

January 20, 2022

Ms. Meghan Kuczka Division of Environmental Remediation NYSDEC, Region 9 270 Michigan Avenue Buffalo, NY 14203-2999

Re: National Grid Dewey/Kensington Service Center (Site #915144) **PRR** 

Dear Ms. Kuczka:

Enclosed for your review is the Periodic Review Report (PRR) for the National Grid Dewey/Kensington Service Center Site (Site No. 915144), with modifications per your email dated December 15, 2022.

The PRR includes information from the period November 1, 2020 – November 1, 2021:

If you have any questions, please feel free to contact me at 315.428.5652.

Sincerely,

for SPS

Steven P. Stucker, C.P.G. Lead Environmental Engineer

Lisa Montesano – NG ecc:

Devin Shay- Groundwater & Environmental Services, Inc.

#### I. Introduction

#### A. Brief Site Summary –

The National Grid Dewey/Kensington Service Center Site (#915144) is located in Buffalo, New York. National Grid owns the property and services its customers from the active facility. Service trucks, equipment, and materials are stored and maintained onsite. A mechanic's shop, several administrative buildings, an above ground fuel island, and an employee parking lot are currently located on-site and are part of the service center.

Prior to 1992, the service center also served as a hazardous waste management facility permitted by the New York State Department of Environmental Conservation (NYSDEC) (Part 373 Permit No. 9-1402-00397/00001-0). National Grid stored spent electrical transformers containing polychlorinated biphenyl- (PCB-) laden oil, various solid wastes, and bulk waste oils on-site. Some liquid wastes were stored within underground storage tanks (USTs). The hazardous waste management facility was closed in December 1992, in accordance with a NYSDEC-approved closure plan.

During excavation activities in the mid 1990s, it was discovered that soil and groundwater were contaminated near a UST identified as Solid Waste Management Unit (SWMU) #7. Multiple USTs were subsequently removed, and an investigation including the advancement of soil borings and the installation of groundwater monitoring wells was completed. A remedial action was completed in 2002 and a long-term groundwater monitoring program was implemented.

On October 3, 2011, National Grid received official notification that the site was deleted from the New York State Registry of Inactive Hazardous Waste Disposal Sites (letter from Ms. Kelly Lewandowski, NYSDEC Chief Site Control Section, to Mr. Chuck Willard, NG SIR Director).

- B. **Remedial Program Effectiveness** During the reporting period (November 01, 2020, to November 01, 2021), the long-term remedial objectives were met for the site.
- C. **Remedial Program Compliance** The major elements within the Institutional Control/Engineering Control(s) (IC/EC) Plan are in compliance.

D. **Remedial Program Recommendations** - It is recommended that no changes be made to the IC/EC Plan. It is recommended that the Project Review Report (PRR) submittal frequency (annual) remain the same. The next PRR submittal deadline would be December 1, 2022.

#### II. Site Overview

#### A. Site Location and Boundaries -

The Dewey/Kensington Service Center is an active National Grid facility, encompasses approximately 23 acres, and is generally located within the center of Buffalo, New York in a predominantly residential area. To the west are Delaware Park, Canisius College, and Forest Lawn Cemetery; to the east are Fillmore Junior High School and the Erie County Medical Center; immediately to the west are the St. Mary School and Sisters of Charity Hospital; and to the south is a four lane expressway.

The site is bordered to south by Kensington Avenue and to the north by Dewey Avenue. The New York Central Railroad tracks boarder the site to the east. The expressway runs along the western side of the site.

#### B. Regulatory History and Remedy Features -

In September 1992, excavation activities at the facility, in the vicinity of Building #13, revealed petroleum-impacted gravel and a broken vent line connected to an underground waste oil tank. The former waste oil tank was removed and four groundwater monitoring wells (ESI-1, ESI-2, ESI-3, and ESI-4) were installed in the vicinity of the former tank to supplement an existing monitoring well (MW-1) and to facilitate periodic groundwater monitoring in this area.

In February 1994, National Grid agreed to conduct a focused Resource Conservation and Recovery Act (RCRA) Facility Assessment- (RFA-) type soil and groundwater investigation, and a Focused Risk Assessment/ Corrective Measures Study (FRA/CMS) to address the concerns identified by the RFA.

During Fall 1994, National Grid conducted soil and groundwater investigation activities in accordance with the NYSDEC-approved *Soil and Groundwater Investigation Work Plan* (1994). These investigations showed the presence of several volatile organic compounds (VOCs) and polychlorinated biphenyls (PCBs) in groundwater at concentrations above NYSDEC Division of Water Technical and Operational Guidance Series (TOGS) 1.1.1 – *Ambient Water Quality Standards and Guidance Values* (NYSDEC, 1998, amended 2000). Based on these results, NYSDEC requested

implementation of the quarterly groundwater monitoring program proposed in the SWMU #7 Soil/Groundwater Investigation Report (1994).

The SWMU #7 Focused Risk Assessment and Corrective Measures Study Report (FRA/CMS Report) (1995, revised 1996) concluded that the limited action alternative (i.e., implementing a groundwater monitoring program) would adequately meet the corrective measure objective of mitigating the offsite migration of impacted groundwater. Following the initial submittal of the FRA/CMS Report, a Groundwater Sampling and Analysis Plan (SAP) (1996) was submitted to NYSDEC in May 1996. The May 1996 SAP was then revised based upon NYSDEC comments, and the revised SAP for the groundwater monitoring program was presented in the revised FRA/CMS Report dated June 1996.

In November 1997, National Grid entered into a Consent Order with NYSDEC to guide future site monitoring and to establish a framework for implementing additional site investigation or remediation. As mandated in the Consent Order, semiannual (spring and fall) groundwater monitoring events are conducted at SWMU #7 monitoring wells. The list of wells sampled during each groundwater monitoring event has been modified through time in response to NYSDEC requirements and the results of investigation/evaluation activities, as agreed to by NYSDEC.

The Consent Order specifies that a contingency plan must be implemented to evaluate additional remedial activities if analytical results from monitoring wells located at the property boundary indicate an exceedance of NYSDEC groundwater quality standards presented in TOGS 1.1.1 for two consecutive monitoring events. The monitoring wells designated as property boundary wells have changed, as new monitoring wells have been installed as part of the contingency plan implementation. For example, monitoring wells MW-7 and MW-9 were designated as property boundary wells in the Consent Order. In 1999, the property boundary wells included monitoring wells MW-6, MW-7, MW-11, MW-12, and MW-14. The current property boundary well arrangement includes monitoring wells MW-6, MW-11, MW-12, MW-20, MW-21, and MW-24 (installed spring 2002).

#### III. Evaluate Remedy Performance, Effectiveness, and Protectiveness

A. **Evaluation of Remedy Performance** - The wells are part of the remedy performance. However, there is no current requirement for a site inspection of the existing facility buildings, fences, or fuel tanks. Based on the well inspections and analytical data, the remedy performance has been effective in protecting facility workers and the public.

#### IV. IC/EC Plan Compliance Report

#### A. IC/EC Requirements and Compliance

1. **IC/EC Controls** 

The ICs/ECs included:

- Semi-annual groundwater monitoring well inspections of the following wells: MW-1, MW-2, MW-5, MW-6, MW-7, MW-9, MW-10, MW-11, MW-12, MW-13, MW-15, MW-16, MW-17, MW-19, MW-20, MW-21, MW-24, MW-25, and ESI-1.
- Annual groundwater monitoring well sampling and analysis of the following wells: MW-1, MW-6, MW-9, MW-11, MW-12, MW-20, MW-21, MW-24.
- 2. **IC/EC Goals -** Each goal is being met and/or working effectively.
- 3. **IC/EC Corrective Measures** No deficiencies were noted during the semi-annual inspections.
- 4. IC/EC Conclusions/Recommendations The program is in compliance and there are no recommendations at this time. During the June 2021 monitoring event, NYSDEC AWQS for PCBs were exceeded in the samples collected at wells MW-1 and MW-9. All monitoring wells downgradient of MW-1 and MW-9 that were sampled (MW-6, MW-11, MW-12, MW-20, MW-21, and MW-24) exhibited concentrations below laboratory detection limits for PCBs.
- B. IC/EC Certification Refer to PRR Form Attachment 1, for the certification.
- V. Monitoring Plan Compliance Report The Annual Monitoring Report will be submitted to the NYSDEC by November 30, 2020.
- VI. Operation & Maintenance (O&M) Plan Compliance Report Not Applicable
- VII. Overall PRR Conclusions and Recommendations
  - A. Compliance with Site Management Plan (SMP)
    - 1. **Requirements -** All IC/EC Plan requirements were met during this reporting period.

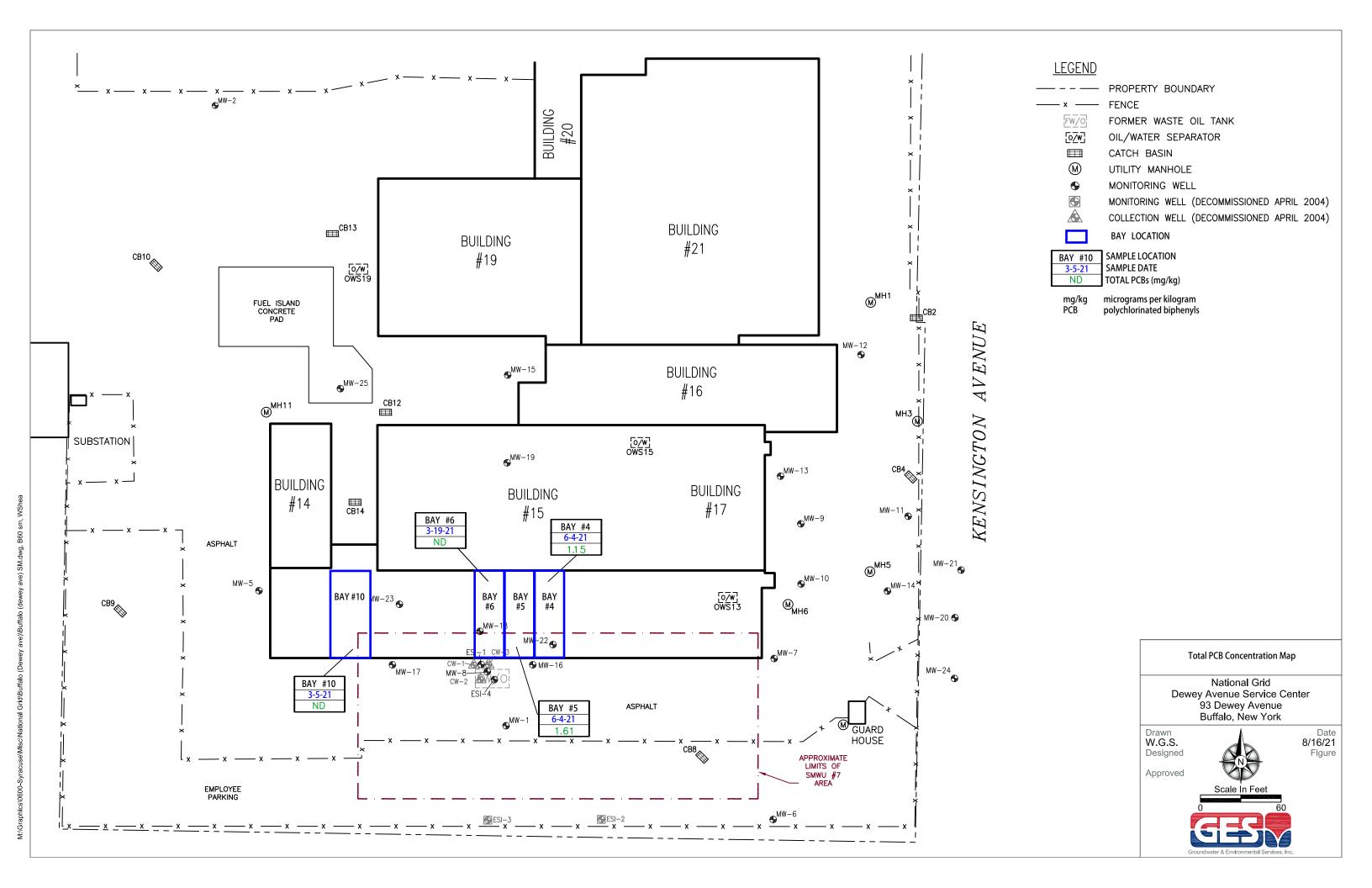
- 2. **Exposure Pathways** There are no new completed exposure pathways resulting in unacceptable risk.
- 3. **Proposed Plans and Schedule to Meet Compliance** No plan proposed.
- B. **Performance and Effectiveness of the Remedy** The remedy as described by the Consent Order and executed by National Grid has been effective in meeting the program goals.
- **C.** Future PRR Submittals The frequency of PRR Submittals should remain annual. Therefore, the next PRR submittal deadline will be December 1, 2022.

VIII. Additional Guidance – National Grid completed soil borings and collected soil samples for laboratory analysis to evaluate soil that was planned to be excavated as part of a paving project in the area northwest of the warehouse building (building DK-21). Analytical results for the soil borings identified elevated concentrations of PCBs in shallow subsurface soil. Since the area northwest of building DK-21 was not previously identified as a solid waste management unit (SWMU), National Grid submitted a June 24, 2021 letter to the NYSDEC which provided written notification regrading the discovery of a newly-identified SWMU at the facility. National Grid submitted a Newly-Identified SWMU Assessment Work Plan letter to the NYSDEC on July 27, 2021 and received conditional approval for the proposed SWMU assessment work on October 20, 2021. National Grid plans to implement additional soil investigation activities during 2022 and additional investigation and/or remedial efforts will be proposed, as necessary, based on the investigation results.

National Grid replaced indoor, hydraulic vehicle lift systems in the Fleet maintenance garage (building DK-13) between March and June, 2021. To retire the lifts, concrete floor slab and subsurface soils were excavated to remove lift system equipment and prepare the areas for installation of the new lifts. Four separate lift systems were removed and replaced including bays 10, 6, 5 and 4 (listed in order of construction) (**Figure 1**). To do this, in each bay the eightinch concrete floor was saw cut and removed in an area measuring approximately 20 feet by 32 feet . Next, an excavation measuring approximately 8 feet by 26 feet was completed to a depth of 6 feet, 8 inches below ground surface. Excavation was performed using conventional earthwork equipment, which was used to stage project concrete and sub-base materials on/within a polyethylene plastic sheeting envelope. Clean fill was imported to backfill around the newly installed hydraulic lifts (**Attachment 2**). In addition, water derived from the excavations was containerized in on-site fractionalization tanks. During waste characterization of soils derived from two of the four excavation areas, low levels of PCBs were detected, despite the absence of

Analytical Reports are included in **Attachment 3**. Concrete and soils from these areas were shipped for off-site disposal at US Ecology Wayne Disposal, Michigan (**Attachment 4**). Associated water received on-site treatment for discharge to the Buffalo Sewer Authority system in accordance with a temporary discharge permit (**Attachment 5**). Water was pumped to on-site fractionation tanks and treated via granular activated carbon prior to discharge. Spent carbon disposal receipts are included in **Attachment 6**. Following operation of the water treatment system, the fractionation tanks were cleaned. Residue from the tank cleaning was disposed as documented in **Attachment 7**. Soils, concrete and water from the other two excavation areas were not found to be impacted by PCBs and were disposed as non-hazardous waste.

**Figures** 



**Tables** 



# Table 1 Soil Analytical Data

Sample ID	Spoils Pile (Bay 10)	Spoil Pile, 2021-39 (Bay 6)	Kensington Ave, 2021-114			
Sample Date	3/5/2021	3/19/2021	5/28/2021	6/4/2021		
Polychlorinated bip	henyl (PCBs) - mg/kg					
PCB-1016	ND	ND	ND	ND		
PCB-1221	ND	ND	ND	ND		
PCB-1232	ND	ND	ND	ND		
PCB-1242	ND	ND	ND	ND		
PCB-1248	ND	ND	ND ND			
PCB-1254	ND	ND	ND	ND		
PCB-1260	ND	ND	1.61	1.15		
PCB-1262	ND	ND	ND	ND		
PCB-1268	ND	ND	ND	ND		
Total PCBs	ND	ND	1.61	1.15		
Metals - mg/L						
Arsenic	ND	ND	ND	ND		
Barium	ND	ND	0.824	ND		
Cadmium	ND	ND	ND	ND		
Chromium	ND	ND	ND	ND		
Lead	ND	ND	ND	ND		
Selenium	ND	ND	ND	ND		
Silver	ND	ND	ND	ND		

ND = Not Detected above detection limit.

mg/kg = Milligram per kilogram mg/L = Milligram per liter



# Table 1

#### **Water Analytical Data**

Sample ID	Frac Tank (Bay 10)	Frac Tank, 2021-115 (Bay 5)	Bay 4 Frac Tank (Tank #518B) 2021-123					
Sample Date	3/5/2021	5/28/2021	6/9/2021					
Polychlorinated biphenyl (PCBs) - μg/L								
PCB-1016	ND	ND	ND					
PCB-1221	ND	ND	ND					
PCB-1232	ND	ND	ND					
PCB-1242	ND	ND	15.1					
PCB-1248	ND	ND	ND					
PCB-1254	ND	ND	ND					
PCB-1260	ND	1.22	16.6					
PCB-1262	ND	ND	ND					
PCB-1268	ND	ND	ND					
Total PCBs	ND	1.22	31.7					

ND = Not Detected above detection limit.

 $\begin{array}{ll} \text{NS} & = \text{Not Sampled.} \\ \mu \text{g/L} & = \text{Microgram per liter} \end{array}$ 



# **Concrete Analytical Data**

Table 1

Sample ID	DK-13-CS-TOC	DK-13-CS-BOC							
Sample Date	7/2/2021	7/2/2021							
Polychlorinated biphenyl (PCBs) - μg/kg									
PCB-1016	ND	ND							
PCB-1221	ND	ND							
PCB-1232	ND	ND							
PCB-1242	ND	ND							
PCB-1248	ND	ND							
PCB-1254	ND	ND							
PCB-1260	358	909							
PCB-1262	ND	ND							
PCB-1268	ND	ND							
Total PCBs	358	909							
Total Solids - %									
Total Solids	96.8	97.4							

ND = Not Detected above detection limit.

μg/kg % = Microgram per kilogram

= Percent

**Attachment 1 – PRR Checklist** 



# Enclosure 2 NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION Site Management Periodic Review Report Notice Institutional and Engineering Controls Certification Form



Sit	e No.	915144	Site Details	Box 1	
Sit	e Name Ni	iagara Mohawk Dewey Av	e. Service Sta.		
City Co	e Address: y/Town: Bu unty:Erie e Acreage:		Zip Code: 14214		
₹e	porting Peri	iod: November 01, 2020 to	November 01, 2021		
				YES	NO
1.	Is the info	rmation above correct?		$\overline{\mathbf{X}}$	
	If NO, incl	ude handwritten above or o	n a separate sheet.		
2.		or all of the site property be mendment during this Repo	een sold, subdivided, merged, or undergone orting Period?	e a	X
3.		been any change of use at CRR 375-1.11(d))?	the site during this Reporting Period		$\mathbf{x}$
4.		federal, state, and/or local μ e property during this Repo	permits (e.g., building, discharge) been issu orting Period?	ied X	
			2 thru 4, include documentation or evide iously submitted with this certification for		
5.	Is the site	currently undergoing develo	opment?	×	
				Box 2	
				YES	NO
6.		ent site use consistent with ial and Industrial	the use(s) listed below?	$\mathbf{x}$	
7.	Are all ICs	s in place and functioning as	s designed?	$\mathbf{x}$	
	IF T		QUESTION 6 OR 7 IS NO, sign and date bel EREST OF THIS FORM. Otherwise continu		
A C	Corrective N	Measures Work Plan must b	be submitted along with this form to addre	ss these iss	sues.
Sia	nature of O	wner. Remedial Party or Des	ignated Representative Da	 te	

**SITE NO. 915144** Box 3 **Description of Institutional Controls** Owner **Institutional Control** <u>Parcel</u> National Grid 89.16-1-2 Monitoring Plan O&M Plan National Grid 89.16-1-6 Monitoring Plan O&M Plan Box 4 **Description of Engineering Controls** None Required Not Applicable/No EC's

Box	5
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	Periodic Review Report (PRR) Certification Statements								
1.	I certify by checking "YES" below that:								
<ul> <li>a) the Periodic Review report and all attachments were prepared under the direction of, and reviewed by, the party making the Engineering Control certification;</li> </ul>									
<ul> <li>b) to the best of my knowledge and belief, the work and conclusions described in this are in accordance with the requirements of the site remedial program, and generally ac engineering practices; and the information presented is accurate and compete.</li> </ul>									
	YES NO								
	$f{x}$								
2.	For each Engineering control listed in Box 4, I certify by checking "YES" below that all of the following statements are true:								
	(a) The Engineering Control(s) employed at this site is unchanged since the date that the Control was put in-place, or was last approved by the Department;								
	(b) nothing has occurred that would impair the ability of such Control, to protect public health and the environment;								
	(c) access to the site will continue to be provided to the Department, to evaluate the remedy, including access to evaluate the continued maintenance of this Control;								
	(d) nothing has occurred that would constitute a violation or failure to comply with the Site Management Plan for this Control; and								
	(e) if a financial assurance mechanism is required by the oversight document for the site, the mechanism remains valid and sufficient for its intended purpose established in the document.								
	YES NO								
	f x								
	IF THE ANSWER TO QUESTION 2 IS NO, sign and date below and DO NOT COMPLETE THE REST OF THIS FORM. Otherwise continue.								
	A Corrective Measures Work Plan must be submitted along with this form to address these issues.								
	Signature of Owner, Remedial Party or Designated Representative Date								

#### IC CERTIFICATIONS SITE NO. 915144

Box 6

#### SITE OWNER OR DESIGNATED REPRESENTATIVE SIGNATURE

I certify that all information and statements in Boxes 1,2, and 3 are true. I understand that a false statement made herein is punishable as a Class "A" misdemeanor, pursuant to Section 210.45 of the Penal Law.

I <u>Gerald Cresap, PE</u> at print name	6780 Northern Blvd., Suite 100, East Syracuse, NY 13057 , print business address
am certifying as <u>agent for National</u>	Grid (Owner or Remedial Party)
for the Site named in the Site Details  Signature of Owner Remedial Party, Rendering Certification	TE OF NEW 1 -12-2021
	087401 UT

**Attachment 2 – Clean Fill Manifests** 

Via Email: karen.krdaytrucking@gmail.com



13870 Taylor Hollow Rd, Collins, New York, 14034 - 716-532-3371 - Fax 716-532-9000

3/3/2021

K & R DAY TRUCKING, INC.

840 BULLIS ROAD

ELMA

NY 14059

ATTENTION: Karen Day

RE: Material Submittal National Grid/Filtrec

Dear Ms. Day,

This is to certify that the NYSDOT Round #1 Gravel proposed for use on the above listed project will be supplied in conformance with the requirements of the NYSDOT and project specifications.

The Round #1 Gravel will be supplied from our NYSDOT approved Gable Thomas, Sardinia Plant. A Typical mechanical analysis of the proposed material is as follows:

### Round #1 Gravel - NYSDOT 605.0901Type 1 Underdrain - Chaffee Plant

Sieve Size	Percent Passing	Specification
1"	100	100
3/4"	100	_
1/2"	93	30-100
1/4"	11	0-30
#10	1.1	0-10
#20	0.6	0-5

Sincerely,

Gernatt Asphalt Products, Inc.

Neil Stern

Sales Representative

**Attachment 3 – Laboratory Analytical Results** 



### Analytical Report For

# **National Response Corporation**

For Lab Project ID

212484

Referencing

Fleet Garage Dewey Kensington

Prepared

Thursday, June 10, 2021

Any noncompliant QC parameters or other notes impacting data interpretation are flagged or documented on the final report or are noted below.

