Signature — 6-4-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 26.53
Ticket No.: 461754

Authorized Signature — 6/4/13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 257 (19)	B	ABF13034	18,236 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/4/13 — Date

Company Name: Young Trucking
Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature
6-4-13 — Date

Site Name: *Blackfoot Landfill*
Volume/Weight: 20.07
Ticket No.: 46751

Authorized Signature
6-4-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 260 (48)	B	ABF13034	18,209 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/4/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — 6/4/13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 20.06
Ticket No.: 461762

Authorized Signature — 6-4-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-10

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 261 (3043)	B	ABF13034	25,045 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — Date: 6/4/13

Company Name: Beelman Trucking
Richard Crawford — Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Date: 6-4-13

Site Name: *Blackfoot Landfill*

Carol Vaughn — Authorized Signature

Volume/Weight: 25.28
Ticket No.: 461799

Date: 6-4-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 263 (19)	B	ABF13034	19,136 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/4/13

Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — 6-4-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 21.18
Ticket No.: 461806

Carol Vale — 6-4-13

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- ☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- ☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-10

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 2602427	B	ABF13034	18,727 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/4/13

Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — 6-4-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 20.5b

Ticket No.: 461817

Carol Vogt — 6-4-13

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4A-10 3044

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 264 (3044)	B	ABF13034	23,027 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/4/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard M. McDermott — 6.4.13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.35
Ticket No.: 461813

Carol Vogt — 6-4-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4A-10

SPECIAL WASTE DISPOSAL NOTIFICATION

3057

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 265 (30577)	B	ABF13034	22,064 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/4/13
Name (print or type) — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature — 6-4-13 Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 24.37
Ticket No.: 461815

Authorized Signature — 6-4-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilties), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-10

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 266 (48)	B	ABF13034	18,127 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/4/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Larry Ames — 6/4/13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 19.94
Ticket No.: 461828

Connie Lauching — 6-4-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ NO changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status.
(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

AA-3

SPECIAL WASTE DISPOSAL NOTIFICATION

~~77040~~ 77140

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 267 (3043)	B	ABF13034	22,136 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/3/13
Name (print or type) — Date

Company Name: Beelman Trucking
Richard Crawford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6-4-13
Date

Site Name: *Blackfoot Landfill*
Carl Vogle
Authorized Signature

Volume/Weight: 24360
Ticket No.: 46185
6-4-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 269 (42)	B	ABF13034	17,873 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/4/13 — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature

6-4-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 19.68

Ticket No.: 461869

Carol Vaught — Authorized Signature

6-4-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight generator's estimate	One-time only disposal
Contaminated Soil 283 (3043)	B	ABF13034	23,236 lb	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Signature — 6-5-13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford — 6-5-13

Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume Weight: 25.59

Ticket No. 462041

Carol Vonk — 6-5-13

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal) 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No. and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 270 (3043)	B	ABF13034	23,100 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature
6/5/13 — Date

Company Name: Beelman Trucking
Richard Crawford — Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6-5-13 — Date

Site Name: ***Blackfoot Landfill***
Carl Vogler — Authorized Signature

Volume/Weight: 25.33
Ticket No.: 461911
6-5-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the Information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the first load of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- ☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- ☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
- ☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- ☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight generator's estimate	One-time only disposal
Contaminated Soil 271 (3044)	B	ABF13034	23,182 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Signature — 6.5.13

Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McDonald

Driver's signature

6.5.13

Date

Site Name: *Blackfoot Landfill*

Volume Weight: 25.56

Ticket No. 461919

Carol Vogt

Authorized Signature

6-5-13

Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal) 329 IAC 10-8-1.7(d) (the special waste verification process, generator responsibilities) 329 IAC 10-8-1.9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal-processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8-1.8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8-1.7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 273 (19)	B	ABF13034	18,955 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
[signature] — Signature
6/5/13 — Date