Certifies that this report has been approved by the Technical Director or Designee

179 Lake Avenue • Rochester, NY 14608 • (585) 647-2530 • Fax (585) 647-3311 • ELAP ID# 10958



Lab Project ID: 212484

Client: <u>National Response Corporation</u>

**Project Reference:** Fleet Garage Dewey Kensington

**Sample Identifier:** Spoil Pile - Bay 4, 2021-122

Lab Sample ID:212484-01Date Sampled:6/4/2021Matrix:SoilDate Received:6/7/2021

#### **PCBs**

<u>Analyte</u>	<u>Result</u>	<u>Units</u>		<b>Qualifier</b>	<b>Date Analy</b>	vzed
PCB-1016	< 1.00	mg/Kg			6/8/2021	19:23
PCB-1221	< 1.00	mg/Kg			6/8/2021	19:23
PCB-1232	< 1.00	mg/Kg			6/8/2021	19:23
PCB-1242	< 1.00	mg/Kg			6/8/2021	19:23
PCB-1248	< 1.00	mg/Kg			6/8/2021	19:23
PCB-1254	< 1.00	mg/Kg			6/8/2021	19:23
PCB-1260	1.15	mg/Kg			6/8/2021	19:23
PCB-1262	< 1.00	mg/Kg			6/8/2021	19:23
PCB-1268	< 1.00	mg/Kg			6/8/2021	19:23
<u>Surrogate</u>	Percent R	Recovery	<u>Limits</u>	<u>Outliers</u>	<b>Date Analy</b>	zed
Tetrachloro-m-xylene	51.	.7	16.4 - 99.1	(	6/8/2021	19:23

**Method Reference(s):** EPA 8082A

EPA 3546

**Preparation Date:** 6/8/2021



**Lab Project ID:** 212484

Client: <u>National Response Corporation</u>

**Project Reference:** Fleet Garage Dewey Kensington

**Sample Identifier:** Spoil Pile - Bay 4, 2021-122

Lab Sample ID:212484-01ADate Sampled:6/4/2021Matrix:TCLP ExtractDate Received:6/7/2021

#### **TCLP Mercury**

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	Regulatory Limit Qualifier	<b>Date Analyzed</b>		
Mercury	< 0.00200	mg/L	0.2	6/10/2021 10:15		

Method Reference(s): EPA 7470A EPA 1311 Preparation Date: 6/9/2021

**Preparation Date:** 6/9/2021 **Data File:** Hg210610A

#### TCLP RCRA Metals (ICP)

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	Regulatory Limit Qualifier	<b>Date Analyzed</b>
Arsenic	< 0.500	mg/L	5	6/9/2021 16:26
Barium	< 0.500	mg/L	100	6/9/2021 16:26
Cadmium	< 0.025	mg/L	1	6/9/2021 16:26
Chromium	< 0.500	mg/L	5	6/9/2021 16:26
Lead	< 0.500	mg/L	5	6/9/2021 16:26
Selenium	< 0.200	mg/L	1	6/9/2021 16:26
Silver	< 0.500	mg/L	5	6/9/2021 16:26

Method Reference(s): EPA 6010C

EPA 1311 / 3005A

**Preparation Date:** 6/8/2021 **Subcontractor ELAP ID:** 10709



## **Analytical Report Appendix**

The reported results relate only to the samples as they have been received by the laboratory.

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All soil/sludge samples have been reported on a dry weight basis, unless qualified "reported as received". Other solids are reported as received.

Low level Volatiles blank reports for soil/solid matrix are based on a nominal 5 gram weight. Sample results and reporting limits are based on actual weight, which may be more or less than 5 grams.

The Chain of Custody provides additional information, including compliance with sample condition requirements upon receipt. Sample condition requirements are defined under the 2003 NELAC Standard, sections 5.5.8.3.1 and 5.5.8.3.2.

NYSDOH ELAP does not certify for all parameters. Paradigm Environmental Services or the indicated subcontracted laboratory does hold certification for all analytes where certification is offered by ELAP unless otherwise specified. Aliquots separated for certain tests, such as TCLP, are indicated on the Chain of Custody and final reports with an "A" suffix.

Data qualifiers are used, when necessary, to provide additional information about the data. This information may be communicated as a flag or as text at the bottom of the report. Please refer to the following list of analyte-specific, frequently used data flags and their meaning:

- "<" = Analyzed for but not detected at or above the quantitation limit.
- "E" = Result has been estimated, calibration limit exceeded.
- "Z" = See case narrative.
- "D" = Sample, Laboratory Control Sample, or Matrix Spike Duplicate results above Relative Percent Difference limit.
- "M" = Matrix spike recoveries outside QC limits. Matrix bias indicated.
- "B" = Method blank contained trace levels of analyte. Refer to included method blank report.
- "I" = Result estimated between the quantitation limit and half the quantitation limit.
- "L" = Laboratory Control Sample recovery outside accepted QC limits.
- "P" = Concentration differs by more than 40% between the primary and secondary analytical columns.
- "NC" = Not calculable. Applicable to RPD if sample or duplicate result is non-detect or estimated (see primary report for data flags). Applicable to MS if sample is greater or equal to ten times the spike added. Applicable to sample surrogates or MS if sample dilution is 10x or higher.
- "\*" = Indicates any recoveries outside associated acceptance windows. Surrogate outliers in samples are presumed matrix effects. LCS demonstrates method compliance unless otherwise noted.
- "(1)" = Indicates data from primary column used for QC calculation.
- "A" = denotes a parameter for which ELAP does not offer approval as part of their laboratory certification program.
- "F" = denotes a parameter for which Paradigm does not carry certification, the results for which should therefore only be used where ELAP certification is not required, such as personal exposure assessment.

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt.

### GENERAL TERMS AND CONDITIONS LABORATORY SERVICES

These Terms and Conditions embody the whole agreement of the parties in the absence of a signed and executed contract between the Laboratory (LAB) and Client. They shall supersede all previous communications, representations, or agreements, either verbal or written, between the parties. The LAB specifically rejects all additional, inconsistent, or conflicting terms, whether printed or otherwise set forth in any purchase order or other communication from the Client to the LAB. The invalidity or unenforceability in whole or in part of any provision, tern or condition hereof shall not affect in any way the validity or enforceability of the remainder of the Terms and Conditions. No waiver by LAB of any provision, term, or condition hereof or of any breach by or obligation of the Client hereunder shall constitute a waiver of such provision, term, or condition on any other occasion or a waiver of any other breach by or obligation of the Client. This agreement shall be administered and interpreted under the laws of the state which services are procured.

Warranty.

Recognizing that the nature of many samples is unknown and that some may contain potentially hazardous components, LAB warrants only that it will perform testing services, obtain findings, and prepare reports in accordance with generally accepted analytical laboratory principles and practices at the time of performance of services. LAB makes no other warranty, express or implied.

Scope and Compensation. LAB agrees to perform the services described in the chain of custody to which these terms and conditions are attached. Unless the parties agree in writing to the contrary, the duties of LAB shall not be construed to exceed the services specifically described. LAB wi use LAB default method for all tests unless specified otherwise on the Work Order.

Payment terms are net 30 days from the date of invoice. All overdue payments are subject to an interest charge of one and one-half percent (1-1/2%) per month or a portion thereof. Client shall also be responsible for costs of collection, including payment of reasonable attorney fees if such expense is incurred. The prices, unless stated, do not include any sale, use or other taxes. Such taxes will be added to invoice prices when required.

Prices.

Compensation for services performed will be based on the current Lab Analytical Fee Schedule or on quotations agreed to in writing by the parties. Turnaround time based charges are determined from the time of resolution of all work order questions. Testimony, court appearances or data compilation for legal action will be charged separately. Evaluation and reporting of initial screening runs may incur additional fees.

Limitations of Liability.

In the event of any error, omission, or other professional negligence, the sole and exclusive responsibility of LAB shall be to reperform the deficient work at its own expense and LAB shall have no other liability whatsoever. All claims shall be deemed waived unless made in writing and received by LAB within ninety (90) days following completion of services.

LAB shall have no liability, obligation, or responsibility of any kind for losses, costs, expenses, or other damages (including but not limited to any special, direct, incidental or consequential damages) with respect to LAB's services or results.

All results provided by LAB are strictly for the use of its clients and LAB is in no way responsible for the use of such results by clients or third parties. All reports should be considered in their entirety, and LAB is not responsible for the separation, detachment, or other use of any portion of these reports. Client may not assign the lab report without the written consent of the LAB. Client covenants and agrees, at its/his/her sole expense, to indemnify, protect, defend, and save harmless the LAB from and against

any and all damages, losses, liabilities, obligations, penalties, claims, litigation, demands, defenses, judgments, suits, actions, proceedings, costs, disbursements and/or expenses (including, without limitation attorneys' and experts' fees and disbursements) of any kind whatsoever which may at any time be imposed upon, incurred by or asserted or awarded against client relating to, resulting from or arising out of (a) the breach of this agreement by this client, (b) the negligence of the client in handling, delivering or disclosing any hazardous substance, (c) the violation of the Client of any applicable law, (d) non-compliance by the Client with any

environmental permit or (e) a material misrepresentation in disclosing the materials to be tested.

Hazard Disclosure.

Client represents and warrants that any sample delivered to LAB will be preceded or accompanied by complete written disclosure of the presence of any hazardous substances known or suspected by Client. Client further warrants that any sample containing any hazardous substance that is to be delivered to LAB will be packaged, labeled, transported, and delivered properly and in accordance with applicable laws.

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Legal Responsibility. LAB is solely responsible for performance of this contract, and no affiliated company, director, officer, employee, or agent shall have any legal responsibility hereunder, whether in contract or tort including negligence.

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Law.

This contract shall be continued under the laws of the State of New York without regard to its conflicts of laws provision.

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt. Page 5 of 8



**CHAIN OF CUSTODY** 

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PROJECT REFERENCE ATTN: Jack			ackie Allard			ATTN:	А	ccou	ints Pa	yable a	p@nrc	c.com		lisa.montesano@nationalgrid.com				
Fleet Garag	ge Dewey K	ensing	ton		es: .queous Liquid Jon-Aqueous Liquid	<b>WA</b> - W <b>WG</b> - G	ater roundwa	ter	DW - Drinking Water WW - Wastewater			SO - Soil SL - Sludge			SD - Solid WP - Wipe PT - Paint CK - Caulk	OL - Oil AR - Air		
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						J 4'C	ice 1	6/	1/2	1 1	15:	06						

292



# Chain of Custody Supplement

Client:	NRC	Completed by:	Molfail
Lab Project ID:	2/2484	Date:	6/7/2/
	<b>Sample Con</b> Per NELAC/EL	<b>dition Requirements</b> AP 210/241/242/2 <u>4</u> 3/244	
Condition	NELAC compliance with the sar Yes	nple condition requirements upo No	on receipt N/A
Container Type			
Comments			
Transferred to method- compliant container			
Headspace (<1 mL) Comments			
Preservation Comments			
Chlorine Absent (<0.10 ppm per test strip) Comments			
Holding Time Comments			
'emperature Comments	4°cia		put
ompliant Sample Quantity/Ty  Comments	ре		
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179 Lake Avenue Rochester: NY 14608 Office (585) 647-2530 Fax (585) 647-3311

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TURNAROUND TIME: (WORKING DAYS)

LAB PROJECT #:

CLIENT PROJE

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#### 10 \*LAB USE ONLY BELOW THIS LINE\*

Sample Condition: Per NELAC/ELAP 210/241/242/243/244

	Receipt Parameter	NELAC Co	ompliance
Comments:	Container Type: Not AES AL (49)	Y 🔲	N
Comments:	Preservation:	Y 🔲	N
Comments:	Holding Time:	Y	N
Comments:	Temperature: 5 C	Y	N
<b>L</b>			

Client	•	
Sampled By	Date/Time	Total Cost:
Relinquished By	Date/Time	
Received By	Date/Time	P.I.F.
Received @ Lab By	6/9/21 4/13pm Date/Time	

Page 8 of 8



### Analytical Report For

# **National Response Corporation**

For Lab Project ID

212544

Referencing

Dewey SC - Fleet Garage

**Prepared** 

Thursday, June 10, 2021

Any noncompliant QC parameters or other notes impacting data interpretation are flagged or documented on the final report or are noted below.

Certifies that this report has been approved by the Technical Director or Designee

179 Lake Avenue • Rochester, NY 14608 • (585) 647-2530 • Fax (585) 647-3311 • ELAP ID# 10958



**Lab Project ID:** 212544

Client: <u>National Response Corporation</u>

**Project Reference:** Dewey SC - Fleet Garage

Sample Identifier: Bay 4 Frac Tank (Tank # 518B) 2021-123

Lab Sample ID:212544-01Date Sampled:6/9/2021Matrix:Aq LiquidDate Received:6/10/2021

#### **PCBs**

<u>Analyte</u>	<u>Result</u>	<u>Units</u>		<b>Qualifier</b>	<b>Date Analy</b>	<u>vzed</u>
PCB-1016	< 2.00	ug/L			6/10/2021	12:52
PCB-1221	< 2.00	ug/L			6/10/2021	12:52
PCB-1232	< 2.00	ug/L			6/10/2021	12:52
PCB-1242	15.1	ug/L			6/10/2021	12:52
PCB-1248	< 2.00	ug/L			6/10/2021	12:52
PCB-1254	< 2.00	ug/L			6/10/2021	12:52
PCB-1260	16.6	ug/L			6/10/2021	12:52
PCB-1262	< 2.00	ug/L			6/10/2021	12:52
PCB-1268	< 2.00	ug/L			6/10/2021	12:52
<u>Surrogate</u>	Percent R	<u>lecovery</u>	<u>Limits</u>	<u>Outliers</u>	<b>Date Analy</b>	zed
Tetrachloro-m-xylene	13	9	28.9 - 97.9	*	6/10/2021	12:52

**Method Reference(s):** EPA 8082A

EPA 3510C

**Preparation Date:** 6/10/2021



## **Analytical Report Appendix**

The reported results relate only to the samples as they have been received by the laboratory.

Each page of this document is part of a multipage report. This document may not be reproduced except in its entirety, without the prior consent of Paradigm Environmental Services, Inc.

All soil/sludge samples have been reported on a dry weight basis, unless qualified "reported as received". Other solids are reported as received.

Low level Volatiles blank reports for soil/solid matrix are based on a nominal 5 gram weight. Sample results and reporting limits are based on actual weight, which may be more or less than 5 grams.

The Chain of Custody provides additional information, including compliance with sample condition requirements upon receipt. Sample condition requirements are defined under the 2003 NELAC Standard, sections 5.5.8.3.1 and 5.5.8.3.2.

NYSDOH ELAP does not certify for all parameters. Paradigm Environmental Services or the indicated subcontracted laboratory does hold certification for all analytes where certification is offered by ELAP unless otherwise specified. Aliquots separated for certain tests, such as TCLP, are indicated on the Chain of Custody and final reports with an "A" suffix.

Data qualifiers are used, when necessary, to provide additional information about the data. This information may be communicated as a flag or as text at the bottom of the report. Please refer to the following list of analyte-specific, frequently used data flags and their meaning:

- "<" = Analyzed for but not detected at or above the quantitation limit.
- "E" = Result has been estimated, calibration limit exceeded.
- "Z" = See case narrative.
- "D" = Sample, Laboratory Control Sample, or Matrix Spike Duplicate results above Relative Percent Difference limit.
- "M" = Matrix spike recoveries outside QC limits. Matrix bias indicated.
- "B" = Method blank contained trace levels of analyte. Refer to included method blank report.
- "I" = Result estimated between the quantitation limit and half the quantitation limit.
- "L" = Laboratory Control Sample recovery outside accepted QC limits.
- "P" = Concentration differs by more than 40% between the primary and secondary analytical columns.
- "NC" = Not calculable. Applicable to RPD if sample or duplicate result is non-detect or estimated (see primary report for data flags). Applicable to MS if sample is greater or equal to ten times the spike added. Applicable to sample surrogates or MS if sample dilution is 10x or higher.
- "\*" = Indicates any recoveries outside associated acceptance windows. Surrogate outliers in samples are presumed matrix effects. LCS demonstrates method compliance unless otherwise noted.
- "(1)" = Indicates data from primary column used for QC calculation.
- "A" = denotes a parameter for which ELAP does not offer approval as part of their laboratory certification program.
- "F" = denotes a parameter for which Paradigm does not carry certification, the results for which should therefore only be used where ELAP certification is not required, such as personal exposure assessment.

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### GENERAL TERMS AND CONDITIONS LABORATORY SERVICES

These Terms and Conditions embody the whole agreement of the parties in the absence of a signed and executed contract between the Laboratory (LAB) and Client. They shall supersede all previous communications, representations, or agreements, either verbal or written, between the parties. The LAB specifically rejects all additional, inconsistent, or conflicting terms, whether printed or otherwise set forth in any purchase order or other communication from the Client to the LAB. The invalidity or unenforceability in whole or in part of any provision, tern or condition hereof shall not affect in any way the validity or enforceability of the remainder of the Terms and Conditions. No waiver by LAB of any provision, term, or condition hereof or of any breach by or obligation of the Client hereunder shall constitute a waiver of such provision, term, or condition on any other occasion or a waiver of any other breach by or obligation of the Client. This agreement shall be administered and interpreted under the laws of the state which services are procured.

Warranty.

Recognizing that the nature of many samples is unknown and that some may contain potentially hazardous components, LAB warrants only that it will perform testing services, obtain findings, and prepare reports in accordance with generally accepted analytical laboratory principles and practices at the time of performance of services. LAB makes no other warranty, express or implied.

Scope and Compensation. LAB agrees to perform the services described in the chain of custody to which these terms and conditions are attached. Unless the parties agree in writing to the contrary, the duties of LAB shall not be construed to exceed the services specifically described. LAB wi use LAB default method for all tests unless specified otherwise on the Work Order.

Payment terms are net 30 days from the date of invoice. All overdue payments are subject to an interest charge of one and one-half percent (1-1/2%) per month or a portion thereof. Client shall also be responsible for costs of collection, including payment of reasonable attorney fees if such expense is incurred. The prices, unless stated, do not include any sale, use or other taxes. Such taxes will be added to invoice prices when required.

Prices.

Compensation for services performed will be based on the current Lab Analytical Fee Schedule or on quotations agreed to in writing by the parties. Turnaround time based charges are determined from the time of resolution of all work order questions. Testimony, court appearances or data compilation for legal action will be charged separately. Evaluation and reporting of initial screening runs may incur additional fees.

Limitations of Liability.

In the event of any error, omission, or other professional negligence, the sole and exclusive responsibility of LAB shall be to reperform the deficient work at its own expense and LAB shall have no other liability whatsoever. All claims shall be deemed waived unless made in writing and received by LAB within ninety (90) days following completion of services.

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### **CHAIN OF CUSTODY**

212544

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				PHONE: 716-525-	1962	FAX:			PHONE:		431-2	224-91	4-914 <sup>, FAX:</sup>						Email: jacqueline,allard@usecology.com elaina,berst@usecology.com, sean,smyth@nationalgrid.com			gy.com,
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# Chain of Custody Supplement

Client:	9	NRC	Completed by:	Glenn Pezzulo
Lab Project ID:		212544	Date:	6/10/21
			lition Requirements P 210/241/242/243/244	
Condition		NELAC compliance with the sam Yes	ple condition requirements No	upon receipt N/A
Container Type		X		
Com	iments			
Transferred to method- compliant container		- F-		X
Headspace (<1 mL) Com	ments			X
Preservation	ments			$\longrightarrow$
Com	inichts _			
Chlorine Absent (<0.10 ppm per test st Com	trip) ments			×
	<u></u>			
Holding Time	ments	X		
Com		x	1	
Temperature		7:0		
Com	ments =	2°C icel		
Compliant Sample Qua	antity/Ty	ре		
Com	ments _			



### Analytical Report For

# **National Response Corporation**

For Lab Project ID

212349

Referencing

Fleet Garage Dewey Kensington

Prepared

Thursday, June 3, 2021

Any noncompliant QC parameters or other notes impacting data interpretation are flagged or documented on the final report or are noted below.

Certifies that this report has been approved by the Technical Director or Designee

179 Lake Avenue • Rochester, NY 14608 • (585) 647-2530 • Fax (585) 647-3311 • ELAP ID# 10958



Client: <u>National Response Corporation</u>

**Project Reference:** Fleet Garage Dewey Kensington

**Sample Identifier:** Spoil Pile - Bay 5, 144 Kensington Ave, 2021-114

 Lab Sample ID:
 212349-01
 Date Sampled:
 5/28/2021

 Matrix:
 Soil
 Date Received:
 5/28/2021

#### **PCBs**

<u>Analyte</u>	<u>Result</u>	<u>Units</u>		<b>Qualifier</b>	<b>Date Analy</b>	<u>vzed</u>
PCB-1016	< 1.00	mg/Kg			6/2/2021	16:45
PCB-1221	< 1.00	mg/Kg			6/2/2021	16:45
PCB-1232	< 1.00	mg/Kg			6/2/2021	16:45
PCB-1242	< 1.00	mg/Kg			6/2/2021	16:45
PCB-1248	< 1.00	mg/Kg			6/2/2021	16:45
PCB-1254	< 1.00	mg/Kg			6/2/2021	16:45
PCB-1260	1.61	mg/Kg			6/2/2021	16:45
PCB-1262	< 1.00	mg/Kg			6/2/2021	16:45
PCB-1268	< 1.00	mg/Kg			6/2/2021	16:45
Surrogate	Percent R	<u>lecovery</u>	<b>Limits</b>	<u>Outliers</u>	<b>Date Analy</b>	zed
Tetrachloro-m-xylene	44.	0	16.4 - 99.1	(	6/2/2021	16:45

Method Reference(s): EPA 8082A

EPA 3546

**Preparation Date:** 6/1/2021



Client: <u>National Response Corporation</u>

**Project Reference:** Fleet Garage Dewey Kensington

**Sample Identifier:** Spoil Pile - Bay 5, 144 Kensington Ave, 2021-114

Lab Sample ID:212349-01ADate Sampled:5/28/2021Matrix:TCLP ExtractDate Received:5/28/2021

#### TCLP Mercury

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	Regulatory Limit Qualifier	<b>Date Analyzed</b>	
Mercurv	< 0.00200	mg/L	0.2	6/2/2021 12:24	

Method Reference(s): EPA 7470A
EPA 1311
Preparation Date: 6/2/2021
Data File: Hg210602C

#### TCLP RCRA Metals (ICP)

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	Regulatory Limit Qualifier	<b>Date Analyzed</b>
Arsenic	< 0.500	mg/L	5	6/1/2021 15:05
Barium	0.824	mg/L	100	6/1/2021 15:05
Cadmium	< 0.0250	mg/L	1	6/1/2021 15:05
Chromium	< 0.500	mg/L	5	6/1/2021 15:05
Lead	< 0.500	mg/L	5	6/1/2021 15:05
Selenium	< 0.200	mg/L	1	6/1/2021 15:05
Silver	< 0.500	mg/L	5	6/1/2021 15:05

Method Reference(s): EPA 6010C

EPA 1311 / 3005A

Preparation Date: 6/1/2021 Data File: 210601B



### **Analytical Report Appendix**

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- "M" = Matrix spike recoveries outside QC limits. Matrix bias indicated.
- "B" = Method blank contained trace levels of analyte. Refer to included method blank report.
- "I" = Result estimated between the quantitation limit and half the quantitation limit.
- "L" = Laboratory Control Sample recovery outside accepted QC limits.
- "P" = Concentration differs by more than 40% between the primary and secondary analytical columns.
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- "\*" = Indicates any recoveries outside associated acceptance windows. Surrogate outliers in samples are presumed matrix effects. LCS demonstrates method compliance unless otherwise noted.
- "(1)" = Indicates data from primary column used for QC calculation.
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Warranty.

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In the event of any error, omission, or other professional negligence, the sole and exclusive responsibility of LAB shall be to reperform the deficient work at its own expense and LAB shall have no other liability whatsoever. All claims shall be deemed waived unless made in writing and received by LAB within ninety (90) days following completion of services.

LAB shall have no liability, obligation, or responsibility of any kind for losses, costs, expenses, or other damages (including but not limited to any special, direct, incidental or consequential damages) with respect to LAB's services or results.

All results provided by LAB are strictly for the use of its clients and LAB is in no way responsible for the use of such results by clients or third parties. All reports should be considered in their entirety, and LAB is not responsible for the separation, detachment, or other use of any portion of these reports. Client may not assign the lab report without the written consent of the LAB. Client covenants and agrees, at its/his/her sole expense, to indemnify, protect, defend, and save harmless the LAB from and against

any and all damages, losses, liabilities, obligations, penalties, claims, litigation, demands, defenses, judgments, suits, actions, proceedings, costs, disbursements and/or expenses (including, without limitation attorneys' and experts' fees and disbursements) of any kind whatsoever which may at any time be imposed upon, incurred by or asserted or awarded against client relating to, resulting from or arising out of (a) the breach of this agreement by this client, (b) the negligence of the client in handling, delivering or disclosing any hazardous substance, (c) the violation of the Client of any applicable law, (d) non-compliance by the Client with any

environmental permit or (e) a material misrepresentation in disclosing the materials to be tested.

Hazard Disclosure.

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LAB reserves the absolute right, exercisable at any time, to refuse to receive delivery of, refuse to accept, or revoke acceptance of any sample, which, in the sole judgment of LAB (a) is of unsuitable volume, (b) may be or become unsuitable for or may pose a risk in handling, transport, or processing for any health, safety, environmental or other reason whether or not due to the presence in the sample of any hazardous substance, and whether or not such presence has been disclosed to LAB by Client or (c) if the condition or sample date make the sample unsuitable for analysis.

Legal Responsibility. LAB is solely responsible for performance of this contract, and no affiliated company, director, officer, employee, or agent shall have any legal responsibility hereunder, whether in contract or tort including negligence.

Assignment.

LAB may assign its performance obligations under this contract to other parties, as it deems necessary. LAB shall disclose to Client any assignee (subcontractor) by ELAP ID # on the submitted final report.

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Law.

This contract shall be continued under the laws of the State of New York without regard to its conflicts of laws provision.

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### CHAIN OF CUSTODY

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### Chain of Custody Supplement

Client:	MKC	Completed by:	MUNail	
Lab Project ID:	212349	Date:	128/21	
. 9	<b>Sample Cond</b> Per NELAC/ELA	<b>dition Requirements</b> AP 210/241/242/243/244		
Condition	NELAC compliance with the sam Yes	nple condition requirements upon No	receipt N/A	
Container Type				
Comments			<del></del>	
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Headspace (<1 mL) Comments				
4.8				9
Preservation  Comments				
Chlorine Absent (<0.10 ppm per test strip) Comments				
Holding Time  Comments		3		
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ompliant Sample Quantity/Ty		The state of the party of the state of the s		
Comments	ре			



### Analytical Report For

### **National Response Corporation**

For Lab Project ID

212351

Referencing

Fleet Garage Dewey Kensington

**Prepared** 

Tuesday, June 8, 2021

Report re-issued to meet 0.5ppb reporting limit.

Any noncompliant QC parameters or other notes impacting data interpretation are flagged or documented on the final report or are noted below.

Certifies that this report has been approved by the Technical Director or Designee

R Ros

179 Lake Avenue • Rochester, NY 14608 • (585) 647-2530 • Fax (585) 647-3311 • ELAP ID# 10958



Client: <u>National Response Corporation</u>

**Project Reference:** Fleet Garage Dewey Kensington

**Sample Identifier:** Frac Tank, 2021-115

Lab Sample ID:212351-01Date Sampled:5/28/2021Matrix:Aq LiquidDate Received:5/28/2021

#### **PCBs**

<u>Analyte</u>	<u>Result</u>	<u>Units</u>		<b>Qualifier</b>	<b>Date Analy</b>	vzed
PCB-1016	< 0.500	ug/L			6/7/2021	14:13
PCB-1221	< 0.500	ug/L			6/7/2021	14:13
PCB-1232	< 0.500	ug/L			6/7/2021	14:13
PCB-1242	< 0.500	ug/L			6/7/2021	14:13
PCB-1248	< 0.500	ug/L			6/7/2021	14:13
PCB-1254	< 0.500	ug/L			6/7/2021	14:13
PCB-1260	1.22	ug/L			6/7/2021	14:13
PCB-1262	< 0.500	ug/L			6/7/2021	14:13
PCB-1268	< 0.500	ug/L			6/7/2021	14:13
<u>Surrogate</u>	Percent I	Recovery	<u>Limits</u>	<u>Outliers</u>	<b>Date Analy</b>	zed
Tetrachloro-m-xylene	73	.8	28.9 - 97.9		6/7/2021	14:13

Method Reference(s): EPA 8082A

EPA 3510C

**Preparation Date:** 6/1/2021



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### **CHAIN OF CUSTODY**

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21/2



## Chain of Custody Supplement

Client:	NRC	Completed by:	MylNail
Lab Project ID:	212351	Date:	5/28/21
9 10	Sample Con Per NELAC/E	ndition Requirements LAP 210/241/242/243/244	
Condition	NELAC compliance with the sa Yes	mple condition requirements u No	upon receipt N/A
Container Type			2 .
Comments		· v	¥ **
Transferred to method- compliant container		4.5	
Headspace (<1 mL) Comments			
965		_	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Preservation  Comments			
Commence	2 2 2	. 60	1
Chlorine Absent (<0.10 ppm per test strip) Comments			
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'emperature			
Comments	10010	I started in fro	
ompliant Sample Quantity/Typ	ne		
Comments			-



### Analytical Report For

### **National Response Corporation**

For Lab Project ID

211087

Referencing

DK-13 Fleet Garage

**Prepared** 

Wednesday, March 24, 2021

Any noncompliant QC parameters or other notes impacting data interpretation are flagged or documented on the final report or are noted below.

Certifies that this report has been approved by the Technical Director or Designee

179 Lake Avenue • Rochester, NY 14608 • (585) 647-2530 • Fax (585) 647-3311 • ELAP ID# 10958



Client: <u>National Response Corporation</u>

**Project Reference:** DK-13 Fleet Garage

**Sample Identifier:** Spoil Pile, 2021-39

Lab Sample ID:211087-01Date Sampled:3/19/2021Matrix:SoilDate Received:3/22/2021

#### **PCBs**

<u>Analyte</u>	<u>Result</u>	<u>Units</u>		<u>Qualifier</u>	<b>Date Analy</b>	vzed
PCB-1016	< 1.00	mg/Kg			3/23/2021	15:23
PCB-1221	< 1.00	mg/Kg			3/23/2021	15:23
PCB-1232	< 1.00	mg/Kg			3/23/2021	15:23
PCB-1242	< 1.00	mg/Kg			3/23/2021	15:23
PCB-1248	< 1.00	mg/Kg			3/23/2021	15:23
PCB-1254	< 1.00	mg/Kg			3/23/2021	15:23
PCB-1260	< 1.00	mg/Kg			3/23/2021	15:23
PCB-1262	< 1.00	mg/Kg			3/23/2021	15:23
PCB-1268	< 1.00	mg/Kg			3/23/2021	15:23
<u>Surrogate</u>	Percent 1	Recovery	<u>Limits</u>	<u>Outliers</u>	<b>Date Analy</b>	zed
Tetrachloro-m-xylene	76	5.4	18.8 - 97.4		3/23/2021	15:23

**Method Reference(s):** EPA 8082A

EPA 3546

**Preparation Date:** 3/23/2021



Client: <u>National Response Corporation</u>

**Project Reference:** DK-13 Fleet Garage

**Sample Identifier:** Spoil Pile, 2021-39

Lab Sample ID:211087-01ADate Sampled:3/19/2021Matrix:TCLP ExtractDate Received:3/22/2021

#### **TCLP Mercury**

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	Regulatory Limit Qualifier	<b>Date Analyzed</b>	
Mercury	< 0.00200	mg/L	0.2	3/24/2021 07:10	

Method Reference(s): EPA 7470A EPA 1311

Preparation Date: 3/23/2021 Data File: Hg210324A

#### TCLP RCRA Metals (ICP)

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	Regulatory Limit Qualifier	<b>Date Analyzed</b>
Arsenic	< 0.500	mg/L	5	3/24/2021 10:26
Barium	< 0.500	mg/L	100	3/24/2021 10:26
Cadmium	< 0.0250	mg/L	1	3/24/2021 10:26
Chromium	< 0.500	mg/L	5	3/24/2021 10:26
Lead	< 0.500	mg/L	5	3/24/2021 10:26
Selenium	< 0.200	mg/L	1	3/24/2021 10:26
Silver	< 0.500	mg/L	5	3/24/2021 10:26

Method Reference(s): EPA 6010C

EPA 1311 / 3005A

 Preparation Date:
 3/23/2021

 Data File:
 210324B



Client: <u>National Response Corporation</u>

**Project Reference:** DK-13 Fleet Garage

**Sample Identifier:** Frac Tank, 2021-39

Lab Sample ID:211087-02Date Sampled:3/19/2021Matrix:Aq LiquidDate Received:3/22/2021

#### **PCBs**

<u>Analyte</u>	<u>Result</u>	<u>Units</u>		<b>Qualifier</b>	<b>Date Analy</b>	<u>vzed</u>
PCB-1016	< 1000	ug/L			3/22/2021	20:58
PCB-1221	< 1000	ug/L			3/22/2021	20:58
PCB-1232	< 1000	ug/L			3/22/2021	20:58
PCB-1242	< 1000	ug/L			3/22/2021	20:58
PCB-1248	< 1000	ug/L			3/22/2021	20:58
PCB-1254	< 1000	ug/L			3/22/2021	20:58
PCB-1260	< 1000	ug/L			3/22/2021	20:58
PCB-1262	< 1000	ug/L			3/22/2021	20:58
PCB-1268	< 1000	ug/L			3/22/2021	20:58
<u>Surrogate</u>	<u>Percent</u>	Recovery	<u>Limits</u>	<u>Outliers</u>	<b>Date Analy</b>	zed
Tetrachloro-m-xylene	6	3.2	31.6 - 98.5		3/22/2021	20:58

**Method Reference(s):** EPA 8082A

EPA 3510C

**Preparation Date:** 3/22/2021



### **Analytical Report Appendix**

The reported results relate only to the samples as they have been received by the laboratory.

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All soil/sludge samples have been reported on a dry weight basis, unless qualified "reported as received". Other solids are reported as received.

Low level Volatiles blank reports for soil/solid matrix are based on a nominal 5 gram weight. Sample results and reporting limits are based on actual weight, which may be more or less than 5 grams.

The Chain of Custody provides additional information, including compliance with sample condition requirements upon receipt. Sample condition requirements are defined under the 2003 NELAC Standard, sections 5.5.8.3.1 and 5.5.8.3.2.

NYSDOH ELAP does not certify for all parameters. Paradigm Environmental Services or the indicated subcontracted laboratory does hold certification for all analytes where certification is offered by ELAP unless otherwise specified. Aliquots separated for certain tests, such as TCLP, are indicated on the Chain of Custody and final reports with an "A" suffix.

Data qualifiers are used, when necessary, to provide additional information about the data. This information may be communicated as a flag or as text at the bottom of the report. Please refer to the following list of analyte-specific, frequently used data flags and their meaning:

- "<" = Analyzed for but not detected at or above the quantitation limit.
- "E" = Result has been estimated, calibration limit exceeded.
- "Z" = See case narrative.
- "D" = Sample, Laboratory Control Sample, or Matrix Spike Duplicate results above Relative Percent Difference limit.
- "M" = Matrix spike recoveries outside QC limits. Matrix bias indicated.
- "B" = Method blank contained trace levels of analyte. Refer to included method blank report.
- "J" = Result estimated between the quantitation limit and half the quantitation limit.
- "L" = Laboratory Control Sample recovery outside accepted QC limits.
- "P" = Concentration differs by more than 40% between the primary and secondary analytical columns.
- "NC" = Not calculable. Applicable to RPD if sample or duplicate result is non-detect or estimated (see primary report for data flags). Applicable to MS if sample is greater or equal to ten times the spike added. Applicable to sample surrogates or MS if sample dilution is 10x or higher.
- "\*" = Indicates any recoveries outside associated acceptance windows. Surrogate outliers in samples are presumed matrix effects. LCS demonstrates method compliance unless otherwise noted.
- "(1)" = Indicates data from primary column used for QC calculation.
- "A" = denotes a parameter for which ELAP does not offer approval as part of their laboratory certification program.
- "F" = denotes a parameter for which Paradigm does not carry certification, the results for which should therefore only be used where ELAP certification is not required, such as personal exposure assessment.

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt.

Page 5 of 8

### GENERAL TERMS AND CONDITIONS LABORATORY SERVICES

These Terms and Conditions embody the whole agreement of the parties in the absence of a signed and executed contract between the Laboratory (LAB) and Client. They shall supersede all previous communications, representations, or agreements, either verbal or written, between the parties. The LAB specifically rejects all additional, inconsistent, or conflicting terms, whether printed or otherwise set forth in any purchase order or other communication from the Client to the LAB. The invalidity or unenforceability in whole or in part of any provision, tern or condition hereof shall not affect in any way the validity or enforceability of the remainder of the Terms and Conditions. No waiver by LAB of any provision, term, or condition hereof or of any breach by or obligation of the Client hereunder shall constitute a waiver of such provision, term, or condition on any other occasion or a waiver of any other breach by or obligation of the Client. This agreement shall be administered and interpreted under the laws of the state which services are procured.

Warranty.

Recognizing that the nature of many samples is unknown and that some may contain potentially hazardous components, LAB warrants only that it will perform testing services, obtain findings, and prepare reports in accordance with generally accepted analytical laboratory principles and practices at the time of performance of services. LAB makes no other warranty, express or implied.

Scope and Compensation. LAB agrees to perform the services described in the chain of custody to which these terms and conditions are attached. Unless the parties agree in writing to the contrary, the duties of LAB shall not be construed to exceed the services specifically described. LAB wi use LAB default method for all tests unless specified otherwise on the Work Order.

Payment terms are net 30 days from the date of invoice. All overdue payments are subject to an interest charge of one and one-half percent (1-1/2%) per month or a portion thereof. Client shall also be responsible for costs of collection, including payment of reasonable attorney fees if such expense is incurred. The prices, unless stated, do not include any sale, use or other taxes. Such taxes will be added to invoice prices when required.

Prices.

Compensation for services performed will be based on the current Lab Analytical Fee Schedule or on quotations agreed to in writing by the parties. Turnaround time based charges are determined from the time of resolution of all work order questions. Testimony, court appearances or data compilation for legal action will be charged separately. Evaluation and reporting of initial screening runs may incur additional fees.

Limitations of Liability.

In the event of any error, omission, or other professional negligence, the sole and exclusive responsibility of LAB shall be to reperform the deficient work at its own expense and LAB shall have no other liability whatsoever. All claims shall be deemed waived unless made in writing and received by LAB within ninety (90) days following completion of services.

LAB shall have no liability, obligation, or responsibility of any kind for losses, costs, expenses, or other damages (including but not limited to any special, direct, incidental or consequential damages) with respect to LAB's services or results.

All results provided by LAB are strictly for the use of its clients and LAB is in no way responsible for the use of such results by clients or third parties. All reports should be considered in their entirety, and LAB is not responsible for the separation, detachment, or other use of any portion of these reports. Client may not assign the lab report without the written consent of the LAB. Client covenants and agrees, at its/his/her sole expense, to indemnify, protect, defend, and save harmless the LAB from and against

any and all damages, losses, liabilities, obligations, penalties, claims, litigation, demands, defenses, judgments, suits, actions, proceedings, costs, disbursements and/or expenses (including, without limitation attorneys' and experts' fees and disbursements) of any kind whatsoever which may at any time be imposed upon, incurred by or asserted or awarded against client relating to, resulting from or arising out of (a) the breach of this agreement by this client, (b) the negligence of the client in handling, delivering or disclosing any hazardous substance, (c) the violation of the Client of any applicable law, (d) non-compliance by the Client with any environmental permit or (e) a material misrepresentation in disclosing the materials to be tested.

Hazard Disclosure.

Client represents and warrants that any sample delivered to LAB will be preceded or accompanied by complete written disclosure of the presence of any hazardous substances known or suspected by Client. Client further warrants that any sample containing any hazardous substance that is to be delivered to LAB will be packaged, labeled, transported, and delivered properly and in accordance with applicable laws.

Sample Handling.

Prior to LAB's acceptance of any sample (or after any revocation of acceptance), the entire risk of loss or of damage to such sample remains with Client. Samples are accepted when receipt is acknowledged on chain of custody documentation. In no event will LAB have any responsibility for the action or inaction of any carrier shipping or delivering any sample to or from LAB premises. Client authorizes LAB to proceed with the analysis of samples as received by the laboratory, recognizing that any samples not in compliance with all current DOH-ELAP-NELAP requirements for containers, preservation or holding time will be noted as such on the final report.

Disposal of hazardous waste samples is the responsibility of the Client. If the Client does not wish such samples returned, LAB may add storage and disposal fees to the final invoice. Maximum storage time for samples is 30 days after completion of analysis unless modified by applicable state or federal laws. Client will be required to give the LAB written instructions concerning disposal of these samples.

LAB reserves the absolute right, exercisable at any time, to refuse to receive delivery of, refuse to accept, or revoke acceptance of any sample, which, in the sole judgment of LAB (a) is of unsuitable volume, (b) may be or become unsuitable for or may pose a risk in handling, transport, or processing for any health, safety, environmental or other reason whether or not due to the presence in the sample of any hazardous substance, and whether or not such presence has been disclosed to LAB by Client or (c) if the condition or sample date make the sample unsuitable for analysis.

Legal Responsibility. LAB is solely responsible for performance of this contract, and no affiliated company, director, officer, employee, or agent shall have any legal responsibility hereunder, whether in contract or tort including negligence.

Assignment.

LAB may assign its performance obligations under this contract to other parties, as it deems necessary. LAB shall disclose to Client any assignee (subcontractor) by ELAP ID # on the submitted final report.

Force Majeure.

LAB shall have no responsibility or liability to the Client for any failure or delay in performance by LAB, which results in whole or in part from any cause or circumstance beyond the reasonable control of LAB. Such causes and circumstances shall include, but not limited to, acts of God, acts or orders of any government authority, strikes or other labor disputes, natural disasters, accidents, wars, civil disturbances, difficulties or delays in transportation, mail or delivery services, inability to obtain sufficient services or supplies from LAB's usual suppliers, or any other cause beyond LAB's reasonable control.

Law.

This contract shall be continued under the laws of the State of New York without regard to its conflicts of laws provision.

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt. Page 6 of 8

### **CHAIN OF CUSTODY**



please indicate date needed

211087 /272

I PAR	ADIIC	M-		REPORT TO.							INVO	CEII	U.					
(eyicissi	ADIG	Ole		COMPANY: NRC			COMPAN			AME						LAB PROJECT ID		
				2525 George Urban			ADDRES	S:	3500	Sun	rise ⊦				3ldg 200	163291		
				CITY: Depew STATE:	NY ZIP:	14043	CITY:		Grea	t Riv	er	STA	TE:	VY	ZIP: ###	Quotation #:		
				PHONE: 716-525-1962 FAX:			PHONE:		431-	224-9	914 <sup>· F/</sup>	AX:				Email: jacqueline.allard@usec		
PROJE	CT REFER	ENCE		ATTN: Jackie Allard			ATTN:		Acco	unts	Paya	ble a	ap@r	rcc.	com	jeffrey.kramarz@nationalgrid.co lisa.montesano@nation ,linda.parker@nation	nalgrid.com	
DK-13	3 Fleet Gar	age		Matrix Codes: AQ - Aqueous Liquid NQ - Non-Aqueous Liquid	<b>WA -</b> W <b>WG</b> - G	/ater roundwa	ter				ig Water	er		50 - S SL - S		SD - Solid WP - Wipe PT - Paint CK - Caulk	OL - Oil AR - Air	
		3.5	1					F	EQU	EST	ED A	NAL'	YSIS	ÚÚ.	10.17			
DATE COLLECTED	TIME COLLECTED	C O M P O S I T E	G R A B	SAMPLE IDENTIFIER		M C C T D R E X	CONTAINERS NUMBER OF	PCBs	TCLP RCRA Metal							REMARKS	PARADIGM LAB SAMPLE NUMBER	
19-Mar		Х		Spoil Pile		so	1	x	Х						DL=1.0	opm for both	OIA	
19-Mar			Х	Frac Tank		AQ	1	х									0a	
								П		1			П		A fo	or TCL Pextract.		
				230											GP	3/22/21		
				2021-39				Ħ	$\top$	Т	$\Box$		H	1		7 - 70		
				3000				П		T			П	1				
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Turnaroun	d Time			Report Supplements	2	0 0 0	Su	1/1	L.		3	1	. /	_	,			
Availabi	ility continger	nt upon l	ab appı	roval; additional fees may apply.	12	<u>y</u>	30	<u> </u>	1-0	\	1	11	1/	4				
itandard 5 day		None R	equired	None Required	Sample	N. l	1	0 1	H			Date 3/	e/Tim	6	,	Total Cost:		
0 day		Batch C	C	Basic EDD	Relingu	ished By	16					Dat	e/Tim	12				
Rush 3 day	X	Categor	у А	NYSDEC EDD		Bac	in		2	le	al		ءَ ۔	3/	19/2	21 3:30 P.LF.		
Rush 2 day		Categor	уВ		Receive	ed By	12	_				Dat 2 /	e/Tim	- 1		16:36		
Rush 1 day					Received & Lab By Date/Time													
Other lease indicate date neede	ed	Other please ind	cate packa	Other EDD please indicate EDD needed	By sig	ning th	is forn	ı, cli	ent a	grees	s to Pa	aradi	gm T	'erm	s and Con	ditions (reverse).		

8°C 3/22/21 10,28



## Chain of Custody Supplement

Client:		NRC	Completed by:	Glenn Pezznlo
Lab Project II	D:	211087	Date:	3/22/21
		<b>Sample Cond</b> Per NELAC/ELA	lition Requirements P 210/241/242/243/244	÷ v
Condition		NELAC compliance with the sam Yes	ple condition requirements No	upon receipt N/A
Container Type		X		
	Comments			3
Transferred to me compliant contain				X
Headspace (<1 mL)	Comments			
Preservation	Comments			
Chlorine Absent (<0.10 ppm per				
Holding Time	Comments			
Temperature	Comments	8,C	X	X Metals
Compliant Samp	le Quantity/Ty	уре		



Analytical Report For

### **National Grid**

For Lab Project ID

210870

Referencing

Dewey Fleet Lift Replacement - Job # 163291

Prepared

Wednesday, March 10, 2021

Any noncompliant QC parameters or other notes impacting data interpretation are flagged or documented on the final report or are noted below.

Certifies that this report has been approved by the Technical Director or Designee

179 Lake Avenue • Rochester, NY 14608 • (585) 647-2530 • Fax (585) 647-3311 • ELAP ID# 10958



Client: <u>National Grid</u>

**Project Reference:** Dewey Fleet Lift Replacement - Job # 163291

**Sample Identifier:** Frac Tank **Lab Sample ID:** 210870-01

Lab Sample ID:210870-01Date Sampled:3/5/2021Matrix:Aq LiquidDate Received:3/8/2021

#### **PCBs**

<u>Analyte</u>	<u>Result</u>	<u>Units</u>		<b>Qualifier</b>	<b>Date Analy</b>	<u>vzed</u>
PCB-1016	< 1000	ug/L			3/8/2021	13:22
PCB-1221	< 1000	ug/L			3/8/2021	13:22
PCB-1232	< 1000	ug/L			3/8/2021	13:22
PCB-1242	< 1000	ug/L			3/8/2021	13:22
PCB-1248	< 1000	ug/L			3/8/2021	13:22
PCB-1254	< 1000	ug/L			3/8/2021	13:22
PCB-1260	< 1000	ug/L			3/8/2021	13:22
PCB-1262	< 1000	ug/L			3/8/2021	13:22
PCB-1268	< 1000	ug/L			3/8/2021	13:22
<u>Surrogate</u>	Percent F	Recovery	<u>Limits</u>	<u>Outliers</u>	<b>Date Analy</b>	zed
Tetrachloro-m-xylene	NO	2	31.6 - 98.5		3/8/2021	13:22

Method Reference(s): EPA 8082A

EPA 3510C

**Preparation Date:** 3/8/2021



Client: <u>National Grid</u>

**Project Reference:** Dewey Fleet Lift Replacement - Job # 163291

**Sample Identifier:** Spoils Pile

 Lab Sample ID:
 210870-02
 Date Sampled:
 3/5/2021

 Matrix:
 Soil
 Date Received:
 3/8/2021

#### **PCBs**

<u>Analyte</u>	<u>Result</u>	<u>Units</u>		<b>Qualifier</b>	<b>Date Analy</b>	<u>vzed</u>
PCB-1016	< 1.00	mg/Kg			3/9/2021	01:36
PCB-1221	< 1.00	mg/Kg			3/9/2021	01:36
PCB-1232	< 1.00	mg/Kg			3/9/2021	01:36
PCB-1242	< 1.00	mg/Kg			3/9/2021	01:36
PCB-1248	< 1.00	mg/Kg			3/9/2021	01:36
PCB-1254	< 1.00	mg/Kg			3/9/2021	01:36
PCB-1260	< 1.00	mg/Kg			3/9/2021	01:36
PCB-1262	< 1.00	mg/Kg			3/9/2021	01:36
PCB-1268	< 1.00	mg/Kg			3/9/2021	01:36
<u>Surrogate</u>	Percent R	ecovery	<u>Limits</u>	<u>Outliers</u>	<b>Date Analy</b>	zed
Tetrachloro-m-xylene	51.	4	18.8 - 97.4		3/9/2021	01:36

**Method Reference(s):** EPA 8082A

EPA 3546

**Preparation Date:** 3/8/2021



Client: National Grid

**Project Reference:** Dewey Fleet Lift Replacement - Job # 163291

**Sample Identifier:** Spoils Pile

Lab Sample ID:210870-02ADate Sampled:3/5/2021Matrix:TCLP ExtractDate Received:3/8/2021

#### TCLP Mercury

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	Regulatory Limit Qualifier	<b>Date Analyzed</b>
Mercury	< 0.00200	mg/L	0.2	3/10/2021 09:49

Method Reference(s): EPA 7470A

EPA 1311

**Preparation Date:** 3/9/2021 **Data File:** Hg210310A

#### TCLP RCRA Metals (ICP)

<u>Analyte</u>	<u>Result</u>	<u>Units</u>	Regulatory Limit Qualifier	<b>Date Analyzed</b>
Arsenic	< 0.500	mg/L	5	3/9/2021 10:48
Barium	< 0.500	mg/L	100	3/9/2021 10:48
Cadmium	< 0.0250	mg/L	1	3/9/2021 10:48
Chromium	< 0.500	mg/L	5	3/9/2021 10:48
Lead	< 0.500	mg/L	5	3/9/2021 10:48
Selenium	< 0.200	mg/L	1	3/9/2021 10:48
Silver	< 0.500	mg/L	5	3/9/2021 10:48

Method Reference(s): EPA 6010C

EPA 1311 / 3005A

Preparation Date: 3/9/2021 Data File: 210309A



### **Analytical Report Appendix**

The reported results relate only to the samples as they have been received by the laboratory.