Company Name: Young Trucking
[signature] — Driver's signature

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468
6-5-13 — Date

Site Name: *Blackfoot Landfill*
[signature] — Authorized Signature

Volume/Weight: 2087
Ticket No.: 461922
6-5-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

TH-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 274 (42)	B	ABF13034	17,809 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature
6/5/13 — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature
6-5-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 19.61
Ticket No.: 461920

Carol Vo
Authorized Signature
6-5-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 275 (48)	B	ABF13034	17,091 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — Date: 6/5/13

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — Date: 6/5/13

Site Name: *Blackfoot Landfill*

Volume/Weight: 17.60
Ticket No.: 461920

Authorized Signature — Date: 6-5-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 376 (11)	B	ABF13034	17,955 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/5/13 — Date

Company Name: Young Trucking
Driver's signature

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468
6-5-13
Date

Site Name: *Blackfoot Landfill*
Carol Vaught
Authorized Signature

Volume/Weight: 1968
Ticket No.: 461950
6-5-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume Weight generator's estimate	One-time only disposal
Contaminated Soil 27 (3043)	B	ABF13034	23,300 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

Thomas J. Brent — Signature — 6.5.13
Name (print or type) — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Lunsford
Driver's signature

6-5-13
Date

Site Name: *Blackfoot Landfill*

Volume Weight: 25.74

Ticket No. 461969

Carol Vogt
Authorized Signature

6-5-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal) 329 IAC 10-8.1-7(d) (the special waste verification process, generator responsibilities), 329 IAC 10-8.1-9 (the special waste certification process generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 279(42)	B	ABF13034	18,264 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — Date: 6/5/13

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Driver's signature — Date: 6-5-13

Site Name: *Blackfoot Landfill*

Volume/Weight: 20.01

Ticket No.: 461979

Authorized Signature — Date: 6-5-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 281 (48)	B	ABF13034	16,555 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature — Date: 6/5/13

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — Date: 6/5/13

Site Name: *Blackfoot Landfill*

Volume/Weight: 18.13
Ticket No.: 461975

Authorized Signature — Date: 6-5-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8 1-7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 280 (19)	B	ABF13034	16,545 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/5/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

R.L.M.V. — 6-5-13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 18.14
Ticket No.: 461974

Carol Vogel — 6-5-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 285 (A)	B	ABF13034	18,964 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge

[illegible] J. Bich — Name (print or type)
[signature] — Signature
5/3 — Date

Company Name: Young Trucking
R. Lt T. [illegible] — Driver's signature

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468
6-6-13 — Date

Site Name: *Blackfoot Landfill*
[signature] — Authorized Signature

Volume/Weight: 20.79
Ticket No 462047
6-5-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal) 329 IAC 10-8 1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1 9 (The special waste certification process generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature

Please check the appropriate box (to be completed by Generator)

No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste

The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have determined the change could not have led to a change in regulatory status and I did not repeat the waste determination for this waste

The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have repeated the waste determination and have determined this change did not cause a change in regulatory status

The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste I have received from the owner, operator, or permittee of the MSWLF unit or non MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address Telephone No and Technical Contact Changes may also be made in the Certification No Verification No and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use and contains all regulatory requirements Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8 1-8(e) Generators may use their own Disposal Notification Form as long as it complies with all regulatory requirements under 329 IAC 10 8 1 7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 286(42)	B	ABF13034	15,182 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Signature
6.5.13 — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature
6-5-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 16.86
462040

Ticket No.. 6573

Authorized Signature
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No , and Technical Contact. Changes may also be made in the Certification No. Verification No., and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8 1-7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

1A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 282 (11)	B	ABF13034	18,300 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6.5.13
Name (print or type) — Signature — Date

Company Name: Young Trucking — Mailing Address: 8647 E. State Road 45, Unionville, IN 47468