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All soil/sludge samples have been reported on a dry weight basis, unless qualified "reported as received". Other solids are reported as received.

Low level Volatiles blank reports for soil/solid matrix are based on a nominal 5 gram weight. Sample results and reporting limits are based on actual weight, which may be more or less than 5 grams.

The Chain of Custody provides additional information, including compliance with sample condition requirements upon receipt. Sample condition requirements are defined under the 2003 NELAC Standard, sections 5.5.8.3.1 and 5.5.8.3.2.

NYSDOH ELAP does not certify for all parameters. Paradigm Environmental Services or the indicated subcontracted laboratory does hold certification for all analytes where certification is offered by ELAP unless otherwise specified. Aliquots separated for certain tests, such as TCLP, are indicated on the Chain of Custody and final reports with an "A" suffix.

Data qualifiers are used, when necessary, to provide additional information about the data. This information may be communicated as a flag or as text at the bottom of the report. Please refer to the following list of analyte-specific, frequently used data flags and their meaning:

- "<" = Analyzed for but not detected at or above the quantitation limit.
- "E" = Result has been estimated, calibration limit exceeded.
- "Z" = See case narrative.
- "D" = Sample, Laboratory Control Sample, or Matrix Spike Duplicate results above Relative Percent Difference limit.
- "M" = Matrix spike recoveries outside QC limits. Matrix bias indicated.
- "B" = Method blank contained trace levels of analyte. Refer to included method blank report.
- "I" = Result estimated between the quantitation limit and half the quantitation limit.
- "L" = Laboratory Control Sample recovery outside accepted QC limits.
- "P" = Concentration differs by more than 40% between the primary and secondary analytical columns.
- "NC" = Not calculable. Applicable to RPD if sample or duplicate result is non-detect or estimated (see primary report for data flags). Applicable to MS if sample is greater or equal to ten times the spike added. Applicable to sample surrogates or MS if sample dilution is 10x or higher.
- "\*" = Indicates any recoveries outside associated acceptance windows. Surrogate outliers in samples are presumed matrix effects. LCS demonstrates method compliance unless otherwise noted.
- "(1)" = Indicates data from primary column used for QC calculation.
- "A" = denotes a parameter for which ELAP does not offer approval as part of their laboratory certification program.
- "F" = denotes a parameter for which Paradigm does not carry certification, the results for which should therefore only be used where ELAP certification is not required, such as personal exposure assessment.

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt.

Page 5 of 8

### GENERAL TERMS AND CONDITIONS LABORATORY SERVICES

These Terms and Conditions embody the whole agreement of the parties in the absence of a signed and executed contract between the Laboratory (LAB) and Client. They shall supersede all previous communications, representations, or agreements, either verbal or written, between the parties. The LAB specifically rejects all additional, inconsistent, or conflicting terms, whether printed or otherwise set forth in any purchase order or other communication from the Client to the LAB. The invalidity or unenforceability in whole or in part of any provision, tern or condition hereof shall not affect in any way the validity or enforceability of the remainder of the Terms and Conditions. No waiver by LAB of any provision, term, or condition hereof or of any breach by or obligation of the Client hereunder shall constitute a waiver of such provision, term, or condition on any other occasion or a waiver of any other breach by or obligation of the Client. This agreement shall be administered and interpreted under the laws of the state which services are procured.

Warranty.

Recognizing that the nature of many samples is unknown and that some may contain potentially hazardous components, LAB warrants only that it will perform testing services, obtain findings, and prepare reports in accordance with generally accepted analytical laboratory principles and practices at the time of performance of services. LAB makes no other warranty, express or implied.

Scope and Compensation. LAB agrees to perform the services described in the chain of custody to which these terms and conditions are attached. Unless the parties agree in writing to the contrary, the duties of LAB shall not be construed to exceed the services specifically described. LAB wi use LAB default method for all tests unless specified otherwise on the Work Order.

Payment terms are net 30 days from the date of invoice. All overdue payments are subject to an interest charge of one and one-half percent (1-1/2%) per month or a portion thereof. Client shall also be responsible for costs of collection, including payment of reasonable attorney fees if such expense is incurred. The prices, unless stated, do not include any sale, use or other taxes. Such taxes will be added to invoice prices when required.

Prices.

Compensation for services performed will be based on the current Lab Analytical Fee Schedule or on quotations agreed to in writing by the parties. Turnaround time based charges are determined from the time of resolution of all work order questions. Testimony, court appearances or data compilation for legal action will be charged separately. Evaluation and reporting of initial screening runs may incur additional fees.

Limitations of Liability.

In the event of any error, omission, or other professional negligence, the sole and exclusive responsibility of LAB shall be to reperform the deficient work at its own expense and LAB shall have no other liability whatsoever. All claims shall be deemed waived unless made in writing and received by LAB within ninety (90) days following completion of services.

LAB shall have no liability, obligation, or responsibility of any kind for losses, costs, expenses, or other damages (including but not limited to any special, direct, incidental or consequential damages) with respect to LAB's services or results.

All results provided by LAB are strictly for the use of its clients and LAB is in no way responsible for the use of such results by clients or third parties. All reports should be considered in their entirety, and LAB is not responsible for the separation, detachment, or other use of any portion of these reports. Client may not assign the lab report without the written consent of the LAB. Client covenants and agrees, at its/his/her sole expense, to indemnify, protect, defend, and save harmless the LAB from and against

any and all damages, losses, liabilities, obligations, penalties, claims, litigation, demands, defenses, judgments, suits, actions, proceedings, costs, disbursements and/or expenses (including, without limitation attorneys' and experts' fees and disbursements) of any kind whatsoever which may at any time be imposed upon, incurred by or asserted or awarded against client relating to, resulting from or arising out of (a) the breach of this agreement by this client, (b) the negligence of the client in handling, delivering or disclosing any hazardous substance, (c) the violation of the Client of any applicable law, (d) non-compliance by the Client with any environmental permit or (e) a material misrepresentation in disclosing the materials to be tested.

Hazard Disclosure.

Client represents and warrants that any sample delivered to LAB will be preceded or accompanied by complete written disclosure of the presence of any hazardous substances known or suspected by Client. Client further warrants that any sample containing any hazardous substance that is to be delivered to LAB will be packaged, labeled, transported, and delivered properly and in accordance with applicable laws.

Sample Handling.

Prior to LAB's acceptance of any sample (or after any revocation of acceptance), the entire risk of loss or of damage to such sample remains with Client. Samples are accepted when receipt is acknowledged on chain of custody documentation. In no event will LAB have any responsibility for the action or inaction of any carrier shipping or delivering any sample to or from LAB premises. Client authorizes LAB to proceed with the analysis of samples as received by the laboratory, recognizing that any samples not in compliance with all current DOH-ELAP-NELAP requirements for containers, preservation or holding time will be noted as such on the final report.

Disposal of hazardous waste samples is the responsibility of the Client. If the Client does not wish such samples returned, LAB may add storage and disposal fees to the final invoice. Maximum storage time for samples is 30 days after completion of analysis unless modified by applicable state or federal laws. Client will be required to give the LAB written instructions concerning disposal of these samples.

LAB reserves the absolute right, exercisable at any time, to refuse to receive delivery of, refuse to accept, or revoke acceptance of any sample, which, in the sole judgment of LAB (a) is of unsuitable volume, (b) may be or become unsuitable for or may pose a risk in handling, transport, or processing for any health, safety, environmental or other reason whether or not due to the presence in the sample of any hazardous substance, and whether or not such presence has been disclosed to LAB by Client or (c) if the condition or sample date make the sample unsuitable for analysis.

Legal Responsibility. LAB is solely responsible for performance of this contract, and no affiliated company, director, officer, employee, or agent shall have any legal responsibility hereunder, whether in contract or tort including negligence.

Assignment.

LAB may assign its performance obligations under this contract to other parties, as it deems necessary. LAB shall disclose to Client any assignee (subcontractor) by ELAP ID # on the submitted final report.

Force Majeure.

LAB shall have no responsibility or liability to the Client for any failure or delay in performance by LAB, which results in whole or in part from any cause or circumstance beyond the reasonable control of LAB. Such causes and circumstances shall include, but not limited to, acts of God, acts or orders of any government authority, strikes or other labor disputes, natural disasters, accidents, wars, civil disturbances, difficulties or delays in transportation, mail or delivery services, inability to obtain sufficient services or supplies from LAB's usual suppliers, or any other cause beyond LAB's reasonable control.

Law.

This contract shall be continued under the laws of the State of New York without regard to its conflicts of laws provision.

This report is part of a multipage document and should only be evaluated in its entirety. The Chain of Custody provides additional sample information, including compliance with the sample condition requirements upon receipt. Page 6 of 8

### CHAIN OF CUSTODY

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## Chain of Custody Supplement

Client:	National Grid	Completed by:	Glenn Pezzulo
Lab Project ID:	210870	Date:	3/8/21
	<b>Sample Condi</b> Per NELAC/ELAF	tion Requirements 210/241/242/243/244	
Condition	NELAC compliance with the samp Yes	ole condition requirements No	upon receipt N/A
Container Type	X		
Comments		; e	
Transferred to method- compliant container			X
Headspace (<1 mL) Comments			<u> </u>
Preservation  Comments			
Chlorine Absent (<0.10 ppm per test strip) Comments			
Holding Time  Comments			
Temperature  Comments	9°C		metals
Compliant Sample Quantity/	Туре		



#### ANALYTICAL REPORT

Lab Number: L2136096

Client: Arcadis of New York, Inc.

50 Fountain Plaza

Suite 600

Buffalo, NY 14202

ATTN: Luke Goetz
Phone: (716) 667-6650

Project Name: NATIONAL GRID DK-13

Project Number: 30091282

Report Date: 07/08/21

The original project report/data package is held by Alpha Analytical. This report/data package is paginated and should be reproduced only in its entirety. Alpha Analytical holds no responsibility for results and/or data that are not consistent with the original.

Certifications & Approvals: MA (M-MA086), NH NELAP (2064), CT (PH-0574), IL (200077), ME (MA00086), MD (348), NJ (MA935), NY (11148), NC (25700/666), PA (68-03671), RI (LAO00065), TX (T104704476), VT (VT-0935), VA (460195), USDA (Permit #P330-17-00196).

Eight Walkup Drive, Westborough, MA 01581-1019 508-898-9220 (Fax) 508-898-9193 800-624-9220 - www.alphalab.com



**Project Name:** NATIONAL GRID DK-13

Project Number: 30091282

Lab Number:

L2136096

Report Date:

07/08/21

Alpha Sample ID	Client ID	Matrix	Sample Location	Collection Date/Time	Receive Date
L2136096-01	DK-13-CS-TOC	CONCRETE	144 KENSINGTON AVE, BUFFALO, NY	07/02/21 12:00	07/02/21
L2136096-02	DK-13-CS-BOC	CONCRETE	144 KENSINGTON AVE, BUFFALO, NY	07/02/21 11:30	07/02/21



L2136096

Lab Number:

Project Name: NATIONAL GRID DK-13

Project Number: 30091282 Report Date: 07/08/21

#### **Case Narrative**

The samples were received in accordance with the Chain of Custody and no significant deviations were encountered during the preparation or analysis unless otherwise noted. Sample Receipt, Container Information, and the Chain of Custody are located at the back of the report.

Results contained within this report relate only to the samples submitted under this Alpha Lab Number and meet NELAP requirements for all NELAP accredited parameters unless otherwise noted in the following narrative. The data presented in this report is organized by parameter (i.e. VOC, SVOC, etc.). Sample specific Quality Control data (i.e. Surrogate Spike Recovery) is reported at the end of the target analyte list for each individual sample, followed by the Laboratory Batch Quality Control at the end of each parameter. Tentatively Identified Compounds (TICs), if requested, are reported for compounds identified to be present and are not part of the method/program Target Compound List, even if only a subset of the TCL are being reported. If a sample was re-analyzed or re-extracted due to a required quality control corrective action and if both sets of data are reported, the Laboratory ID of the re-analysis or re-extraction is designated with an "R" or "RE", respectively.

When multiple Batch Quality Control elements are reported (e.g. more than one LCS), the associated samples for each element are noted in the grey shaded header line of each data table. Any Laboratory Batch, Sample Specific % recovery or RPD value that is outside the listed Acceptance Criteria is bolded in the report. In reference to questions H (CAM) or 4 (RCP) when "NO" is checked, the performance criteria for CAM and RCP methods allow for some quality control failures to occur and still be within method compliance. In these instances, the specific failure is not narrated but noted in the associated QC Outlier Summary Report, located directly after the Case Narrative. QC information is also incorporated in the Data Usability Assessment table (Format 11) of our Data Merger tool, where it can be reviewed in conjunction with the sample result, associated regulatory criteria and any associated data usability implications.

Soil/sediments, solids and tissues are reported on a dry weight basis unless otherwise noted. Definitions of all data qualifiers and acronyms used in this report are provided in the Glossary located at the back of the report.

HOLD POLICY - For samples submitted on hold, Alpha's policy is to hold samples (with the exception of Air canisters) free of charge for 21 calendar days from the date the project is completed. After 21 calendar days, we will dispose of all samples submitted including those put on hold unless you have contacted your Alpha Project Manager and made arrangements for Alpha to continue to hold the samples. Air canisters will be disposed after 3 business days from the date the project is completed.

Please contact Project Management at 800-624-9220 with any questions.	



Serial\_No:07082111:40

Project Name: NATIONAL GRID DK-13

Project Number: 30091282

Lab Number:

L2136096

Report Date:

07/08/21

#### **Case Narrative (continued)**

Report Submission

All non-detect (ND) or estimated concentrations (J-qualified) have been quantitated to the limit noted in the MDL column.

I, the undersigned, attest under the pains and penalties of perjury that, to the best of my knowledge and belief and based upon my personal inquiry of those responsible for providing the information contained in this analytical report, such information is accurate and complete. This certificate of analysis is not complete unless this page accompanies any and all pages of this report.

Cattlin Wallet Caitlin Walukevich

Authorized Signature:

Title: Technical Director/Representative

Date: 07/08/21

# **ORGANICS**



# **PCBS**



Serial\_No:07082111:40

Project Name: NATIONAL GRID DK-13 Lab Number: L2136096

**Project Number:** 30091282 **Report Date:** 07/08/21

**SAMPLE RESULTS** 

Lab ID: L2136096-01 Date Collected: 07/02/21 12:00

Client ID: DK-13-CS-TOC Date Received: 07/02/21 Sample Location: 144 KENSINGTON AVE, BUFFALO, NY Field Prep: Not Specified

Sample Depth:

Matrix: Concrete Extraction Method: EPA 3540C
Analytical Method: 1,8082A Extraction Date: 07/03/21 11:41
Analytical Date: 07/05/21 19:21 Cleanup Method: EPA 3665A

Analyst: CW Cleanup Date: 07/05/21

Percent Solids: 97% Cleanup Method: EPA 3660B

Cleanup Date: 07/05/21

Parameter	Result	Qualifier	Units	RL	MDL	<b>Dilution Factor</b>	Column
Polychlorinated Biphenyls by G	C - Westborough Lab						
Aroclor 1016	ND		ug/kg	98.4	8.74	1	А
Aroclor 1221	ND		ug/kg	98.4	9.86	1	Α
Aroclor 1232	ND		ug/kg	98.4	20.8	1	Α
Aroclor 1242	ND		ug/kg	98.4	13.3	1	Α
Aroclor 1248	ND		ug/kg	98.4	14.8	1	Α
Aroclor 1254	ND		ug/kg	98.4	10.8	1	Α
Aroclor 1260	358		ug/kg	98.4	18.2	1	В
Aroclor 1262	ND		ug/kg	98.4	12.5	1	Α
Aroclor 1268	ND		ug/kg	98.4	10.2	1	Α
PCBs, Total	358		ug/kg	98.4	8.74	1	В

Surrogate	% Recovery	Qualifier	Acceptance Criteria	Column
2,4,5,6-Tetrachloro-m-xylene	67		30-150	Α
Decachlorobiphenyl	72		30-150	Α
2,4,5,6-Tetrachloro-m-xylene	70		30-150	В
Decachlorobiphenyl	81		30-150	В



Serial\_No:07082111:40

Project Name: NATIONAL GRID DK-13 Lab Number: L2136096

**Project Number:** 30091282 **Report Date:** 07/08/21

**SAMPLE RESULTS** 

Lab ID: L2136096-02 Date Collected: 07/02/21 11:30

Client ID: DK-13-CS-BOC Date Received: 07/02/21 Sample Location: 144 KENSINGTON AVE, BUFFALO, NY Field Prep: Not Specified

Sample Depth:

Matrix: Concrete Extraction Method: EPA 3540C
Analytical Method: 1,8082A Extraction Date: 07/03/21 11:41
Analytical Date: 07/05/21 19:30 Cleanup Method: EPA 3665A

Analyst: CW Cleanup Date: 07/05/21

Percent Solids: 97% Cleanup Method: EPA 3660B

Cleanup Date: 07/05/21

Parameter	Result	Qualifier	Units	RL	MDL	Dilution Factor	Column
Polychlorinated Biphenyls by GC - We	stborough Lab						
Aroclor 1016	ND		ug/kg	100	8.89	1	А
Aroclor 1221	ND		ug/kg	100	10.0	1	Α
Aroclor 1232	ND		ug/kg	100	21.2	1	Α
Aroclor 1242	ND		ug/kg	100	13.5	1	Α
Aroclor 1248	ND		ug/kg	100	15.0	1	Α
Aroclor 1254	ND		ug/kg	100	10.9	1	Α
Aroclor 1260	909		ug/kg	100	18.5	1	В
Aroclor 1262	ND		ug/kg	100	12.7	1	Α
Aroclor 1268	ND		ug/kg	100	10.4	1	Α
PCBs, Total	909		ug/kg	100	8.89	1	В

Surrogate	% Recovery	Qualifier	Acceptance Criteria	Column
	70110001019		Orneria	
2,4,5,6-Tetrachloro-m-xylene	37		30-150	Α
Decachlorobiphenyl	34		30-150	Α
2,4,5,6-Tetrachloro-m-xylene	40		30-150	В
Decachlorobiphenyl	40		30-150	В



L2136096

Lab Number:

**Project Name:** NATIONAL GRID DK-13

Report Date: **Project Number:** 30091282 07/08/21

**Method Blank Analysis** 

**Batch Quality Control** 

Analytical Method: 1,8082A Analytical Date: 07/05/21 18:57

Analyst: CW

Extraction Method: EPA 3540C 07/03/21 11:41 **Extraction Date:** Cleanup Method: EPA 3665A Cleanup Date: 07/05/21 Cleanup Method: EPA 3660B Cleanup Date: 07/05/21

Parameter	Result	Qualifier	Units	RL		MDL	Column
Polychlorinated Biphenyls by GC - V	Westborough	Lab for s	sample(s):	01-02	Batch:	WG15	20151-1
Aroclor 1016	ND		ug/kg	84.4		7.50	А
Aroclor 1221	ND		ug/kg	84.4		8.46	Α
Aroclor 1232	ND		ug/kg	84.4		17.9	Α
Aroclor 1242	ND		ug/kg	84.4		11.4	Α
Aroclor 1248	ND		ug/kg	84.4		12.7	Α
Aroclor 1254	ND		ug/kg	84.4		9.24	Α
Aroclor 1260	ND		ug/kg	84.4		15.6	Α
Aroclor 1262	ND		ug/kg	84.4		10.7	Α
Aroclor 1268	ND		ug/kg	84.4		8.75	Α
PCBs, Total	ND		ug/kg	84.4		7.50	Α

		Acceptano	ce
Surrogate	%Recovery Qualifie	er Criteria	Column
2,4,5,6-Tetrachloro-m-xylene	69	30-150	Α
Decachlorobiphenyl	70	30-150	Α
2,4,5,6-Tetrachloro-m-xylene	69	30-150	В
Decachlorobiphenyl	73	30-150	В



# Lab Control Sample Analysis Batch Quality Control

**Project Name:** NATIONAL GRID DK-13

Project Number: 30091282

Lab Number:

L2136096

Report Date:

07/08/21

	LCS		LCSD		%Recovery			RPD	
Parameter	%Recovery	Qual	%Recovery	Qual	Limits	RPD	Qual	Limits	Column
Polychlorinated Biphenyls by GC - Westbor	ough Lab Associa	ated sample(s)	: 01-02 Batch	WG1520	0151-2 WG152015	51-3			
Aroclor 1016	95		94		40-140	1		50	Α
Aroclor 1260	91		90		40-140	1		50	А

Surrogate	LCS %Recovery Qu	LCSD ral %Recovery Qual	Acceptance Criteria Column
2,4,5,6-Tetrachloro-m-xylene	88	85	30-150 A
Decachlorobiphenyl	82	80	30-150 A
2,4,5,6-Tetrachloro-m-xylene	86	84	30-150 B
Decachlorobiphenyl	89	86	30-150 B

# INORGANICS & MISCELLANEOUS



Serial\_No:07082111:40

Project Name: NATIONAL GRID DK-13

Project Number: 30091282

Lab Number:

L2136096

**Report Date:** 07/08/21

**SAMPLE RESULTS** 

Lab ID: L2136096-01

Client ID: DK-13-CS-TOC

Sample Location: 144 KENSINGTON AVE, BUFFALO, NY

Date Collected:

07/02/21 12:00

Date Received:

07/02/21

Field Prep: Not Specified

Sample Depth:

Matrix: Concrete

Parameter	Result	Qualifier	Units	RL	MDL	Dilution Factor	Date Prepared	Date Analyzed	Analytical Method	Analyst
General Chemistry -	Westborough Lab									
Solids, Total	96.8		%	0.100	NA	1	-	07/03/21 08:14	121,2540G	RI



Serial\_No:07082111:40

Project Name: NATIONAL GRID DK-13 Lab Number: L2136096

Project Number: 30091282 Report Date: 07/08/21

**SAMPLE RESULTS** 

Lab ID: L2136096-02 Date Collected: 07/02/21 11:30

Client ID: DK-13-CS-BOC Date Received: 07/02/21 Sample Location: 144 KENSINGTON AVE, BUFFALO, NY Field Prep: Not Specified

Sample Depth:

Matrix: Concrete

Parameter	Result (	Qualifier	Units	RL	MDL	Dilution Factor	Date Prepared	Date Analyzed	Analytical Method	Analyst
General Chemistry -	- Westborough Lab									
Solids, Total	97.4		%	0.100	NA	1	-	07/03/21 08:14	121,2540G	RI



Lab Duplicate Analysis

Batch Quality Control

Lab Number: **Project Name:** NATIONAL GRID DK-13 L2136096

**Project Number:** Report Date: 07/08/21 30091282

Parameter	Native Sample	e Duplicate Sample	Units	RPD	Qual	RPD Limits
General Chemistry - Westborough Lab As	ssociated sample(s): 01-02 Q	QC Batch ID: WG1520075-1	QC Sample:	L2135957-01	Client ID:	DUP Sample
Solids, Total	90.6	90.7	%	0		20



Serial\_No:07082111:40

*Lab Number:* L2136096

Report Date: 07/08/21

## Sample Receipt and Container Information

YES Were project specific reporting limits specified?

NATIONAL GRID DK-13

**Cooler Information** 

Project Name:

**Custody Seal** Cooler

Α Absent

Project Number: 30091282

Container Info	ormation		Initial	Final	Temp			Frozen	
Container ID	Container Type	Cooler	pН	pН	deg C	Pres	Seal	Date/Time	Analysis(*)
L2136096-01A	Plastic 2oz unpreserved for TS	Α	NA		5.1	Υ	Absent		TS(7)
L2136096-01B	Glass 60mL/2oz unpreserved	Α	NA		5.1	Υ	Absent		NYTCL-8082-3540C(365)
L2136096-02A	Plastic 2oz unpreserved for TS	Α	NA		5.1	Υ	Absent		TS(7)
L2136096-02B	Glass 60mL/2oz unpreserved	Α	NA		5.1	Υ	Absent		NYTCL-8082-3540C(365)



**Project Name:** Lab Number: NATIONAL GRID DK-13 L2136096 **Report Date: Project Number:** 30091282 07/08/21

GLOSSARY

### Acronyms

**EDL** 

LOQ

MS

RL

SRM

DL - Detection Limit: This value represents the level to which target analyte concentrations are reported as estimated values, when those target analyte concentrations are quantified below the limit of quantitation (LOQ). The DL includes any adjustments from dilutions, concentrations or moisture content, where applicable. (DoD report formats only.)

- Estimated Detection Limit: This value represents the level to which target analyte concentrations are reported as estimated values, when those target analyte concentrations are quantified below the reporting limit (RL). The EDL includes any adjustments from dilutions, concentrations or moisture content, where applicable. The use of EDLs is specific to the analysis of PAHs using Solid-Phase Microextraction (SPME).

**EMPC** - Estimated Maximum Possible Concentration: The concentration that results from the signal present at the retention time of an analyte when the ions meet all of the identification criteria except the ion abundance ratio criteria. An EMPC is a worst-case estimate of the concentration.

**EPA** Environmental Protection Agency.

LCS - Laboratory Control Sample: A sample matrix, free from the analytes of interest, spiked with verified known amounts of analytes or a material containing known and verified amounts of analytes.

LCSD Laboratory Control Sample Duplicate: Refer to LCS.

LFB - Laboratory Fortified Blank: A sample matrix, free from the analytes of interest, spiked with verified known amounts of analytes or a material containing known and verified amounts of analytes.

LOD - Limit of Detection: This value represents the level to which a target analyte can reliably be detected for a specific analyte in a specific matrix by a specific method. The LOD includes any adjustments from dilutions, concentrations or moisture content, where applicable. (DoD report formats only.)

- Limit of Quantitation: The value at which an instrument can accurately measure an analyte at a specific concentration. The LOQ includes any adjustments from dilutions, concentrations or moisture content, where applicable. (DoD report formats

Limit of Quantitation: The value at which an instrument can accurately measure an analyte at a specific concentration. The LOQ includes any adjustments from dilutions, concentrations or moisture content, where applicable. (DoD report formats

MDI - Method Detection Limit: This value represents the level to which target analyte concentrations are reported as estimated values, when those target analyte concentrations are quantified below the reporting limit (RL). The MDL includes any adjustments from dilutions, concentrations or moisture content, where applicable.

- Matrix Spike Sample: A sample prepared by adding a known mass of target analyte to a specified amount of matrix sample for which an independent estimate of target analyte concentration is available. For Method 332.0, the spike recovery is calculated using the native concentration, including estimated values.

MSD - Matrix Spike Sample Duplicate: Refer to MS.

NA - Not Applicable.

NC - Not Calculated: Term is utilized when one or more of the results utilized in the calculation are non-detect at the parameter's reporting unit.

NDPA/DPA - N-Nitrosodiphenylamine/Diphenylamine.

NI - Not Ignitable.

NP - Non-Plastic: Term is utilized for the analysis of Atterberg Limits in soil.

NR - No Results: Term is utilized when 'No Target Compounds Requested' is reported for the analysis of Volatile or Semivolatile Organic TIC only requests.

- Reporting Limit: The value at which an instrument can accurately measure an analyte at a specific concentration. The RL

includes any adjustments from dilutions, concentrations or moisture content, where applicable. RPD - Relative Percent Difference: The results from matrix and/or matrix spike duplicates are primarily designed to assess the precision of analytical results in a given matrix and are expressed as relative percent difference (RPD). Values which are less than five times the reporting limit for any individual parameter are evaluated by utilizing the absolute difference between the

values; although the RPD value will be provided in the report. - Standard Reference Material: A reference sample of a known or certified value that is of the same or similar matrix as the

associated field samples. STLP - Semi-dynamic Tank Leaching Procedure per EPA Method 1315.

TEF - Toxic Equivalency Factors: The values assigned to each dioxin and furan to evaluate their toxicity relative to 2,3,7,8-TCDD.

TEO - Toxic Equivalent: The measure of a sample's toxicity derived by multiplying each dioxin and furan by its corresponding TEF and then summing the resulting values.

TIC - Tentatively Identified Compound: A compound that has been identified to be present and is not part of the target compound

list (TCL) for the method and/or program. All TICs are qualitatively identified and reported as estimated concentrations.

Report Format: DU Report with 'J' Qualifiers



Project Name: NATIONAL GRID DK-13 Lab Number: L2136096
Project Number: 30091282 Report Date: 07/08/21

#### **Footnotes**

1 - The reference for this analyte should be considered modified since this analyte is absent from the target analyte list of the original method.

#### **Terms**

Analytical Method: Both the document from which the method originates and the analytical reference method. (Example: EPA 8260B is shown as 1,8260B.) The codes for the reference method documents are provided in the References section of the Addendum.

Difference: With respect to Total Oxidizable Precursor (TOP) Assay analysis, the difference is defined as the Post-Treatment value minus the Pre-Treatment value.

Final pH: As it pertains to Sample Receipt & Container Information section of the report, Final pH reflects pH of container determined after adjustment at the laboratory, if applicable. If no adjustment required, value reflects Initial pH.

Frozen Date/Time: With respect to Volatile Organics in soil, Frozen Date/Time reflects the date/time at which associated Reagent Water-preserved vials were initially frozen. Note: If frozen date/time is beyond 48 hours from sample collection, value will be reflected in 'bold'.

Initial pH: As it pertains to Sample Receipt & Container Information section of the report, Initial pH reflects pH of container determined upon receipt, if applicable.

PAH Total: With respect to Alkylated PAH analyses, the 'PAHs, Total' result is defined as the summation of results for all or a subset of the following compounds: Naphthalene, C1-C4 Naphthalenes, 2-Methylnaphthalene, 1-Methylnaphthalene, Biphenyl, Acenaphthylene, Acenaphthene, Fluorene, C1-C3 Fluorenes, Phenanthrene, C1-C4 Phenanthrenes/Anthracenes, Anthracene, Fluoranthene, Pyrene, C1-C4 Fluoranthenes/Pyrenes, Benza(a)anthracene, Chrysene, C1-C4 Chrysenes, Benzo(b)fluoranthene, Benzo(j)+(k)fluoranthene, Benzo(e)pyrene, Benzo(a)pyrene, Perylene, Indeno(1,2,3-cd)pyrene, Dibenz(ah)+(ac)anthracene, Benzo(g,h,i)perylene. If a 'Total' result is requested, the results of its individual components will also be reported.

PFAS Total: With respect to PFAS analyses, the 'PFAS, Total (5)' result is defined as the summation of results for: PFHpA, PFHxS, PFOA, PFNA and PFOS. In addition, the 'PFAS, Total (6)' result is defined as the summation of results for: PFHpA, PFHxS, PFOA, PFNA, PFDA and PFOS. For MassDEP DW compliance analysis only, the 'PFAS, Total (6)' result is defined as the summation of results at or above the RL. Note: If a 'Total' result is requested, the results of its individual components will also be reported.

The target compound Chlordane (CAS No. 57-74-9) is reported for GC ECD analyses. Per EPA, this compound "refers to a mixture of chlordane isomers, other chlorinated hydrocarbons and numerous other components." (Reference: USEPA Toxicological Review of Chlordane, In Support of Summary Information on the Integrated Risk Information System (IRIS), December 1997.)

Total: With respect to Organic analyses, a 'Total' result is defined as the summation of results for individual isomers or Aroclors. If a 'Total' result is requested, the results of its individual components will also be reported. This is applicable to 'Total' results for methods 8260, 8081 and 8082.

### Data Qualifiers

- A -Spectra identified as "Aldol Condensates" are byproducts of the extraction/concentration procedures when acetone is introduced in the process.
- The analyte was detected above the reporting limit in the associated method blank. Flag only applies to associated field samples that have detectable concentrations of the analyte at less than ten times (10x) the concentration found in the blank. For MCP-related projects, flag only applies to associated field samples that have detectable concentrations of the analyte at less than ten times (10x) the concentrations of the analyte at less than ten times (10x) the concentrations of the analyte was detectable concentrations of the analyte at less than ten times (10x) the concentration found in the blank AND the analyte was detected above one-half the reporting limit (or above the reporting limit for common lab contaminants) in the associated method blank. For NJ-Air-related projects, flag only applies to associated field samples that have detectable concentrations of the analyte above the reporting limit. For NJ-related projects (excluding Air), flag only applies to associated field samples that have detectable concentrations of the analyte, which was detected above the reporting limit in the associated method blank or above five times the reporting limit for common lab contaminants (Phthalates, Acetone, Methylene Chloride, 2-Butanone).
- Co-elution: The target analyte co-elutes with a known lab standard (i.e. surrogate, internal standards, etc.) for co-extracted analyses.
- Concentration of analyte was quantified from diluted analysis. Flag only applies to field samples that have detectable concentrations of the analyte.
- E Concentration of analyte exceeds the range of the calibration curve and/or linear range of the instrument.
- F The ratio of quantifier ion response to qualifier ion response falls outside of the laboratory criteria. Results are considered to be an estimated maximum concentration.
- G The concentration may be biased high due to matrix interferences (i.e, co-elution) with non-target compound(s). The result should be considered estimated.
- H The analysis of pH was performed beyond the regulatory-required holding time of 15 minutes from the time of sample collection.
- I The lower value for the two columns has been reported due to obvious interference.
- Estimated value. The Target analyte concentration is below the quantitation limit (RL), but above the Method Detection Limit (MDL) or Estimated Detection Limit (EDL) for SPME-related analyses. This represents an estimated concentration for Tentatively Identified Compounds (TICs).
- $\label{eq:main_equation} \textbf{M} \qquad \text{-Reporting Limit (RL) exceeds the MCP CAM Reporting Limit for this analyte.}$
- ND Not detected at the method detection limit (MDL) for the sample, or estimated detection limit (EDL) for SPME-related analyses.

Report Format: DU Report with 'J' Qualifiers



Project Name:NATIONAL GRID DK-13Lab Number:L2136096Project Number:30091282Report Date:07/08/21

## **Data Qualifiers**

- NJ Presumptive evidence of compound. This represents an estimated concentration for Tentatively Identified Compounds (TICs), where the identification is based on a mass spectral library search.
- P The RPD between the results for the two columns exceeds the method-specified criteria.
- Q -The quality control sample exceeds the associated acceptance criteria. For DOD-related projects, LCS and/or Continuing Calibration Standard exceedences are also qualified on all associated sample results. Note: This flag is not applicable for matrix spike recoveries when the sample concentration is greater than 4x the spike added or for batch duplicate RPD when the sample concentrations are less than 5x the RL. (Metals only.)
- **R** Analytical results are from sample re-analysis.
- **RE** Analytical results are from sample re-extraction.
- S Analytical results are from modified screening analysis.

Report Format: DU Report with 'J' Qualifiers



Serial\_No:07082111:40

Project Name: NATIONAL GRID DK-13 Lab Number: L2136096
Project Number: 30091282 Report Date: 07/08/21

## REFERENCES

Test Methods for Evaluating Solid Waste: Physical/Chemical Methods. EPA SW-846. Third Edition. Updates I - VI, 2018.

121 Standard Methods for the Examination of Water and Wastewater. APHA-AWWA-WEF. Standard Methods Online.

## **LIMITATION OF LIABILITIES**

Alpha Analytical performs services with reasonable care and diligence normal to the analytical testing laboratory industry. In the event of an error, the sole and exclusive responsibility of Alpha Analytical shall be to re-perform the work at it's own expense. In no event shall Alpha Analytical be held liable for any incidental, consequential or special damages, including but not limited to, damages in any way connected with the use of, interpretation of, information or analysis provided by Alpha Analytical.

We strongly urge our clients to comply with EPA protocol regarding sample volume, preservation, cooling, containers, sampling procedures, holding time and splitting of samples in the field.



Serial\_No:07082111:40

Alpha Analytical, Inc. Facility: Company-wide

Department: Quality Assurance

Title: Certificate/Approval Program Summary

ID No.:17873 Revision 19

Page 1 of 1

Published Date: 4/2/2021 1:14:23 PM

## Certification Information

### The following analytes are not included in our Primary NELAP Scope of Accreditation:

## Westborough Facility

EPA 624/624.1: m/p-xylene, o-xylene, Naphthalene

EPA 625/625.1: alpha-Terpineol

EPA 8260C/8260D: NPW: 1,2,4,5-Tetramethylbenzene; 4-Ethyltoluene, Azobenzene; SCM: Iodomethane (methyl iodide), 1,2,4,5-Tetramethylbenzene;

EPA 8270D/8270E: NPW: Dimethylnaphthalene,1,4-Diphenylhydrazine, alpha-Terpineol; SCM: Dimethylnaphthalene,1,4-Diphenylhydrazine.

SM4500: NPW: Amenable Cyanide; SCM: Total Phosphorus, TKN, NO2, NO3.

## **Mansfield Facility**

**SM 2540D:** TSS

EPA 8082A: NPW: PCB: 1, 5, 31, 87,101, 110, 141, 151, 153, 180, 183, 187.

EPA TO-15: Halothane, 2,4,4-Trimethyl-2-pentene, 2,4,4-Trimethyl-1-pentene, Thiophene, 2-Methylthiophene,

3-Methylthiophene, 2-Ethylthiophene, 1,2,3-Trimethylbenzene, Indan, Indene, 1,2,4,5-Tetramethylbenzene, Benzothiophene, 1-Methylnaphthalene.

Biological Tissue Matrix: EPA 3050B

## The following analytes are included in our Massachusetts DEP Scope of Accreditation

## Westborough Facility:

#### **Drinking Water**

EPA 300.0: Chloride, Nitrate-N, Fluoride, Sulfate; EPA 353.2: Nitrate-N, Nitrite-N; SM4500NO3-F: Nitrate-N, Nitrite-N; SM4500F-C, SM4500CN-CE,

EPA 180.1, SM2130B, SM4500CI-D, SM2320B, SM2540C, SM4500H-B, SM4500NO2-B

EPA 332: Perchlorate; EPA 524.2: THMs and VOCs; EPA 504.1: EDB, DBCP.

Microbiology: SM9215B; SM9223-P/A, SM9223B-Colilert-QT,SM9222D.

#### Non-Potable Water

SM4500H,B, EPA 120.1, SM2510B, SM2540C, SM2320B, SM4500CL-E, SM4500F-BC, SM4500NH3-BH: Ammonia-N and Kjeldahl-N, EPA 350.1: Ammonia-N, LACHAT 10-107-06-1-B: Ammonia-N, EPA 351.1, SM4500NO3-F, EPA 353.2: Nitrate-N, SM4500P-E, SM4500P-B, E, SM4500SO4-E, SM5220D, EPA 410.4, SM5210B, SM5310C, SM4500CL-D, EPA 1664, EPA 420.1, SM4500-CN-CE, SM2540D, EPA 300: Chloride, Sulfate, Nitrate. EPA 624.1: Volatile Halocarbons & Aromatics,

EPA 608.3: Chlordane, Toxaphene, Aldrin, alpha-BHC, beta-BHC, gamma-BHC, delta-BHC, Dieldrin, DDD, DDE, DDT, Endosulfan II, Endosulfan II, Endosulfan sulfate, Endrin, Endrin Aldehyde, Heptachlor, Heptachlor Epoxide, PCBs

EPA 625.1: SVOC (Acid/Base/Neutral Extractables), EPA 600/4-81-045: PCB-Oil.

Microbiology: SM9223B-Colilert-QT; Enterolert-QT, SM9221E, EPA 1600, EPA 1603, SM9222D.

## Mansfield Facility:

## **Drinking Water**

EPA 200.7: Al, Ba, Cd, Cr, Cu, Fe, Mn, Ni, Na, Ag, Ca, Zn. EPA 200.8: Al, Sb, As, Ba, Be, Cd, Cr, Cu, Pb, Mn, Ni, Se, Ag, TL, Zn. EPA 245.1 Hg. EPA 522, EPA 537.1.

### Non-Potable Water

EPA 200.7: Al, Sb, As, Be, Cd, Ca, Cr, Co, Cu, Fe, Pb, Mg, Mn, Mo, Ni, K, Se, Ag, Na, Sr, TL, Ti, V, Zn.

EPA 200.8: Al, Sb, As, Be, Cd, Cr, Cu, Fe, Pb, Mn, Ni, K, Se, Ag, Na, TL, Zn.

EPA 245.1 Hg

SM2340B

For a complete listing of analytes and methods, please contact your Alpha Project Manager.

Pre-Qualtrax Document ID: 08-113 Document Type: Form

Westborough, MA 01581 8 Walkup Dr. TEL: 508-898-9220 FAX: 508-898-9193	NEW YORK CHAIN OF CUSTODY Mansfield, MA 02048 320 Forbes Blvd TEL: 508-822-9300 FAX: 508-822-3288	Service Centers Mahwah, NJ 07430: 35 Whitney Albany, NY 12205: 14 Walker V Tonawanda, NY 14150: 275 Co Project Information Project Name: NATION	Nay oper Ave, Suite 10	DK-13	Page ( of		Delive	Date Rec in Lab erables ASP-A EQuIS (1		-	ASP-E	3 6 (4 File)	Billing Inforr	136096	
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Periodic Review Report – National Grid Dewey/Kensington Service Center (Site #915144)

Reporting Period – November 01, 2020 to November 01, 2021

**Attachment 4 – Waste Disposal Documentation** 

National Grid Page 12

2

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	7. Tran	sporter 2 Company Name			U.S. EPA ID N	lumber			
		ignated Facility Name and Site Address VVayne Disposal Inc. 49350 N. I-94 Service Drive Belleville, MI 48111 800-592-5489			U.S. EPAIDA	lumber		9 N R	3 3
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Ш		ENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully a rarked and labeled/placarded, and are in all respects in proper condition for transport according to applicable inte							
П	E	xporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgmen	t of Consent.	•	•		•		'
П		certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or lors/Offeror's Printed/Typed Name Signature	(D) (D) am a sma	u quantity ge	nerator) is true.		Mor	nth Day	Year
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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/placanded, 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

18. Discrepancy 18a. Discrepancy Indication Space

DESIGNATED

1.

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Transporter signature (for exports only):

Transporter 2 Printed/Typed Name

17. Transporter Acknowledgment of Receipt of Materials r 1 Printed/Typed Name

Quantity

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) of (b) (if I am a

artial F

(b) (if I am a small quantity generator) is true

Port of entry/exit: Date leaving U.S.:

tial Rejection	Full Rejection
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Manifest Reference Number: 18b. Alternate Facility (or Generator) U.S. EPA ID Number

Facility's Phone: 18c. Signature of Alternate Facility (or Generator)

19. Hazardous Wasie Report Management Method Codes (i.e., codes for hazardous waste treatment,	disposal and recycling systems)
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20. Designated Facility Ov or Operator. Certification of receipt of hazardous majerials covered by the manifest except as noted j

Printed/Typed Name

Day

Year

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EPA Form 8700-22 (Rev. 3-05) Previous editions are obsoleté.

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

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Î	<b>QNI</b>	FORM HAZARDOUS 19 Generator ID Number	3. Engagency Response Phone 800-424-9300	4. Manifest Tracking	
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Н	`	Włagara Mohawk Power Corp.	Dewey Aven	ue Service Center	r .
Ш		144 Kensington Avenue Buffalo, NY 14214	93 Dewey Au		
Ш		716-831-7209 Atm: L. Montesano	Buffalo, NY 1		
		Ansporter 1 Company Name Page ETC Tric H	FW)	U.S. EPA ID Number	)-0 2 4-5-5 <del>0 6</del>
Ш	7. Tra	ansporter 2 Company Name		U.S.EPAIDNIPOP	86969947
Ш	8. De	osignated Facility Name and Site Address		U.S. EPA ID Number	
Ш	1	Wayne Disposal Inc.			
Ш		49350 N. 194 Service Drive		, M I D 0	48090633
Ш	Facil	iyBa,Bayille, M148111 890-592-5489	<del></del>	1 101 100	+ 0 0 9 0 0 3 3
Ш	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10, Containers	11, Total 12, Unit Quantity WE/Vol.	
	H	1.	No. Type	<del>                                     </del>	+
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Ш	14. S	pecial Handling Instructions and Additional Information.			
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Ш		Profile # J170049WDI Job/PO # 163291 OOS Da DK-13 Fleet Garage-Hydraulic Lift System Replacement	(Bay SH)	DAY-11	
Ш	15.	GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment a	ere fully and accurately described ab	ove by the proper shipping nar	ne, and are classified, packaged.
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П		Exponen, I comply that the contents of this consignment conform to the terms of the attached EPA Acknowledge to the contents of this consignment to the terms of the attached EPA Acknowledge to the attached E		generator) is true.	
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$\ $	20. D	esignated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manif	est except as noted in Item 18a		
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-	Form		ESIGNATED FACILITY	TO DESTINATION	STATE (IF REQUIRED)

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DESIGNATED FACILITY TO GENERATOR

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Ш		5. Generator's Name and Mailing Address	7.	Generator's Site Address	(if different tha	an mailing addres	is)			
Ш		Niagara Mehawk Power Corp.	1			Service (	Center			
Ш		144 Kensington Avenue Buffalo, NY 14214	_	93 Dav	ioy Avoi	nue				
Ш		Generator's Phone: 6-831-7209 Attn: L. Montosano		Buffalo	<u>: ŃY 14:</u>					
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Form Approved, OMB No. 2050-0039

<i>www.пгсс.сот</i>		Niagara Mohawk Power Corp. 144 Kensington Avenue Buffalo, NY 14214 716-831-7209 Attn: L. Montesano Generator's Phone:	Dewey Avenu 93 Dewey Avenu Buffalo, NY 14	ie Service Center enue 1214	r	www.nrcc.com
0,00		6. Transporter 1 Company Name Tidd's Rolloff			00245508	
m		7. Transporter 2 Company Name		Ü.S. EPA ID Number		\ \{\bar{2}\}
		8. Designated Facility Name and Site Address  Wayne Disposal Inc. 49350 N. I-94 Service Drive Facility Replay Ille, MI48111 800-592-5489		U.S. EPA ID Number	48090633	
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www.nrcc.com		14. Special Handling Instructions and Additional Information  Profile # J170949WD1 Job/PO # 163291 OOS D  DK-13 Fleet Garage-Hydraulic Lift System Replacement	ate:6/21/21 DO	C#BAE 782 K13-4-21	\$ 1. S.	www.nrcc.com
mo		15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknow I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantify ger	are fully and accurately described abo icable International and national govern viedoment of Consent.	ive by the proper shipping nar imental regulations. If export a	me, and are classified, packaged,	MW
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2. Page 1 of 3. Emergency Response Phone

800-424-9300

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

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4. Manifest Tracking Number 003464

In bound -

NYD000730390

Truck#33069
Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

5. Generator's Name and Mailing Address
Niagara Mohawk Power Corp.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number

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14. Special Handling Instructions and Additional Information OOS Date: 6/2/191 DOC#BAE 7.83 Profile # J170049WDI Job/PO # 163291 DK-13 Fleet Garage Hydraulic Lift System Replacement (Bay 4) 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 of (if I am a small quantity generator) is true. nerator's/Offeror's Printed/Typed Name 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 Year D Transporter 2 Pfinted/Typed Name 18. Discrepancy 18a, Discrepancy Indication Space Type \_\_\_ 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) Day 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 4, 20. Designated Facility Owner or Operator: Pertification of receipt of hazardous phaterials covered by the manifest except as noted in Item 18 Printed/Typed Name. EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

**DESIGNATED FACILITY TO GENERATOR** 

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	Plea	se print or type. (Form designed for use on elite (12-pitch) typewriter.)    INTEROPTION   1. Generator ID Number   1. Generator ID Number   2. Page 1 of   3. Emergency Response Phone   4. Manifest Tracking Number   4. Manifest Tracking Number
	11	UNIFORM HAZARDOUS WASTE MANIFEST NYD 0 0 0 7 3 0 3/9 0 2. Page 1 of 3. Emergency Response Phone - 800-424-9300 003464388 GBF
\$		5. Generator's Name and Mailing Address Generator's Site Address (if different than mailing address)
MM	П	144 Kensington Avenue Buffalo, NY 14214 83 Demey Avenue
77	П	Generator's Phone: Buffalo. NY 14214
www.nrcc.com	Ш	6. Transporter 1 Company Name  Page Trucking  U.S. EPAID Number  INYD 9 8 8 9 8 9 8 4 7
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د	$\ \cdot\ $	8. Designated Facility Name and Site Address U.S. EPAID Number  Wayne Disposal inc.
	$\  \cdot \ $	49350 N. 1-84 Service Drive
		Facility Pristave In , MI48111 800-592-5489 MID 0 4 8 0 9 0 8 3 3
		9a.   9b. U.S. OOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))   10. Containers   11. Total   12. Unit   13. Waste Codes   14. Waste Codes   15. Waste Cod
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M.	Ш	14. Special Handling Instructions and Additional Information
7	:	Profile # J170048WDI Job/RO # 163281 OOS Date: 6/21/21 DOC#BAE 784 DK-13 Fleet Garage Hydraulic Lift System Replacement (Bay 5) 104 DV12-1-23
www.nrcc.com	ŀ	DK-13 Fleet Garage Hydraulic Lift System Replacement (Bay 5) 104 DK13-4-23
ön	Ш	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.
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5		Facility's Phone:  18c. Signature of Alternate Facility (or Generator)  Month Day Year
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Ž.	DESIGNATED	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)  1.
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www.nrcc.com		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as ricted in Item 18a  Printed/Typed Name Signature Monith Day Year
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	EPA	Form 8700-22 (Rev. 3-05) Previous editions are obsolete.  DESIGNATED FACILITY TO GENERATOR