Driver's signature — Date: 6-5-13

Site Name: ***Blackfoot Landfill*** — Volume/Weight: 20.37

Ticket No.: 462035

Authorized Signature — Date: 6-5-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature

Please check the appropriate box (to be completed by Generator)

[X] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

[ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

[ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8 1-7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 284 (48)	B	ABF13034	16,318 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Signature — 6/5/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — 6/5/13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 17.98
Ticket No.: 462034

Carol Vogler — 6-5-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8 1-9 (The special waste certification process, generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied, however, those photocopied signatures will be considered to have the same authority as the original signature

Please check the appropriate box (to be completed by Generator)

[✓] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

[ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste I have determined the change could not have led to a change in regulatory status, and I did not repeat the waste determination for this waste.

[ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status

[ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8 1-7(d) This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 304 (42)	B	ABF13034	17,027 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — 6-6-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 18.72

Ticket No.: 462223

Carl Vorhe — 6-6-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 303 (3043)	B	ABF13034	22,860 KG	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford
Driver's signature

6-6-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.08

Ticket No.: 462222

Carl Wolf
Authorized Signature

6-6-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5 3044

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 302 (3044)	B	ABF13034	23,155 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard A. McDaniel
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6/6/13
Date

Site Name: *Blackfoot Landfill*
Carol Vaughn
Authorized Signature

Volume/Weight: 25.42
Ticket No.: 460224
6-6-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 291 (42)	B	ABF13034	16,282 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45**
Unionville, IN 47468

Driver's signature — 6-6-13 Date

Site Name: *Blackfoot Landfill* Volume/Weight: 17.92

Ticket No.: 462102

Carol Vogel — 6-6-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibllities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 289 (3043)	B	ABF13034	23,091 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard Warford
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6-6-13
Date

Site Name: *Blackfoot Landfill*
Carl Vogle
Authorized Signature

Volume/Weight: 25.31
Ticket No.: 462046
6-6-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 288 (3044)	B	ABF13034	23,173 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking
Richard A. McDaniel
Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6.6.13
Date

Site Name: ***Blackfoot Landfill***

Carl Wu
Authorized Signature

Volume/Weight: 25.48
Ticket No.: 462095
6-6-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-3

SPECIAL WASTE DISPOSAL NOTIFICATION

3057

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 287 (3057)	B	ABF13034	22,508 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

6-6-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 24.67

Ticket No.: 462090

Authorized Signature

6-6-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 293 (28)	B	ABF13034	17,564 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Sandy Harper — 6-6-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 19.35
Ticket No.: 462117

Carol Vu — 6-6-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 292(40)	B	ABF13034	17,300 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45 Unionville, IN 47468**

Steve Bunger — 6/6/2013
Driver's signature — Date

Site Name: *Blackfoot Landfill* Volume/Weight: 19.07

Ticket No.: 462116

Carol Ung — 6-6-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92105

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 290 (19)	B	ABF13034	17,000 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

R. Lee Young
Driver's signature

6-6-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 18.64 / 462115

Ticket No.:

Carol Vogt
Authorized Signature

6-6-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibllities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

3057

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 294 (3057)	B	ABF13034	22,891 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

6-6-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.16

Ticket No.: 462157

Authorized Signature

6-6-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 296 (3043)	B	ABF13034	23,150 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford — 6-6-13
Driver's signature — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.55

Ticket No.: 462158

Carol Vu — 6-6-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 297 (42)	B	ABF13034	17,327 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — Date: 6-6-13

Site Name: *Blackfoot Landfill*

Volume/Weight: 18.92
Ticket No.: 466161

Authorized Signature — Date: 6-6-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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(describe change below) (please use additional paper if necessary)

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-5 3044

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 295 (3044)	B	ABF13034	23,173 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Richard M. McDaniel — 6-6-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: 25.51 / 46215 lb