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Ĺ		UNIFORM HAZARDOUS 1. Generator ID Number 2. Page	1 of   3. Emergency F	Response Phone	4. Manifest	Tracking No	mber	~~~	D.E.	
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_	۱ŀ	5. Generator's Name and Mailing Address	Generator's Site	Address (if different the	n mailing addres	is)				:
₹	П	Niagara Mohawk Power Corp.	D	ewey Avenue	Service C	Center				į
₹	Н	144 Kensington Avenue Buffalo, NY 14214	93	Dewey Ave	ıue					1
5	Ш	Generator's Phone 8-831-7208 Attn: L. Montesano	B	uffalo. NY 14:	_			_		Ì
www.nrcc.com		6. Transporter 1 Company Name			U.S. EPA ID I				_	1
5	П	Page Trucking	_				696	994	7	
ğ	П	7. Transporter 2 Company Name			U.S. EPA ID N	lumber				į
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	П	8. Designated Facility Name and Site Address			U.S. EPA ID N	Number			-	
- 1	Ш	Wayne Disposal Inc.								
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ŀ	11	Facility Brown Me. M 148111 800-592-5489	<del>-                                    </del>	0. Containers	1	T		_	-	
	Ш	9a. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, HM and Packing Group (if any))		lo. Type	11. Total = Quantity	12. Unit Wt./Voi.	13.1	Waste Codes	1	
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5	П	Profile # J170048WD1 Job/PO # 163291   OO/S   DK-13 Fleet Garage Hydraulic Lift System Replacem	Date: 6 (み)	al Doc	#BAE 7	ያጋ ,			1	
!	Ш	DK-13 Fleet Garage Hydraulic Lift System Reptacem	ent (Bay46)	<u> 10#0</u>	K13-4-	<u>24</u>		_		
www.nrcc.com	1	15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consign marked and labeled/placarded, and are in all respects in proper condition for transport according to	ment are fully and acc	urately described abov	e by the proper sinential regulations	hipping nam s. If export si	e, and are cla hioment and I	ssified, packa am the Prima	iged, irv	
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www.nrcc.com	DESIGNATED	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, d	sposal, and recycling	systems)	13					l
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Ш	5. Generator's Name and Mailing Address		nerator's Site Address				040	<del>0                                    </del>	<del>,</del> .	_ ا
Ш	Niagara Mohawk Power Corp.				e Service (	Center				5
Ш	144 Kensington Avenue Buffalo, NY 14214 Generator's Phone 6-831-7209 Attn: L. Montesano		93 Dew Buffalo.							3
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Ш	7. Transporter 2 Company Name				U.S, EPAID N	lumber				
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Ш	Facility Balka villa, M148111 800-592-5489				M I	D 0 4	80	906	3 3	-
Н	9a. 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Contain		11. Total	12. Unit	13.	Waste Code	<u> </u>	
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11	14. Special Handling Instructions and Additional-Information		<u> </u>		_					S
	Profile # J170049WDI Job/PO # 163291 DK-13 Fleet Garage-Hydraulic Lift System Repla	OOS Date	:6/8/21	DO:	C#BAE65	5				www.nrcc.com
Ш	15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this		ulty and accurately des	cribed above	e by the proper sh	ioping name	and are cla	ssified, packa	nged.	X
Н	marked and labeled/placarded, and are in all respects in proper condition for transport acc Exporter, I certify that the contents of this consignment conform to the terms of the attached	ording to applicable	international and natio	nal governo	nental regulations.	If export sh	ipment and I	am the Prima	iry	≥
Ш	I certify that the waste minimization statement identified in 40 CFR 262-27(a) (if I am a large	je quantity generato	r) or (b) (if I am a smal	l quantity ge	nerator) is true.		-C No.	* D	V	
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$\ $	Facility Brodieville, M148111 800-592-5489				M 1	D 0	180	906	3 3	
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11	marked and labeled/placarded, and are in all respects in proper condition for transport acc Exporter, I certify that the contents of this consignment conform to the terms of the attached			onal governn	nental regulations	. If export sh	ipment <b>and</b> I	am the Prima	ary	55
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1L	UNIFORM HAZARDOUS WASTE MANIFEST  1. Generator ID Number WASTE MANIFEST  5. Generator's Name and Mailing Address	1	mergency Response 800-424- erator's Site Address	9300		Tracking No.	Approved.	THE TYPE	131 17
G	Niagara Mohawk Power Corp. 144 Kensington Avenue Buffalo, NY 14214 718-831-7209 Attn: L. Montesano Generator's Phone:	Gene		Avenu	e Service (	4			
6	6 Transporter 1 Company Name				U.S. EPA ID N		0 2 4	5.5 (	0 0
7	7. Transporter 2 Company Name	with the state of the	T. State of		U.S. EPAID N	lumber	e the	912	
	8 Designated Facility Name and Sife Address  Wayne Disposal Inc.  49350 N. 1-94 Service Drive  Facility Frank III. MI 48111 800-592-5489				U.S. EPAID N	lumber  D 0 4	808	0 6	3 3
	9a. 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Num and Packing Group (if any))	ber,	10. Contain	ners Type	11. Total Quantity	12. Unit Wt./Vol.	13. \	Waste Code	s
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14	14. Special Handling-Instructions and Additional Information  Profile # J17004 BVVDI Job PO 4, 183291  DK-13 Fleet G arage Hydraulic Lift System Re				C#BAE85		e pad ass		1
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15	15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of marked and labeled/placarded, and are in all respects in proper condition for transport Exporter, I certify that the contents of this consignment conform to the terms of the atta I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a	f this consignment are full according to applicable in ached EPA Acknowledome	y and accurately des nternational and national of Consent	onal governn	nental regulations.	pping name If export shi	, and are clas pment and I a	sified pack am the Prima	aged;
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ş	1	Niagara Mohawk Power Corp.			-	e Service (				
§		144 Kensington Avenue Buffalo, NY 14214			veyAve					
5		Generator's Phone 6-831-7209 Attn: L. Montesano		Buffalo	. ŃY 14	214				
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3.0		DK-13 Fleet Garage-Hydraulic Lift System Repk	acement :	(Bay 5)						
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•		I certify that the waste minimization statement Identified in 40 CFR 262.27(a) (if I am a larg Gegerator's/Ofigror's printed/Typed game		rator) or (b) (it i am a sm iature	an quantity ge	enerator) is true.		Manj	h Day	Year
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₹	DESIGNATED	18c. Signature of Alternate Facility (or Generator)	`*					Mor	nth Day	Year
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www.nrcc.com		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered Printed/Typed Nathe		est except as notes in the nature	m 18a			Mon	th Day	Year

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H	Generator's Phone: 6-831-7209 Attn: L. Montesano	ı		Buffalo.							ပ္ပဲ
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П	Profile # J170049WDI Job/PO # 183291	OOSD	ate 6/1	4/21	DO	C#BAE	p54	•			www.nrcc.com
П	DK-13 Fleet Garage-Hydraulic Lift System Repla	cement	(Bay's	)							8
П	15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this										Š
П	marked and labeled/placarded, and are in all respects in proper condition for transport according to the terms of the contents of this consignment conform to the terms of the attached	EPA Acknow	ledgment of	Consent.	-	_	it export sn	ipment and i a	ım the Primai	<sup>y</sup>	_
Ц	I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large Generator's/Offeror's Prinfed/Typed Name		erator) or (b) nature 🔞	iiflam a sma	Il quantity ge	nerator) is true.		Mont	th flow	Voar	
	Agent/Linda Stott	) 	~~\	July	115	X			h Day 14	ا / ترا	
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AA	Transporter 2 Printed/Types Mame	Sig I	nakifa	2.	100	- /		Moni	h Day It. <del>∽-</del> -	Year المضا	
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OF E	Facility's Phone:  18c. Signature of Alternate Facility (or Generator)		_					Mor	ith Day	Year	_
ATE	, , , , , , , , , , , , , , , , , , , ,								J.	'	Ĕ
DESIGNATED FACILITY	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatr	ment, disposa	l, and recycli	ing systems)						$\vdash$	www.nrcc.com
ES	1 11 100	3.				4.					S
1	H152										Z
Ш	20. Designated Facility Owner or Operator; Certification of receipt of hazardous materials covered			s noted in Item	18a						Ž
Ш	Printed/Typed Name	Sig I	nature					Mon	th Day	Year	Ş
<u> </u>	A Form 8700.22 (Poly 2010) Regions additions and policies		25000	677					7 1/8	21	
27	A Form 8700-22 (Rev. 3675) Previous editions are desolete.	ı	DESIGN	IATED FA	CILITY	TO DESTIN	IATION	STATE (	IF REQL	JIRED)	

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UNIFORM HAZARDOUS   1. Generator ID Number   2. Page 1 of   3. Er	mergency Response Phone	4. Manifest Tracking		7
WASTE MANIFEST NYD000730390 1	800-424-9300 rator's Site Address (if different		164383 GBF	7
Niagara Mohawk Power Corp. 144 Kensington Avenue Buffalo, NY 14214	Dewey Avent 93 Dewey Av	ie Service Center enue	г	WWW.nrcc.com
Generator's Phone 6. Transporter 1 Company Name	Buffalo, NY 1	4214 U.S. EPA ID Number		S
Page Trucking		1	36969947	N N
7. Transporter 2 Company Name		U.S. EPA ID Number		
8. Designated Facility Name and Site Address		U.S. EPA ID Number		┨╴
Wayne Disposal Inc. 49350 N. I-94 Service Drive Facility Brediev IIIe , MI 48111 800-592-5489		1 M I D 0	48090633	
9a. 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number,	10. Containers	11. Total 12. Unit		1
HM and Packing Group (if any))	No. Type	Quantity Wt./Vol.	13. Waste Codes	4
RQ, UN3432, Polychlorinated Biphenyl Solid Mixture, 8, PG III (ERG #171)	1 CM	Est. 16,780 K	B007 PCB) L	-
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14. Special Handling Instructions and Additional Information		1	1 1 -	ኝ
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15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are full marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable in Exporter. I certify that the contents of this consignment conform to the terms of the attached EPAAcknowledoms.	y and accurately described about emational and national government of Consent.	mental regulations. If export s		WARA
I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator)  Generator's/Offeror's Printe/Typed Names  Signature,	or (b) (f) am a small quantity g	penerator) is true.	Month Day Year	4
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17. Transporter Acknowledgment of Receipt of Materials	211		Marth One Van	]
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19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and r	ecycling systems)	4	_	0
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 treatment, disposal, and response to the code of t	recycling systems)	4.	_	arce ea
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest ex	$\triangle$	4.		W.nrcc.co
L  - 15d	$\triangle$	4.	Month Day Year	www.nrec.com

14. Special Handling Instructions and Additional Information

trator's/Offeror's Printed/Typed Name

Profile # J170049WDI Job/PO # 163291 'OOS Date: 6/10/2/DK-13 Fleet Garage Hydraulic Lift System Replacement (Bay 5)

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 generat

Month Day Year

DOC#BAE 659

INTL	16. Interplational Shipmedts Import to U.S. Export from U.S.  Transporter signature (for exports only);	i. Port of entry/exit:
띪	17. Transporter Acknowledgment of Receipt of Materials	
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ANSPORTER	//WAL	16/10/21
A	Transporter 2 Printed/Typed Name Signatur	Month Day Year
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DESIGNATED FACILITY	18b. Alternata Facility (or Generator)	U.S. EPA ID Number
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<u> </u>	Facility's Phone:	
Ξ	18c. Signature of Alternate Facility (or Generator)	Month Day Year
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S	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and	ind recycling systems)
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Ш	20. Designated Facility Owner or Operator. Certification of receipt of hazardous materials covered by the manifest of	
11	Printed/Typed Name Signatur	hure Month Day Year
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EPA	A Form 8700-22 (Rev. 3-05) Previous editions are obsolete. DES	SIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED

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

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	Plea	se print or type. (Form designed for use on elite (12-pitch) typewriter.)		·					IB No. 2050-0039
	<b>†</b>	UNIFORM HAZARDOUS 1. Generator ID Number	2. Page 1 of	3. Emergency Response	Phone	4. Manifest			$^{\circ}$ CDE
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₹		5. Generator's Name and Mailing Address	Senerator's Site Address (		-	•			
ИМ		Niagara Mohawk Power Corp. 144 Kensington Avenue Buffalo, NY 14214		Dewey. 93 Dew		e Service (	Jenter		
מא		Generator's Phote 5 -831-7209 Attn: L. Montesano	1	Buffalo,					
rcı	Н	6, Transporter 1 Company Name				U.S. EPA ID I	Number		
c.c		Page Trucking						8 9 6 9	9 4 7
<i>www.nrcc.com</i>		7. Transporter 2 Company Name				U.S. EPA ID I	Number		
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	$ \cdot $	Wayne Disposal Inc. 49350 N. I-94 Service Drive							
	Н	Facility Belleville MI48111 800-592-5489				- $M +$	D 0 4	4809	0833
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1rc		Profile # J170849WDI Job/PO # 163291 C	OOS Date	:6/14/21	DOC	#BAE	52		
www.nrcc.com		DK-13 Fleet Garage Hydraulic Lift System Repla	acement	(Bay 5)					
Ö		<ol> <li>GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this marked and labeled/placerded, and are in all respects in proper condition for transport acc</li> </ol>							
3	Ш	Exporter, I certify that the contents of this consignment conform to the terms of the attache	ed EPA Acknowle	doment of Consent.	•		. 11 export sn	ipment and t am ti	ne Primary
		I certify that the waste minimization statement identified in 40 CFR 252.27(a) (if I am a larg	ge quantity gener Signa		quantity ge	nerator) is true.		Month	Day • Year
	Џ	Gengalor's Offeror's Printed Typed Name ACCH / LINCA SCOTT		Much	M	AH-		1/0	1421
	NT.	16. International Shipment	Export from U.S		v/exit:	<u>بن -بر</u>			
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	$\uparrow$	18. Discrepancy	_						
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₹ .	GNATED	18c. Signature of Alternate Facility (or Generator)						Month	Day Year
www.nrcc.com		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treal	Iment, disposal	and recycling systems)					
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8		20. Designated Facility Owner or Operator, Certification of receipt of hazardous materials covered			18a			/	Don V
3	$\prod$	Printed/Typed Name	. Signa	~ /\/			[/	Month 1	Pay Year
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DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

EPA Form 8700-22 (Rev. 3-05) Previous editions are obsolete.

66721 Please print or type. (Form designed for Form Approved, OMB No. 2050-0039 2. Page 1 of | 3. Emergency Response UNIFORM HAZARDOUS 1. Generator ID Number WASTE MANIFEST NYD000730390 800-424-9300 5. Generator's Name and Mailing Address Generator's Site Address (if different than mailing address) www.nrcc.com Niagara Mohawk Power Corp. **Dewey Avenue Service Center** 144 Kensington Avenue Buffalo, NY 14214 93 Dewey Avenue 716-831-7209 Attn: L. Montesano Buffalo. NY 14214 6. Transporter 1 Company Name U.S. EPA ID Number Page Trucking NYD 8 8 8 9 8 9 9 4 7 7. Transporter 2 Company Name 8. Designated Facility Name and Site Address U.S. EPA ID Number Wayne Disposal Inc. 49350 N. 194 Service Drive MID048090633 Facility Region ille, MI48111 800-592-5489 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, 10. Containers 12. Unit 9a. 13. Waste Codes and Packing Group (if any)) НМ Quantity Wt./Vol. No. Type Est. B007 · PCB RQ, UN3432, Polychlorinated Biphenyl Solid Mixture.8. 1 .200 CM 1 PG III (ERG #171) K ŧ www.nrcc.com 14, Special Handling Instructions and Additional Information 005 Date: 6/14/2/ DOC#BAE 453 Profile # J170049WDI Job/PO # 163291 DK-13 Fleet Garage Hydraulic Lift System Replacement (Bay 5) 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 🦓 (if I am a s erator's/Offeror's Printed/Typed Name Export from U.S. ∐|mport to U.S. Port of entry/exit: Transporter signature (for exports only): Date leaving U.S.: 17. Transporter Acknowledgment of Receipt of Materials Signature/ 6 Transporter 2 Printed/Typed Name 18. Discrepancy Туре 16a. Discrepancy Indication Space - Residue Quantity 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 Ďау Year 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 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

## **NON-HAZARDOUS WASTE MANIFEST**

	rint or type (Form designed for use on elite (	(12 pitch) typewhen)					
	NON-HAZARDOUS WASTE MANIFEST	1. Generator's US E	PA ID No.		Manifest Document No.	BAE376	2. Page 1 of
	B. Generator's Name and Mailing Address Niagara Mohanak Power Corp. 144 Kensington Ave. 1846 MY 14214			vi ontesano	Fleet Gara Buffalo N	ige-Deviey SC	
	1. Generator's Phone ( 7 1) 6 6 3	1 - 7 2 0 9					
	5. Transporter 1 Company Name		6. US EPA ID Number		A. State Transp	orter's ID	
	Pariso de 105		N/A		B. Transporter 1		5168
7	7. Transporter 2 Company Name		<ol> <li>US EPA ID Number</li> </ol>		C. State Transp	orter's ID	
					D. Transporter		
	Designated Facility Name and Site Address     Chaffee Lanoffil     10880 Olean Foad		10. US EPA ID Number		E. State Facility		
	Chaffee NY 14030		1		F. Facility's Pho	ne 716 496-1	5192
-	11. WASTE DESCRIPTION			T 0	ontainers	13.	
	h			No.	Type	Total Quantity	14. Unit Wt./Vol.
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(	Additional Descriptions for Materials Listed Abov     Frofile # 206973444	€.			H. Handling Co	des for Wastes Listed Abov	е
9	b. Job/PO # 163291	ri.					
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1	15. Special Handling Instructions and Additional Info	ormation				In Case of a cell 1-800-8	n Ernergency 19-4672
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	7 100 100 100 100 100			y way			
-	16. GENERATOR'S CERTIFICATION: I hereby cer in proper condition for transport. The materials of	rtify that the contents of described on this manife	this shipment are fully and accurately descript are not subject to federal hazardous wa	cribed and are in	n all réspects		
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F	Printed/Typed Name Ageni/Linda Scott			cribed and are in ste regulations.	n all réspects		
F	Printed/Typed Name Ageni/Linda Scott  7. Transporter 1 Acknowledgement of Receipt of		Signature	cribed and are in ste regulations.	n all réspects		nth Day Yea
F 1	Printed/Typed Name Agent/Landa Scott  17. Transporter 1 Acknowledgement of Receipt of Printed/Typed Name			cribed and are in ste regulations.	n all respects	Moi	nth Day Yea Date
F 1	Printed/Typed Name Agent/Loads Scott  7. Transporter 1 Acknowledgement of Receipt of Printed/Typed Name	Materials	Signature	cribed and are in ste regulations.	n all respects	Moi	nth Day Yea Date
F 1	Printed/Typed Name  17. Transporter 1 Acknowledgement of Receipt of Printed/Typed Name  18. Transporter 2 Acknowledgement of Receipt of Printed/Typed Name	Materials	Signature	cribed and are in ste regulations.	n all respects	Moi	nth Day Yea
F 1	Printed/Typed Name Agent/Loads Scott  7. Transporter 1 Acknowledgement of Receipt of Printed/Typed Name	Materials	Signature	cribed and are in ste regulations.	n all respects	Moi	Date Date Date Date
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F 1 1 F 1 2 2	Printed/Typed Name  7. Transporter 1 Acknowledgement of Receipt of Printed/Typed Name  18. Transporter 2 Acknowledgement of Receipt of Printed/Typed Name  19. Discrepancy Indication Space	Materials Materials	Signature	hot a	n all respects	Moi	Date  Date  Date  Date  Date  Date  Date  Date  Date



## NON-HAZARDOUS WASTE MANIFEST

print or type (Form designed for use on elite (  NON-HAZARDOUS	1. Generator's US EPA	A ID No		Manifest	279	0 Dece 4
WASTE MANIFEST		A ID No.		Document No.	BAER 77	2. Page 1 of
Generator's Name and Mailing Address     Niagara Mohawk Power Corp.     144 Kensington Ave.		Att Us	a Montesano	Fleet Garag	je-Dewey SC	
Buffalo NY 14214 4. Generator's Phone ( 7 1 )6 8 3	1 - 7 2 0 9			Collingly 14 4		
5. Transporter 1 Company Name		6. US EPA ID Number		A. State Transpo	rter's ID	
Pariso # 1) Z		N/A		B. Transporter 1	Phone 716 875-1	6168
7. Transporter 2 Company Name		8. US EPA ID Number		C. State Transpo	rter's ID	
				D. Transporter 2	Phone	
Designated Facility Name and Site Address     Chaffee Landfill     10363 Clean Road		10. US EPA ID Number		E. State Facility's		
Chaffee NY 14030				F. Facility's Phon	e 718 496-	5192
11. WASTE DESCRIPTION			No.	ntainers Type	13. Total Quantity	14. Unit Wt./V
a. NON DOT Regulated Solids,NO	S(Spolls)			5	18.13	1
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b.						
			18			
c.						
	-					
d.	,				-	
G. Additional Descriptions for Materials Listed Above	¢.			H. Handling Cod	es for Wastes Listed Abo	ve
b. Job/PO # 163291	d.			b.	d.	
15. Special Handling Instructions and Additional Info	ormation				in Case of a call 1-800-8	
<ol> <li>GENERATOR'S CERTIFICATION: I hereby ce in proper condition for transport. The materials of</li> </ol>	rtify that the contents of the described on this manifes	nis shipment are fully and accurately of the tare not subject to federal hazardous	described and are in waste regulations.	all respects		
		*				Date
Printed/Typed Name		Signature		5, 11	Mo	onth Day
Agent/Linda Scott		24	de -	100 U	04	02
17. Transporter 1 Acknowledgement of Receipt of	Materials		- Commence	/1		Date
Printed/Typed Name	2	Signature	15	d	M.	onth Day
18. Transporter 2 Acknowledgement of Receipt of	Materials		01			Date
Printed/Typed Name		Signature			M	onth Day
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of rece	ipt of the waste materials	covered by this manifest, except as	noted in item 19.			
						Date



NON-HAZARDOUS WASTE

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int or type (Form designed for use on elite (	Generator's US EPA ID No.			Manifest	and the sales are the sales	0.00001
WASTE MANIFEST	1. Generators US EPA ID No.	7 F F - A	ndo zona	Document No.	BAE2378	2. Page 1 1
Generator's Name and Mailing Address		All. Use too	s lostada TO	Lines one	pe-Densey SC	
144 Kensington Ave.				Duffalo NY		
Buffelo NY 14214 7 1 6 8 3	1 - 7 2 0 9			Theresteemen i.e. s		
. Generator's Phone ( )					-	
Transporter 1 Company Name	6.N / A	US EPA ID Number			ter's ID 718 875 6	168
5 * 111				B. Transporter 1 F	_	
. Transporter 2 Company Name	8. I	US EPA ID Number		C. State Transpor	The second second	
				D. Transporter 2 F		
. Designated Facility Name and Site Address	10.	US EPA ID Number		E. State Facility's	ID	
10860 Olean Road					****	
Chaffee NY 14030	1			F. Facility's Phone	716 496-5	5192
1. WASTE DESCRIPTION			1 -	atolog a		
I. WASTE DESCRIPTION			No.	ntainers	13. Total	Ur Ur
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G. Additional Descriptions for Materials Listed Abov	Ç.,			H. Handling Code	es for Wastes Listed Abov	е
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b. Job/PO#163231	ď.					
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		40				
					in Case of a	n Emerce
5. Special Handling Instructions and Additional Info	ormation				cali 1-800-8	99-4672
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y any any any any a		NU AND AND	/2007			
6. GENERATOR'S CERTIFICATION: I hereby cer	tify that the contents of this shipment ar	e fully and accurately describ	ed and are in	all respects		
<ol> <li>GENERATOR'S CERTIFICATION: I hereby cer in proper condition for transport. The materials of</li> </ol>	lescribed on this manifest are not subject	ct to federal hazardous waste	regulations.	i dii respects	14	
						Date
Printed/Typed Name	S	ignature		./	Mo	
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_	Materials	at South at	16	Marie Land	C/	Date
<ol><li>Transporter 1 Acknowledgement of Receipt of I</li></ol>						
7. Transporter 1 Acknowledgement of Receipt of Printed/Typed Name		ignature			Mo	nth Day
		ignature	1 00	7	Mo	1 1

19. Discrepancy Indication Space F ACI

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

Printed/Typed Name Signature

Month



Year

Date

Day

## **NON-HAZARDOUS WASTE MANIFEST**

NON-HAZARDOUS 1. WASTE MANIFEST	Generator's US EPA ID No.	Manifest Document No.	8AE2 3 79 2. Page 1 1 of
Generator's Name and Mailing Address or p.  144 Kennington Ave.	Att Llye to		ge-Deviey SC
Buffato NY 14214	- 7 2 0 9	Buffalo NY	
5. Transporter 1 Company Name	6. US EPA ID Number	A. State Transpo	rter's ID
7. Transporter 2 Company Name	8. US EPA ID Number	C. State Transpo	
The second and second	1	D. Transporter 2	
Designated Facility Name and Site Address	10. US EPA ID Number	E. State Facility's	
Chaffee NY 14030	1	F. Facility's Phor	e 716 496-5192
11. WASTE DESCRIPTION		Containers No. Type	13. 14. Unit Quantity Wt./Vol.
a. NON DOT Regulated Solida,NOS(\$	Spolls	001 D T	24.54 50020 T
b.			
c.			
d.			
G. Additional Descriptions for Material's Listed Above	C.		des for Wastes Listed Above
b. Job/PO#163291	ığ.	- 8. €.	Ç,
and any other state of the state of		ъ.	d
15. Special Handling Instructions and Additional Information	tion		in Case of an Emergenc call 1-800-899-4672
	· ,	8.2	
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in proper condition to transport. The materials descri	ibod on this mannest are not subject to lederal nazardous wa	iste regulations.	Date
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Printed/Typed Name	Signature	5	Month Day Ye
18. Transporter 2 Acknowledgement of Receipt of Mate	rials J / 1	/	Date
Printed/Typed Name	Signature		Month Day Ye
Transporter 2 Acknowledgement of Receipt of Mate     Printed/Typed Name  19. Discrepancy Indication Space		5	
	the waste materials covered by this manifest, except as note	ed in item 19.	Date
Printed/Typed Name	Signature		Month Day Ye

(Form designed for use on elite (12 pitch) typewriter)

Please print or type

4. Generator's Phone ( )  5. Transporter 1 Company Name	anifest ocument No.	2,580	Page 1 4 of
14. Generator's Phone ( )  5. Transporter 2 Company Name  6. N. A US EPA ID Number  7. Transporter 2 Company Name  8. US EPA ID Number  8. US EPA ID Number  9. Designated Facility Name and Site Address  10. US EPA ID Number  11. WASTE DESCRIPTION  11. WASTE DESCRIPTION  12. INON DOT Forgulated Solids (405(Spulls))  13. INON DOT Forgulated Solids (405(Spulls))  14. Signature  15. Signature  16. Additional-Description and Additional Information  16. CENERATOR'S CERTIFICATION: hereby certify that the contents of the alignment are fully and accurately described and are in all regiment proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed Typed Name  18. Transporter 2 Aktnowledgement of Receipt of Materials  Printed Typed Name  19. Discrepancy Indication Space  20. Facility Owner or Operator: Certification of receipt of the waste materials covered by this manifest, except as noted in term 19.	eet Garage	e-Devey SC	
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4. Generator's Phone (	illato NY		-
5. Transporter I Company Name  6. N. A US EPA ID Number  7. Transporter 2 Company Name  8. US EPA ID Number  9. Designated Facility, Name and Site Address  10. US EPA ID Number  10. SEPA			
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7. Transporter 2 Company Name  8. US EPA ID Number C. SI D. Tr 9. Designated Facility Name and Site Address 10. US EPA ID Number E. SI 10. SEPA ID Number E. SI 11. WASTE DESCRIPTION Container  a. HON DOT Regulated Solution IOS (Spulle)  15. Separate Description Statistic Page 11. Separate Solution IOS (Spulle)  16. G. Addisorps Desgription Statistic Page 11. Separate Solution IOS (Spulle)  17. Transporter 1 Acknowledgement of Receipt of Materials Printed Typed Name Signature Signature Signature Signature Signature Signature Signature 19. Discrepancy Indication Space	State Transporte	er's ID 715 875-616	9
9. Designated Facility, Name and Site Address 10. US EPA ID Number E. St. 10. EPA ID Number E. St. 11. WASTE DESCRIPTION Container No. T. a. HON DOT Forgulars of Solids HOS (Spoils) b. C. C. d. d. 15. Signate Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all recin proper conditions for tribundance on the manners of the shipment are fully and accurately described and are in all recin proper Conditions for tribundance on the manners of the shipment are fully and accurately described and are in all recin proper Conditions for tribundance on the manners of the shipment are fully and accurately described and are in all recin proper Conditions for tribundance on the manners of the shipment are fully and accurately described and are in all recin proper Conditions.  16. Transporter 1 Acknowledgement of Receipt of Materials Printed Typed Name Signature 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of the waste materials covered by this manifest, except as noted in item 19.	Transporter 1 Ph	hone	
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11. WASTE DESCRIPTION  Container  A HON DOT Programated Solidas (HOS (Spottas))  D.  C.  d.  G. Additional Bengrigions bendingly building listed Above  D. Job/PO # 163281  d.  15. Seligical Handling Instructions and Additional Information  16. CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all resin proper condition for bransport. The materials described on this manifest are not subject to federal hazardous waste regulations.  Printed Typed Name  Signature  17. Transporter 1 Advisorwinedgement of Receipt of Materials  Printed Typed Name  Signature  19. Discrepancy Indication Space	Transporter 2 Ph	hone	
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NON-HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of
Generator's Name and Mailing Address     Address     Address     Address     Address     Address		fortesano Piset Gara Bullato Wi	ge-Dewey SC
4. Generator's Phone ( )	1 - 7 2 0 8		
5. Transporter 1 Company Name	6. US EPA ID Number	A. State Transport B. Transporter 1	210 07340100
7. Transporter 2 Company Name	8. US EPA ID Number	C. State Transpo	
		D. Transporter 2	? Phone
Designated Facility Name and Site Address	10. US EPA ID Number	E. State Facility	s ID
Chaffee NY 14030	1	F. Facility's Pho	ne 716 496-5192
11. WASTE DESCRIPTION		Containers No. Type	13. 14. Total Unit Quantity Wt./Vol.
a. NON COT Regulated Solida N	20(Spulls)	1,10	19.73
		001 DT	99929 T
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d.			
G. Additional Descriptions for Materials Listed Abo	ve C.	H. Handling Co	des for Wastes Listed Above
b. Job/PO # 163291	d.	ъ.	d.
15. Special Handling Instructions and Additional Ir	formation	\	in Case of an Emergence call 1-800-893-4672.
		F 1000 1000 1000	
16. GENERATOR'S CERTIFICATION: I hereby of in proper condition for transport. The materials	ertify that the contents of this shipment are fully and accurately described on this manifest are not subject to federal hazardous was	cribed and are in all respects ste regulations.	
			Date
Printed/Typed Name	Signature	6 Scatt	Month Day Ye
17. Transporter 1 Acknowledgement of Receipt of	f Materials		Date
Printed/Typed Name	Signature	and the second	Month Day Ye
18. Transporter 2 Acknowledgement of Receipt of	f Materials		Date
Printed/Typed Name	Signature		Month Day Ye
19. Discrepancy Indication Space			
	eipt of the waste materials covered by this manifest, except as note	ed in item 19.	
Printed/Typed Name	Signature		Month Day Ye
CE14 @ 2002 LABEL MACTED @ (200) 62	4 5000	in the second	PRINTED ON SECURCED PAPER ( PARK)

Please print or type

WASTE MANIFEST	1. Generator's US EP	A ID No.		Manifest Document No.	BAE2 382	2. Page 1
Generator's Name and Mailing Address     Address     Generator's Phase (	31-7203	,	All. Lise Montes	Duffalo N	age-Devey 50	OI .
4. Generator's Prione (						
Transporter 1 Company Name		6. US EPA ID	Number	A. State Transp	porter's ID	
# 210		** * * * * * * *		B. Transporter	1 Phone	2100
7. Transporter 2 Company Name		8. US EPA ID I	Number	C. State Transp		
		1		D. Transporter		
Designated Facility Name and Site Address		10. US EPA ID I	Number	E. State Facility		
10860 Olean Road			tombor	L. State Facility	y S ID	
Chaffee MY 14030			-			
PRINCES OF EACHD		I		F. Facility's Pho	one 716 486-1	5192
11. WASTE DESCRIPTION						
The second secon				Containers	13. Total	14. Unit
a. NON DOT Regulated Solids NO	OS(Spoils)			No. Type	Quantity	Wt./Vol
,			00	01 · DT	12.51	700
b. c.						
d						
b. Job/PO # 163291	ť.			8. L. 5.	o.	
15. Special Handling Instructions and Additional Inf					In Case of a call 1-800-8	46
15. Special Handling Instructions and Additional Info		s shipment are fully and acc are not subject to federal ha	urately described and zardous waste regular	are in all respects		33-4672.
		s shipment are fully and acc are not subject to federal ha	urately described and zardous waste regular	are in all respects tions.		03-4672.
16. GENERATOR'S CERTIFICATION: I hereby ce in proper condition for transport. The materials Printed/Typed Name	ertify that the contents of this described on this manifest a		urately described and zardous waste regular	are in all respects tions.	cali 1-800-81	03-4672.
16. GENERATOR'S CERTIFICATION: I hereby ce in proper condition for transport. The materials Printed/Typed Name.  17. Transporter 1 Acknowledgement of Receipt of	ertify that the contents of this described on this manifest a		urately described and zardous waste regular	are in all respects tions.	cali 1-800-81	03-4672.
16. GENERATOR'S CERTIFICATION: I hereby ce in proper condition for transport. The materials Printed/Typed Name.  17. Transporter 1 Acknowledgement of Receipt of Printed/Typed Name	ertify that the contents of this described on this manifest a		urately described and zardous waste regular	are in all respects tions.	cali 1-800-81	Date of the Day You Date
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16. GENERATOR'S CERTIFICATION: I hereby ce in proper condition for transport. The materials of Printed/Typed Name  17. Transporter 1 Acknowledgement of Receipt of Printed/Typed Name	ertify that the contents of this described on this manifest a	Signature	urately described and zardous waste regular	are in all respects tions.	Call 1-800-81	Date  th Day You Date  th Day You Date  Date
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16. GENERATOR'S CERTIFICATION: I hereby ce in proper condition for transport. The materials of printed/Typed Name  17. Transporter 1 Acknowledgement of Receipt of Printed/Typed Name  18. Transporter 2 Acknowledgement of Receipt of Printed/Typed Name  19. Discrepancy Indication Space	ertify that the contents of this described on this manifest a Materials  Materials	Signature	Senda S		Mor	Date oth Day Ye  Date oth Day Ye  Date oth Day Ye
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(Form designed for use on elite (12 pitch) typewriter)

Please print or type

WASTE MANIFEST	N/A				Manifest Document No.	DACT	100	2. Page
3. Generator's Name and Mailing Address Hagera Mohawk Power Corp.			Att Use Men	legano	Fleet Gara	BAE]		of
144 Kensington Ave Buffelo NV 14214 I. Generator's Phone ( 7 1 )6 8 3	1 - 7 2 0 9				Buffato NY			*
5. Transporter 1 Company Name	6.	US EPA ID	Number		A. State Transpo	dada ID		
Pariso # 32		1/A			B. Transporter 1		物學化 企业	100
7. Transporter 2 Company Name	8.	US EPA ID			C. State Transpo		875-61	50
					D. Transporter 2			
Designated Facility Name and Site Address Chaffee Landfill 10850 Olean Road	10.	U\$ EPA ID	Number		E. State Facility's			
Chaftee NY 14030					F. Facility's Phon	e 718	496-51	192
1. WASTE DESCRIPTION				No.	ntainers Type	13. Total Quanti		w
NON DOT Regulated Solids, NO	S(Spols)				1,500	22.		- W
				001	DT	000		
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								+
Additional Descriptions for Materials Listed Abov	e C.				H. Handling Code	es for Wastes Li	sted Above	
a. Profile # 105979147	M				a. L		ě.	
b. Job/PO # 163291	rd.				991 800		Car 3	
					b.		d.	
Create Handling lasts at a second state	ormation					in Ca	se of an	Errory
. Special Handling Instructions and Additional Info						call 1	-800-893	-4672
5. Special Handling Instructions and Additional Info								
. Special Handling Instructions and Additional Info								
. Special Handling Instructions and Additional Info								
. Special Handling Instructions and Additional Info							W 4800	7 4000
	tify that the contents of this ship	oment are fully and ac	curately described a	and are in	all respects		7 69	
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	tify that the contents of this ship lescribed on this manifest are no	oment are fully and according to the subject to federal his		and are in ulations.	all respects		Month	Date Day
GENERATOR'S CERTIFICATION: I hereby cert in proper condition for transport. The materials dented/Typed Name Agent/Linua Scott			curately described a azardous waste reg	and are in ulations.	all respects		Month 03	Day
GENERATOR'S CERTIFICATION: I hereby cert in proper condition for transport. The materials dented/Typed Name Agenta Incla Scott  Transporter 1 Acknowledgement of Receipt of Management of Receipt of				and are in ulations.	all respects		Month O 3	
GENERATOR'S CERTIFICATION: I hereby cert in proper condition for transport. The materials of inted/Typed Name  Agent Intel Scott  Transporter 1 Acknowledgement of Receipt of Management of Receipt of Management (Name)	Materials	Signature		and are in ulations.	all respects		03	Day Date Day
GENERATOR'S CERTIFICATION: I hereby cert in proper condition for transport. The materials desired/Typed Name  Agent/Linuia Scott  Transporter 1 Acknowledgement of Receipt of Management (Name)	Materials	Signature		and are in ulations.	all respects		Month	Day Date Day Date
GENERATOR'S CERTIFICATION: I hereby cert in proper condition for transport. The materials dented/Typed Name  Agents Included Scott  Transporter 1 Acknowledgement of Receipt of Manted/Typed Name  Transporter 2 Acknowledgement of Receipt of Manted/Typed Name	Materials	Signature		and are in ulations.	all respects		03	Day Date Day
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GENERATOR'S CERTIFICATION: I hereby cert in proper condition for transport. The materials of inted/Typed Name  Agent Linea Scott  Transporter 1 Acknowledgement of Receipt of Manted/Typed Name  Transporter 2 Acknowledgement of Receipt of Manted/Typed Name  Discrepancy Indication Space	Materials  Materials	Signature	indu	X	all respects		Month	Day Date Day Date



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	NON-HAZARDOUS WASTE MANIFEST
Please print or type	(Form designed for use on elite (12 pitch) typewriter)

loase	NON-HAZARDOUS WASTE MANIFES		A ID No.		Manifest Document No.	BAEZ (		Page 1
	3. Generator's Name and Mailing Address  1. Address Works Power C  1. Address Power C  1. Address Works Power C  1. Address Power C  2. Address Power C  2. Address Power C  2. Address Power C  3. Address Power C  4. Address Power C	Corp.	-	ntesano	Fleet Garag Buffalo NY			
			6. US EPA ID Number		A State Transport	orio ID		
100	Pariso	* 1 · 1			A. State Transport		MAN 100 100 100 100 100 100 100 100 100 10	140
-	3		N/A		B. Transporter 1 P		575-610	8
	7. Transporter 2 Company Name		8. US EPA ID Number		C. State Transport	ter's ID		
1000					D. Transporter 2 P	hone		
	Designated Facility Name and Site Add     Chaffaet Landill     Description	dress	10. US EPA ID Number		E. State Facility's	ID		
	19860 Ofean Road Chaffee NY 14930		1		F. Facility's Phone	716	496-51	32
	11. WASTE DESCRIPTION		-	No.	ntainers Type	13. Total Quantity		14. Unit Wt./Vol.
	a. NON DOT Regulated Sol	ids,NOS(Spoils)		001	DT	22.		т
à III	b.			1001		000		
-	c.							
2	d.			+				
	G. Additional Descriptions for Materials L	TNY			H. Handling Code	s for Wastes List	ed Above	
	b. Job/PO # 163281	Ġ.			b.		Ø.	
	15. Special Handling Instructions and Ad	ditional Information				in Cas	a of an i	Ernergency
	7)						06-899	- 10
-	16. GENERATOR'S CERTIFICATION: I	hereby certify that the contents of the	nis shipment are fully and accurately describ	ped and are in	all respects			
	in proper condition for transport. The	materials described on this manifes	nis shipment are fully and accurately describ t are not subject to federal hazardous waste	regulations.				Date
	Printed/Typed Name Agent/Linda Scott		Signature 2	B	catt		Month 03	Day Year
I	17. Transporter 1 Acknowledgement of I	Receipt of Materials		12049	The state of the s		4,	Date
RAZOR	Printed/Typed Name	7160 4	Signature	/ .	1-		Month	Day Year
OR -	18. Transporter 2 Acknowledgement of I	Receipt of Materials			- Marian and -			Date
THE	Printed/Typed Name		Signature				Month	Day Yea
FAC	19. Discrepancy Indication Space							
-	20. Facility Owner or Operator: Certificat	ion of receipt of the waste materials	covered by this manifest, except as noted i	n item 19.				Date
낡	Printed/Typed Name		Signature				Month	Date  Day Yea
Y								

NON-HAZARD WASTE MANIF		Generator's US EPA ID No.	* * * * * * *		Manifest Document No.	BAES 09	2. Page 1
3. Generator's Name and Mailing And Mailin	war Corp.			Morteserio	Fleet Garag Buffalo NY	e-Dewey SC	
5. Transporter 1 Company Name		6.	US EPA ID Number	_	A. State Transporte	er's ID	
Pariso	すっし		/ A		B. Transporter 1 Pt		6168
7. Transporter 2 Company Name	1	8.	US EPA ID Number		C. State Transporte		9199
		1			D. Transporter 2 Pl		
Designated Facility Name and S     Chaffee Landilli     10860 Olean Road	Site Address	10,	US EPA ID Number		E. State Facility's II		
Chaffee NY 14030					F. Facility's Phone	716 496-	5192
11. WASTE DESCRIPTION			-	No.	ontainers Type	13. Total Quantity	14. Unit Wt./Vol.
a. NON DOT Regulate	d Solids,NOS(S	polls)		1	Type	22.20	VVI./VOI.
				001	D T	0-0-0-2-0	- 40
b.		7					
J <sup>(6)</sup>			A				
C.							
d.				_			
G. Additional Descriptions for Mate	erials Listed Above				H Handling Codes	for Wastes Listed Abo	10
a. Profile # 1069388	3457NY	C			a, 1.	Ç,	
b. Job/PO#16329	<b>1</b>	ď.			₽.	d.	
15. Special Handling Instructions a	and Additional Informati	ion				in Case of	in Emergen
43						call 1-800-8	
			NAMES AND ASSOCIATION ASSOCIATION ASSOCIATION	NAME AND ADDRESS OF			
16. GENERATOR'S CERTIFICAT in proper condition for transpo	FION: I hereby certify the rt. The materials descri	at the contents of this shipn bed on this manifest are not	nent are fully and accurately des	scribed and are in aste regulations.	n all respects		
7				78 ==			Date
Printed/Typed Name	-		Signature Zimil	a D	cott	O.	onth Day Y
Agent/Linda Scott		iala					
	ent of Receipt of Mater	lais					Date
Agent/Linda Scott		iais	Signature	5			onth Day
Agent/Linda Scott  17. Transporter 1 Acknowledgem  Printed/Typed Name	50-		0.04				onth Day
Agent/Linda Scott  17. Transporter 1 Acknowledgem  Printed/Typed Name	50-		0.04				Date
17. Transporter 1 Acknowledgem Printed/Typed Name  18. Transporter 2 Acknowledgem	nent of Receipt of Mater		and a service of the				Date
17. Transporter 1 Acknowledgem Printed/Typed Name  18. Transporter 2 Acknowledgem Printed/Typed Name	nent of Receipt of Mater	ials	Signature				Date onth Day
17. Transporter 1 Acknowledgem Printed/Typed Name  18. Transporter 2 Acknowledgem Printed/Typed Name  19. Discrepancy Indication Space	nent of Receipt of Mater	ials	Signature			M	Date

Please	e print or type (Form designed for use on elite (1	2 pitch) typewriter)						
	NON-HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.			Manifest Document No.	BAE210	2. Page 1 of	1
	Generator's Name and Mailing Address     Niagara Mchavik Power Corp.     144 Kensington Ave.     Eulfelo NY 14214			rdeservo	Fleet Gara Buffalo NY	ge-Deviey SC		
		1 - 7 2 0 8						
100	5. Transporter 1 Company Name	6. 1 MA	US EPA ID Number		A. State Transpo			
	7. Transporter 2 Company Name		/ A	v * *	B. Transporter 1	114 814 5	6168	
-	7. Hansporter 2 Company Name	8.	US EPA ID Number		C. State Transpo			
	Designated Facility Name and Site Address	10.	US EPA ID Number		D. Transporter 2  E. State Facility's			
	Chaffee Landfill 10860 Olean Road		OO ET A TO NUMBER		F. Facility's Phor			
	Cheffee NY 14030	1			r. Facility's Filor	718 496-5	5192	1
	11. WASTE DESCRIPTION			Co	ontainers	13.		14.
				No.	Туре	Total Quantity	1 1	Unit t./Vol.
	a. NON DOT Regulated Solids,NOS	S(Spolls)		1	Туро	20.06	1	.7 VOI.
4				001	DT	00020		T
G	b.							
E N E -								
RA	C.							
T O								
R	d.							
	G. Additional Descriptions for Materials Listed Above  a. Profile # 105978444  12345724  b. Job/PO # 163221	C.		1	H. Handling Coo	des for Wastes Listed Abov	е	
				,,	52.	u.		
	15. Special Handling Instructions and Additional Infor	rmation				In Case of a call 1-800-89		
		T AND AND AN			CDC7 ASST	AND AND AS	107 ASSE	F 400
	<ol> <li>GENERATOR'S CERTIFICATION: I hereby certification for transport. The materials de</li> </ol>	ify that the contents of this shipm escribed on this manifest are not	nent are fully and accurately describ subject to federal hazardous waste	ed and are in regulations.	all respects	Necessary Constant Constant	SECT ADMINISTRA	Leaner
	,						Date	
100	Printed/Typed Name		Signature O . A		A 1	§ Mor		Year
	Agent/Linda Scott		aind	a.	Kank	63		121
T .	17. Transporter 1 Acknowledgement of Receipt of M	laterials	1 2000		130	D	Date	1
A	Printed/Typed Name		Signature	G-1 -		Mos	nth Day	Year
N S P	147/km Brus		The	1 t		**	15	01
R T	18. Transporter 2 Acknowledgement of Receipt of M	laterials	· ·				Date	
ER	Printed/Typed Name		Signature			Mor	nth Day	Year
FAC	19. Discrepancy Indication Space							
Ľſ	20. Facility Owner or Operator: Certification of receipt	t of the waste materials covered	by this manifest, except as noted in	n item 19.				
Į.					Maria de la companya		Date	
Y	Printed/Typed Name		Signature			Moi	nth Day	Year
							_	





Waste Management Chaffee LF 10860 Olean Rd Chaffee, NY, 14030 Ph: (716) 496-5000

Reprint Ticket# 671647

Customer Name NRCOPTECHENVIRONMENTAL-123457 Carrier PARISO PARISO TRUCKING
Ticket Date 03/16/2021 Vehicle# 13 Volume
Payment Type Credit Account Container
Manual Ticket# Driver
Hauling Ticket# Check#
Route State Waste Code Gen EPA ID NOT REQUIRED

Manifest
Destination
PO
1) 162211 2) 162211 3) 162211
Profile
123457NY (CONTAMINATED SOIL)

Generator 190-NIMO93DEWEY NIAGARA MOHAWK POWER CORP

Time Scale Operator Inbound Gross 57720 lb 03/16/2021 10:21:56 INBOUND In JChapma7 Tare 27960 lb Out 03/16/2021 10:51:56 OUTBOUND JChapma7 Net 29760 lb Tons 14.88 Comments

Pro	duct	LD%	Qty	UOM	Rate	Fee	Amount	Origin
1 2 3	Cont Soil Pet-RGC- EVF-P-Standard Env RCR-P-Regulatory C	100	14.88	Tons				ERI