Carl Vogt — Ticket No.: 6-6-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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(describe change below) (please use additional paper if necessary)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 300 (28)	B	ABF13034	16,882 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45**
Unionville, IN 47468

Randy Harpers — 6-6-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* Volume/Weight: 18.56

Carol Vuke — Ticket No.: 462180
Authorized Signature — 6-6-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 298 (19)	B	ABF13034	18,291 Kg	✓

X *I hereby certify that the above information is true and accurate to the best of my knowledge.*

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

K. Lt T. Y
Driver's signature

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

6-6-13
Date

Site Name: ***Blackfoot Landfill***

Carl Vonf
Authorized Signature

Volume/Weight: 20.14

Ticket No.: 462183

6-6-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

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fA-5

SPECIAL WASTE DISPOSAL NOTIFICATION

ompany Name: Sullivan International Group
lailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

hone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 299 (40)	B	ABF13034	18,009 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/6/13 — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature

6-6-13 — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 19.81

Ticket No.: 462185

Authorized Signature

6/6/2013 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

3057

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 301 (3057)	B	ABF13034	23,450 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/6/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

6-6-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.79

Ticket No.: 462217

Carl Voyles

6-6-13

Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status.
(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

44-5

SPECIAL WASTE DISPOSAL NOTIFICATION

80160

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 305 (3043)	B	ABF13034	23,282 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/19/13 — Date

Company Name: Beelman Trucking
Richard Crawford — Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6-7-13 — Date

Site Name: *Blackfoot Landfill*
Authorized Signature

Volume/Weight: 25.76
Ticket No.: 462273
6-7-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the first load of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
- [ ] The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

~~79220~~ 3057

79320

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 306 (3057)	B	ABF13034	25,100 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/19/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

6-7-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.39

Ticket No.: 462278

Authorized Signature

6-7-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-S

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Wombie Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 3090(48)	B	ABF13034	15,945 lbs	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45 Unionville IN 47468**

Driver's signature — Date: 6/7/13

Site Name: *Blackfoot Landfill* Volume/Weight: 17.54

Ticket No.: 462297

Authorized Signature — Date: 6-7-13

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1760 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 308 (19)	B	ABF13034	18,264 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

R. Lutz — 6-7-13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 20.05
Ticket No.: 462294

Carol Vogt — 6-7-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status.
(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

TR-3

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 307 (3044)	B	ABF13034	22,473 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McDaniel
Driver's signature

6.7.13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 24.75

Ticket No.: 462287

Carol Wolf
Authorized Signature

6-7-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Malling Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 311 (49)	B	ABF13034	18,555 kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

6-7-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 20.43

Ticket No.: 462307

Authorized Signature

6-7-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option Items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4M-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil SID (42)	B	ABF13034	17,782 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/7/13 — Date

Company Name: Young Trucking

Mailing Address: **8647 E. State Road 45**
Unionville, IN 47468

Driver's signature
6-7-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 19.58
Ticket No.: 462300

Authorized Signature
6-7-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 318(48)	B	ABF13034	16,354 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/7/13 — Date

Company Name: Young Trucking
Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Larry Allen — Driver's signature
6/7/13 — Date

Site Name: *Blackfoot Landfill*
Volume/Weight: 17.84
Ticket No.: 462354

Carol Vega — Authorized Signature
6-7-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-5 3044

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 316 (3044)	B	ABF13034	23,327 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/19/13 — Date

Company Name: Beelman Trucking
Richard A. McDowell — Driver's signature

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205
6-9-13 — Date

Site Name: *Blackfoot Landfill*
Carol Vaughn — Authorized Signature

Volume/Weight: 25.73
Ticket No.: 462355
6-7-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 317 (19)	B	ABF13034	16,873 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking — **Mailing Address:** **8647 E. State Road 45 Unionville, IN 47468**

Driver's signature — 6-7-13 Date

Site Name: *Blackfoot Landfill* — Volume/Weight: 18.58

Ticket No.: 462351

Authorized Signature — 6713 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

3057

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 315 (3057)	B	ABF13034	22,941 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Driver's signature

6-7-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 25.20

Ticket No.: 462348

Authorized Signature

6-7-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 314 (3043)	B	ABF13034	23,100 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/19/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Richard Crawford — 6-7-13
Driver's signature — Date

Site Name: *Blackfoot Landfill* — Volume/Weight: 25.38

Ticket No.: 462340

Carol Dorf — 6-7-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 312(90)	B	ABF13034	18,373 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/7/13 — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature
6/7/2013 — Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 20.26
Ticket No.: 462335

Authorized Signature
6-7-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 313 (11)	B	ABF13034	17,827 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/7/13 — Date

Company Name: Young Trucking
Driver's signature

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468
6-7-13 — Date

Site Name: *Blackfoot Landfill*
Carol Vogle — Authorized Signature

Volume/Weight: 19.58
Ticket No.: 462330
6-7-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

- [x] No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.
- [ ] The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.
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SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil	B	ABF13034	17,836 KG	

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking — **Mailing Address:** **8647 E. State Road 45, Unionville, IN 47468**

Driver's signature — 6-7-13 Date

Site Name: *Blackfoot Landfill* — Volume/Weight: 19.63

Ticket No.: 463367

Authorized Signature — 6.7.13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 319 (42)	B	ABF13034	17,818 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature — 6-7-13 Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 19.59

Ticket No.: 462360

Authorized Signature — 6-7-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibllities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 322 (407)	B	ABF13034	17,818 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Jim Berger — 6/7/2013
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 19.59
Ticket No.: 462391

Carol Vogle — 6-7-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☐ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 321 (11)	B	ABF13034	18,736 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/7/13 — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature

6-7-13 — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 20.65
Ticket No.: 46239

Carol Vinson — Authorized Signature

6-7-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status.
(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1760 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 327 (48)	B	ABF13034	18,336 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Larry Arnold — 6/7/13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 20.35
Ticket No.: 462420

Carol Vogle — 6-7-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 324 (3057)	B	ABF13034	23,255 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking — **Mailing Address:** 1 Racehorse Drive, East St. Louis, IL 62205

Driver's signature — Date

Site Name: ***Blackfoot Landfill*** — Volume/Weight: 25.70

Ticket No.: 462411

Authorized Signature — 6-7-13 Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the first load of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 323 (3043)	B	ABF13034	23,191 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Name (print or type)
Thomas J. Brent — Signature
6/7/13 — Date

Company Name: Beelman Trucking
Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard Crawford — Driver's signature
6-7-13 — Date

Site Name: *Blackfoot Landfill*
Volume/Weight: 25.51
Ticket No.: 462406

Carol Wolf — Authorized Signature
6-7-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

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4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 325 (19)	B	ABF13034	18,095 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

R. Matt Young — 6-9-13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 19.94

Ticket No.: 462423

Carol Vaughn — 6-7-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

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Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

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4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: **Thomas Brent**

Generator Location: **NSA Crane**
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 328 (42)	B	ABF13034	17,982 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/7/13
Name (print or type) — Signature — Date

Company Name: Young Trucking **Mailing Address:** **8647 E. State Road 45**
Unionville, IN 47468

[signature]
Driver's signature

6-7-13
Date

Site Name: ***Blackfoot Landfill***

Volume/Weight: 19.80

Ticket No.: 46242

Carl Vogle
Authorized Signature

6-7-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

7044 4A-1

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 326 (3044)	B	ABF13034	23,636 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J. Brent — Thomas J. Brent — 6/9/13
Name (print or type) — Signature — Date

Company Name: Beelman Trucking

Mailing Address: 1 Racehorse Drive
East St. Louis, IL 62205

Richard A. McFarlin — 6-9-13
Driver's signature — Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 25.16
Ticket No.: 46242

Carol Vaj — 6-9-13
Authorized Signature — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or proccessing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☒ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have determined the change could not have led to a change in regulatory status; and I did not repeat the waste determination for this waste.

☐ The following changes to a relevant raw material or to the waste generating process has occurred since the last shipment of the waste. I have repeated the waste determination and have determined this change did not cause a change in regulatory status.

☐ The following change to a relevant raw material or to the waste generating process has occurred since the last shipment of waste. I have repeated the waste determination and have determined that this change caused a change in the regulatory status of the waste. I have received from the owner, operator, or permittee of the MSWLF unit or non-MSWLF unit an updated verification notice that reflects the change in regulatory status. **(describe change below)** (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 329 (48)	B	ABF13034	18,291 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Name (print or type)
Signature
6/10/13 — Date

Company Name: Young Trucking
Larry Ames — Driver's signature

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468
6/10/13 — Date

Site Name: *Blackfoot Landfill*
Authorized Signature

Volume/Weight: 20 01
Ticket No.: 462583
6-10-13 — Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

☑ No changes have been made to any relevant raw material or to the waste generating process since the last shipment of waste.

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(describe change below) (please use additional paper if necessary)

Disposal Facilities may make corrections to this Disposal Notification ONLY in the Generator Information and Transporter Information areas. Such as, Generator Name, Transporter Name, Mailing Address, Telephone No., and Technical Contact. Changes may also be made in the Certification No., Verification No., and Volume/Weight of the Waste Information Section.

INFORMATION MUST HAVE BEEN PREVIOUSLY SUBMITTED BY THE GENERATOR NOT LEFT BLANK!

This form has been provided by IDEM for Generator use, and contains all regulatory requirements. Option items have been included to assist the MSWLF and non-MSWLF to comply with 329 IAC 10-8.1-8(e). Generators may use their own Disposal Notification Form, as long it complies with all regulatory requirements under 329 IAC 10-8.1-7(d). This form is NOT acceptable for disposal of asbestos or petroleum contaminated wastes.

4A-5

SPECIAL WASTE DISPOSAL NOTIFICATION

Company Name: Sullivan International Group
Mailing Address: 1750 Womble Rd, Ste 100
San Diego, CA 92106

Technical Contact: Thomas Brent

Generator Location: NSA Crane
300 HWY 361
Crane, IN 47522

Phone: 812-854-6160

Waste Name	Category A or B	Verification No.	Volume/Weight (generator's estimate)	One-time only disposal
Contaminated Soil 330 (42)	B	ABF13034	15,509 Kg	✓

I hereby certify that the above information is true and accurate to the best of my knowledge.

Thomas J Brent — Name (print or type)
Thomas J. Brent — Signature
6/10/13 — Date

Company Name: Young Trucking

Mailing Address: 8647 E. State Road 45
Unionville, IN 47468

Driver's signature

6-10-13
Date

Site Name: *Blackfoot Landfill*

Volume/Weight: 17.05
Ticket No.: 462603

Authorized Signature

6-10-13
Date

Pursuant to Solid Waste Rule 329 IAC 10-28-21 (facility responsibility for special waste disposal), 329 IAC 10-8.1-7(d) (the special waste verification process; generator responsibilities), 329 IAC 10-8.1-9 (The special waste certification process; generator responsibilities) and 329 IAC 10-8.1-5(f), all special waste delivered for disposal shall be accompanied by a disposal notification. Regulatory citations require generators to provide the disposal facility or processing facility with a written disposal notification for each load of special waste to be disposed. The solid waste disposal/processing facility shall check each load of special waste with the information provided on this form with the Special Waste Certification or the Special Waste Verification Notice. An original signature must appear on the disposal notification for the **first load** of the waste. The signature on the disposal notifications for subsequent loads of the same waste may be photocopied; however, those photocopied signatures will be considered to have the same authority as the original signature.

Please check the appropriate box (to be completed by Generator)

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