Total Fees Total Ticket

Driver`s Signature \_\_\_\_\_OL1P2I7-1580

BAE 311

Print or type (Form designed for use on elite  NON-HAZARDOUS  WASTE MANIFEST	1. Generator's US EPA ID No.			Manifest Document No.	BAE2211	2. Page 1
Generator's Name and Mailing Address     Nagara Montow Power Corp.     144 Kanalington Ave.     Buttato NY 14214	1 - 7 2 0 9		lontesano	Fleet Gara Buffalo NY	ge-Deviey SC	
Generator's Phone ( )     Transporter 1 Company Name	6.	US EPA ID Number		A. State Transpo	rter's ID	
Pariso	N	/ A		B. Transporter 1		6168
7. Transporter 2 Company Name	8.	US EPA ID Number		C. State Transpo	rter's ID	
			10	D. Transporter 2	Phone	
Designated Facility Name and Site Address     Chaffee Landfill     1860 Olean Road	10.	US EPA ID Number		E. State Facility's  F. Facility's Phon		
Chaffee NY 14036	1			1.1 dointy o't flori	716 496-	5192
11. WASTE DESCRIPTION			Co	ontainers	_13.	14.
			No.	Туре	Total Quantity	Uni Wt./V
NON DOT Regulated Solids,NC	S(Spolls)	-	001	D T	0 0 0 2 0	Т
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			4			
a. Profile #1059781Y 12345781Y b. Job/PO#163291	d.			a. L.	c.	
15. Special Handling Instructions and Additional Inf					In Case of a	n Ernerger 19-4672
16. GENERATOR'S CERTIFICATION: I hereby ce in proper condition for transport. The materials of	tify that the contents of this shipm described on this manifest are not	nent are fully and accurately descri subject to federal hazardous was	ibed and are in te regulations.	all respects		
						Date
Printed/Typed Name		Signature	1.5		Mo	nth Day
Agent/Linda Scott		hinda Sc	41			16
17. Transporter 1 Acknowledgement of Receipt of	Materials	T		1/2		Date
Printed/Typed Name	Nater	Signature	de Laterra		Мо	للل
18. Transporter 2 Acknowledgement of Receipt of	Materials	Signature				Date
Printed/Typed Name		Signature			Mo	nth Day
19. Discrepancy Indication Space		<u></u>				
20. Facility Owner or Operator: Certification of rece	pt of the waste materials covered	by this manifest, except as noted	in item 19.			
	14	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )			1 P	Date
Printed/Typed Name	17.	Signature			Mo	nth Day

## NON-HAZARDOUS WASTE MANIFEST 50189473 (Form designed for use on elite (12 pitch) typewriter)

A. Generator's News and Marina Ardense. Corp 1-64 Namening Months William Ardense. Corp 1-64 Namening Months William Ardense.  Duffinition NY 14214 4. Generator's Procest 7. Transporter 2 Company Name 5. Transporter 2 Company Name 6. US EPA ID Number 7. Transporter 2 Company Name 8. US EPA ID Number 7. Transporter 2 Company Name 8. US EPA ID Number 8. US EPA ID Number 9. Designator Facility Name and Side Address 9. Designator Facility Name 9. Designator Pacific Name 9. Designator			r's US EPA ID No.		Manifest Document No.	BAETTI	2. Page 1
Bulliation Ny 14214 4. Generatory Provided Provided Services, Inc.  a. Tryrecycles Joseph Name NRC East Environmental Services, Inc.  7. Transports 2 Company Name  a. US EPA ID Number  D. Castle Transporters ID D. Transporter Provided Services ID D. Transporter ID D. Transporter Provided Services ID D. Transporter ID		144 Kensington Ave.	At Line Mo	OFFICE	The	+ garage	
a. Toprococcy Domogny Mark East Environmental Servicions, Inc.  7. Transporter 2 Company Name B. USEPA ID Number G. Static Transporter's ID G. Static Trans			n a		Settlikes and in the Comment of the Asset		
7. Transports 2 Conpany Name  a. US EPA ID Number  C. State Transports 1D  D. Transports 2 Prince  Covertal Environmental Solutions, LLC  GSS Cultury Read  NAGARA FALLS NY 14304  NY D 9 8 6 9 3 0 5 4 3  F. Fadely's Procen  T. Goden Grant Procen  T. Goden Procen  T. Goden Grant Proce							
7. Transporter 2 Company Name  8. US EPA ID Number  C. State Transporter 3 DO  D. Transporter 2 Prince  Covariant Environmental Solutions, LLC  SSS Cautarry Road  N Y D 9 8 6 9 3 0 5 4 3  F. Facility's Proces  T. F. Facility's Proces  T. F. Facility's Proces  T. F. Facility's Proces  T. Total  T. WASTE DESCRIPTION  A NON DOT, NON RCRAREGULATED LIQUID, NOS (Conformalised Vision's Recompany)  D. Transporter 3 Prince  T. C.  D. Transporter 3 Proces  T. Sepecial Handling Instructions and Additional Information  E. Strate Practices  T. F. Facility's Proces  T. T. Total  T. T		NRC East Environmental Services, Inc	6. MAC 3 0 0 0 8	3 9 9		The state of the s	0-0-0-0
D. Despetitor Facility Number and Side Address Of Birth Environmental Southborns III. Was to Dispetitor Facility Number  E. State Facility's Proces Tife 258-6257  III. WAS TE DESCRIPTION  On Type Outerfly  III. Was to Description  On Type Outerfly  III. Was to Description  On Type Outerfly  III. Was to Description by Market Listed Above  On Type  On Type Outerfly  III. Signature  III. Signature  III. Signature  Dispetition  III. Signature  Dispetition  Dispetition  III. Transporters of Market Listed Above  III. Signature  Dispetition  Dis	-					7 110116	5.20
Separative Facility Name and Sin Address COV attract Environmental Southbrins, LLC SSS Querry Road NIAGARA FALLS NY 143D4 NY D 9 8 6 9 3 0 5 4 3 F. Facility's Prone 716 298-6297  11. WASTE DESCRIPTION a. NON DOT. NON RCRA REGULATED DIGUID, NOS (Contaminated Wiles: Skids)  b. Containers No. Type Querry Open Total T Type  C.  d.  d.  G. Additional Description is Margania, Listed Above C.  b. Job/PO 8 J J J T Total T Separative The Interest yearity was the contents of his submarer are killy and accurately described and are in all respects in proper condition for transport. The interest yearity was required to five forms habitations waste regulations.  Property year Name Property Year Name Property Year Name Signature  Date Property Prod Name Signature  District T Amondreignement of Receipt of Materials District T Target T Amondreignement		The state of the s	) OS EPA ID Number				
COVARIA Environmental Solubions, LLC \$33C CURRY Road NAGARA FALLS NY 14304 NY D 9 8 6 9 3 0 5 4 3 F. Facility's Phone 716 293-6257  11. WASTE DESCRIPTION a. NON DOT, NON RCRA REGULATED LIGUID, NOS (CONSYTRABING VINESTSIUGIS) 001 T T  6. Total Outrity 001 T T  6. Additional Description for Metanal Listed Above C. D. JODPO 9 1 B 29  15. Sepcial Handling Instructions and Additional Information  EN CON PACT ECOlogy-24 HOUS 000-599-4872  16. GENERATORS CERTIFICATION: Investy certify that the contents of this alternative for the description route regulations  16. GENERATORS CERTIFICATION: Investy certify that the contents of this alternative for the description route regulations  16. GENERATORS CERTIFICATION: Investy certify that the contents of this alternative for the description route regulations  17. Transport I Administration described on this manifest are not subject to federal hash-drive route regulations  18. Transport I Administration of Receipt of Materials  Printed Typed Name Signature  19. Discrepancy Indication Space  19. Discrepancy Indication Space	5	Designated Facility Name and Site Address	10. US EPA ID Number				
NAGARA FALLS NY 14304  NY D 9 8 6 9 3 0 5 4 3 F. Facility's Proce T16 288-6297  11. WASTE DESCRIPTION  a. NON DOT, NON RCRA REGULATED LIQUID, NOS (Confibritinated Viserristage)  b. O01 T T  d. O3 Application for Management Listed Above  d. G. Application for Management Listed Above  b. Job/PO 8 1 1 3 291  d. H. Handing Codes for Wastes Lested Above  15. Separal Handing Instructions and Additional Information  For Configuration  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects  17. Transporter 1 Advanced application of the contents of this shipment are fully and accurately described and are in all respects  18. Transporter 1 Advanced and Additional Information  19. Discrepancy Indication Spects  19.		Coverds Environmental Solutions, LLC			E. Otato i dulity a		
a. NON DOT, NON RCRA REGULATED LIGUID, NOS (Conternimeted Viewersludge)  b. Oot Type Coverty  G. Additional Deprisoises for Materials Listed Above  G. Additional Deprisoises for Materials Listed Above  G. Additional Deprisoises for Materials Listed Above  D. Job/PO 8 1 / 3 2 9 1  15. Segecial Mandling Instructions and Additional Information  Encloyer 24 Mouth and Prisonal Research Contents of this abignitient are fully and accurately described and are in all respects in proper condition for transport. The materials discribed on this manifest are not expect to Refer in Academic viewer regulations.  Prisod/Typed Name  Additional Prisonal Research Contents of Materials  Prisod/Typed Name  Additional Research Contents of Materials  Date of the Prisod Research Contents of Materials  Date of the Research Contents of Receipt of Mat			NYD986930	5 4 3	F. Facility's Phon	ne 716 298-5	297
a. NON DOT NON RCRA REGULATED LIQUID, NOS (CONSTITUENDE VISUAS SUPERATORS)  b. O01 T T  d. G. Additional Descriptions for Manylast, Lased Above  c. D. Job/PO 8 1 5 329  d. H. Handling Codes for Wastes Listed Above  8 T C.  b. Job/PO 8 1 5 329  d. B. T. C.  15. Separal Handling Instructions and Additional Information  Exclosure are bully and accurately described and as in all respects.  Fronted Typed Name  Agentification  Signature  Signature  Mortin Description Name  Signature  Mortin Description Name  Signature  Mortin Description Name  Signature  Mortin Description Name  Mortin Description Name  Signature  Mortin Description Name  Mortin Desc	1	11. WASTE DESCRIPTION		Co	ntainers	13.	14.
GENERATORS CERTIFICATION: I hereby certify that the contents of this shipment are fully and accusately described and are in all respects  15. Separate Handling Instructions and Addisonal Information  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accusately described and are in all respects  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accusately described and are in all respects  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accusately described and are in all respects  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accusately described and are in all respects  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accusately described and are in all respects  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accusately described and are in all respects  17. Transporter 1 Advanced acquired and Receipt of Materials  18. Transporter 2 Advanced adjustment of Receipt of Materials  19. Discrepancy Indication Space	-	S. S. Prince V. (III) (Prince S.		No.	Турс	Total	Unit Wt./Vol.
G Additional Despressors for Materials Listed Above  G. Additional Despressors for Materials Listed Above  D. Job/PO # 123291  15. Septial Handling Instructions and Additional Information  ERCORTACT:  Ecology-24 HOUS  800-899-4872  16. GENERATOR'S CERTIFICATION: hereby certify that the consens of this shipment are fully and accusably described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardoos waster regulations.  PrintedTyped Name PrintedTyped Name PrintedTyped Name Signature Morah Description of Materials  Date PrintedTyped Name Signature Morah Description of Materials  Distribution of the state of	8	a. NON DOT, NON MCKAREGULATED LIQ	UID, NOS (Conternated Vietninsia	d(8)			1
G. Additional Descriptions for Materials  G. Additional Descriptions for Wastes Listed Above  H. Handling Codes for Wastes Listed Above  T. C.  D. Job/PO 8 1/ 5.291  d.  15. Sepecial Handling Instructions and Additional Information  Excurrence  Excurrence  From Materials  G. Additional Description for Instructions and Additional Information  Excurrence  Excurrence  From Materials  G. Additional Description for Materials  Materials  G. A				001	TT	//	T
G. Additional Descriptions for Materials Lased Above  G. Additional Descriptions for Materials Lased Above  D. Job/PO 8 1/3/29  15. Signitum Interest Central Cations and Additional Information  Ecology-24 Hours Society of Materials  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waster regulations.  Printed Typed Name  Printed Typed Name  Signature  Signature  Morth Date  Morth Date  Frinted Typed Name  Signature  Morth Date  Mort	GI	b.		T			1
G. Additional Descriptions for Materials Listed Above  D. Job/PO 8 1 3 2 9 d.  15. Seecial Handling Instructions and Additional Information  ERCORTACT: Ecology 24 HOUT 800-899-4872  16. GENERATOR'S CERTIFICATION: hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.  Printed Typed Name Printed Typed Name Signature  Month Day 17. Transporter 1 Acknowledgement of Roceipt of Materials Printed Typed Name Signature  Month Day 19. Discrepancy Indication Space	N			1			
d.  G. Additional Descrisions for Materials Listed Above  B. JobPO 11 J 3 29  d.  15. Special Handling Instructions and Additional Information  15. Special Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: hereby cartify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous vasite regulations.  17. Transporter 1 Admonitoring Signature  Month Description Name  Printed Typed Name  Signature  Month Description Name		C.		+	-		-
G. Additional Descriptions for Materials Listed Above  D. Job/PO # 1/2/24  15. Special Handling Instructions and Additional Information  ERCORTACT  Ecology - 24 HOUR 800-839-4672  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.  Printed Typed Name  Printed Typed Name  Signature  Month Day  17. Transporter 1 Acknowledgement of Receipt of Materials  Date  Printed Typed Name  Signature  Month Day  18. Transporter 2 Acknowledgement of Receipt of Materials  Date  Printed Typed Name  Signature  Month Day  19. Discrepancy Indication Space	- 1						
G. Additional Despriptions for Materials Listed Above  D. JobPO 1 1 2 2 4 Hours  15. Special Handling Instructions and Additional Information  ERCORTACT  Ecology- 24 Hours  800-839-4672  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.  Printed Typed Name  Printed Typed Name  Signature  Month Day  18. Transporter 1 Acknowledgement of Receipt of Materials  Date  Printed Typed Name  Signature  Month Day  19. Discrepancy Indication Space	6						
15. Seecial Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for warsport. The materials described on this manifest are not subject to federal hazardous waste regulations.  17. Transporter 1 Acknowledgement of Receipt of Materials  18. Transporter 1 Acknowledgement of Receipt of Materials  19. Discrepancy Indication Space  19. Discrepancy Indication Space	D d	ś.					1
15. Seecial Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.  17. Transporter 1 Acknowledgement of Receipt of Materials  18. Transporter 2 Acknowledgement of Receipt of Materials  19. Discrepancy Indication Space  19. Discrepancy Indication Space				1			1
15. Seecial Handling Instructions and Additional Information  15. Seecial Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.  17. Transporter 1 Acknowledgement of Receipt of Materials  18. Transporter 2 Acknowledgement of Receipt of Materials  19. Discrepancy Indication Space  19. Discrepancy Indication Space	0	G. Additional Descriptions for Materials Listed Above					
15. Special Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.  PrintedTyped Name  PrintedTyped Name  Signature  Month Date  17. Transporter 1 Acknowledgement of Receipt of Materials  PrintedTyped Name  Signature  Month Date  18. Transporter 2 Acknowledgement of Receipt of Materials  PrintedTyped Name  Signature  Month Date  19. Discrepancy Indication Space		a. Pronis # NRC 191406A	c,				
15. Special Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.    Printed Typed Name		b. Job/PO# 1/2701	ರೆ.		8. 1	C.	
16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.  Printed/Typed Name  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed/Typed Name  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed/Typed Name  19. Discrepancy Indication Space		10727			b.	ď.	
16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations.    Printed/Typed Name	1	15. Special Handling Instructions and Additional Information					
Printed/Typed Name  17 Transporter 1 Acknowledgement of Receipt of Materials  Printed/Typed Name  18 Transporter 2 Acknowledgement of Receipt of Materials  Printed/Typed Name  Signature  Month Da  18 Transporter 2 Acknowledgement of Receipt of Materials  Printed/Typed Name  Signature  Month Da  19 Discrepancy Indication Space	70	16. GENERATOR'S CERTIFICATION: I hereby certify that the conte in proper condition for transport. The materials described on this.	ents of this shipment are fully and accurately describe manifest are not subject to federal hazardous waste.	ed and are in	all respects		
TRANS Printed/Typed Name  18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name  19. Discrepancy Indication Space  17. Transporter 1 Acknowledgement of Receipt of Materials  Date  Month Day  19. Discrepancy Indication Space				- Systemonia.			Date
Printed/Typed Name    Printed/Typed Name   Signature   Month   Date	P	rinted/Typed Name Agent/Lintde Scott	Signature 7	Inst	Contractive Contra	Month	Day Year
Printed/Typed Name  Printed/Typed Name  Signature  Month Day  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed/Typed Name  Signature  Month Day  19. Discrepancy Indication Space	T .	7. Transporter 1 Acknowledgement of Parallel 4111	1842 M	W		3	27 [2]
Nonth Day  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed/Typed Name  Signature  Month Day  19. Discrepancy Indication Space	A P		Signature	1	-		Date
18. Transporter 2 Acknowledgement of Receipt of Materials  Printed/Typed Name  Signature  Month Day  19. Discrepancy Indication Space	NI		Signature Als	MA	1.	Month	179 171
F Printed/Typed Name Signature  Nonth Day  19. Discrepancy Indication Space	0 1	Transporter 2 Acknowledgement of Receipt of Materials	D. S. Inches	100	(Au)	1000	Pate   6/
AC	TIP	rinted/Typed Name	Signature			Month	
c	-	9. Discrepancy Indication Space					
The state of the s		Facility Owner or Operator: Cortification of receipt at the success	photials as your district.				
L state that the state of this that these, except as ripted in item 19.		or receipt of the waste ma	aterials covered by this manifest, except as noted in	tem 19.			
Printed/Typed Name	P	rinted/Typed Name	Signatura	-			Date
Y / today terso signature / . Month Day	Y	y tollotterco	Signature //			Month	Day Year

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	NON-HAZARDOUS WASTE MANIFEST  1. Generator's US E	PAID No.	Manifest Document No.	BA 2332	Page 1
	3. Generator's Name and Mailing Address NAME MONEY POWER CORD. 144 Kernelington Ave. Buffelo NY 14214 4. Generator's Phone ( 7 1 )5 8 3 1 - 7 2 0 3	Att Lies Montes	Buffato NY	to Junay	of
	,	6. US EPA ID Number	A. State Transpor	ter's ID	
i de	5. Transporter 1 Company Name NRC East Environmental Services, Inc.	MAG30009839	B. Transporter 1 8		<b>9</b> 5
	7. Transporter 2 Company Name	8. US EPA ID Number	C. State Transpor		
in			D. Transporter 2 I	Phone	
	Designated Facility Name and Site Address     Covarita Environmental Solutions, LLC     S335 Charry Road	10. US EPA ID Number	E. State Facility's	ID	- June
	NIAGARA FALLS NY 14304	NYD98893054	F. Facility's Phone	716 298-629	37
	11. WASTE DESCRIPTION		Containers	13.	14. Unit
	NON BOT NON BORA SECULATED LIQUID	11000 100 about the 200 to 1000	No. Type	Total Quantity	Wt./Vol.
	a NON DOT, NON RCRA REGULATED LIQUID,	NOS (Conterninated 9/lener/situage)		1 /	т
G	b.			1 (	1
E					
R	Ç.	1			-
A					
0					
R	d.				
	G. Additional Descriptions for Materials Listed Above		H. Handling Code	s for Wastes Listed Above	
			a. T	ξ <sup>0,</sup> ,	
	b Job/PO# 163291		ь	d.	
	15. Special Handling Instructions and Additional Information			Ecology- 24 Ht 800-899-4672	
	<ol> <li>GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manife</li> </ol>	this shipment are fully and accurately described and est are not subject to federal hazardous waste regula	are in all respects		- Completion
100	Drief of Town of Marine		4		Date
	Printed/Typed Name AgentA.inda Scott	Signature Au	1015	Month	Day Year
I	17. Transporter 1 Acknowledgement of Receipt of Materials	1 100	Ander	3	Date 2
RANSP	Printed Typed Name 1 166 145	Signature 1	RIL	Month	Pay Year
ORT	18. Transporter 2 Acknowledgement of Receipt of Materials	A. A.		)	Date
ER	Printed/Typed Name	Signature		Month	Day Year
FA	19. Discrepancy Indication Space				
C					
L	20. Facility Owner or Operator: Certification of receipt of the waste materials	s covered by this manifest, except as noted in item t	19.		
+	Printed/Typed Name	L Signatura			Date
Y	Trophor Jorco	Signature		Month	-Day Year



## NON-HAZARDOUS WASTE MANIFEST SOLO IUU

Pleas	e print or type (Form designed for use on elite (					(-)	,
	NON-HAZARDOUS WASTE MANIFEST	1. Generator's US EF			Manifest Document No.	.BAE333	2. Page 1 of
	<ol> <li>Generator's Name and Mailing Address Niagara Mohawk Power Corp.</li> <li>144 Kensington Ave.</li> <li>Buffalo NY 14214</li> </ol>		Att Lisa Mo	ntesano	Flee Buffalo N	+ Harage	2
	4. Generator's Phone ( 7 1)5 8 3	1 - 7 2 0 9					
-	5. Transporter 1 Company Name NRC East Environmental Set	vices, Inc.	6. M A C 3 0 0 0 9 8 :	3 9 9	A. State Transp		
	7. Transporter 2 Company Name	,	US EPA ID Number		B. Transporter		30
	The special Laboratory ( Name		d. GS EPA ID Number		C. State Transporter		
	Designated Facility Name and Site Address     Covanta Environmental Solutions     8335 Quarry Road	s, LLC	10. US EPA ID Number		E. State Facility		
	NIAGARA FALLS NY 14304		NYD986930	5 4 3	F. Facility's Pho	one 716 298-52	97
	11. WASTE DESCRIPTION			No.	ntainers Type	13. Total	14. Unit Wt./Vol.
	a. NON DOT, NON RCRA REGUL	ATED LIQUID, I	NOS (Contaminated Water/Sluc		ТТ	Quantity	Wt./vol.
GE	b.				. ,		<u> </u>
N E R	С.			-			
A T O							
R	d.						
	G. Additional Descriptions for Materials Listed Above 8. Profile # NRC181406A	)			H. Handling Co	odes for Wastes Listed Above	
	a. Prome # NRC181408A	C.			a. T		
	b. Job/PO# 16329/	d.			b.	d.	
	15. Special Handling Instructions and Additional Info	rmation				ER CONTAC Ecology- 24 H 800-899-4672	
		W AND AND		aler i	W 69	ANY ANY ANY	1007 100
	<ol> <li>GENERATOR'S CERTIFICATION: I hereby cert in proper condition for transport. The materials d</li> </ol>	ify that the contents of the escribed on this manifes	his shipment are fully and accurately describe at are not subject to lederal hazardous waste r	d and are in egulations.	all respects		
	Printed/Typed Name	·	Signature		. /	Month	Date  Day Year
T	Agent/Linda Scott  17. Transporter 1 Acknowledgement of Receipt of N	latariale	The )	MUL	X	Month 3	13/12/
RANSP	MARK Rubbin	5	Signature	ful	a	Month 3	Day Year
ORTE	<ol> <li>Transporter 2 Acknowledgement of Receipt of Merinted/Typed Name</li> </ol>	faterials	Signature			Month	Date  Day Year
FA	19. Discrepancy Indication Space						
C-	20. Facility Owner or Operator: Certification of receip	of the waste materials	covered by this manifest, exceptas noted in	item 19			
1			- 1/1 10	\			Date
TY	Printed/Typed Name	Perce	Signature	1.		Month	Day Year
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NON-HAZARDOUS WASTE MANIFEST SO 1900 (Form designed for use on elite (12 pitch) typewriter)

		NON-HAZARDOUS WASTE MANIFEST  1. Generator's US E	PA ID No.	Manifest Document No.	DAE 334	2. Page 1
		3. Generator's Name and Mailing Address Niagara Michawk Power Corp.  144 Kensington Ave.  Buffalo NY 14214  4. Generator's Phone ( 7 1 )6 8 3 1 - 7 2 0 9	Att: Lisa Montesa	Heet Buffalo NY	Harage i	
		5. Transporter 1 Company Name NRC East Environmental Services, Inc.	6. US EPA ID Number IM A C 3 0 0 0 9 8 3 9	A. State Transporte		205
		7. Transporter 2 Company Name	8. US EPA ID Number	B. Transporter 1 Pt C. State Transporte		333
		9. Designated Facility Name and Site Address Covanta Environmental Solutions, LLC 8335 Quarry Road	10. US EPA ID Number	D. Transporter 2 Pl E. State Facility's II		
		NIAGARA FALLS NY 14304	NYD98693054	F. Facility's Phone	716 298-53	297
		11. WASTE DESCRIPTION		Containers	13. Total	14. Unit
	1	a. NON DOT, NON RCRA REGULATED LIQUID,	1		Quantity	Wt./Vol.
	-	b.	001	TT	11	T
	GEN					
	R	C.				1
	ATO					
	R	d.				
STE		G. Additional Descriptions for Materials Listed Above  G. Profile # NRC181406A C.		H. Handling Codes	for Wastes Listed Above	
WASTE		a. Profile # NRC181406A c.		a. T	¢.	
		b. Job/PO# 163291 d.		b.	d.	
NON-HAZARDOUS		15. Special Handling Instructions and Additional Information			ER CONTA Ecology- 24 h 800-899-4672	HOURS -
9		N MA DAY AND AND AND AND AND	7 AT AN AN AN AN	100 MT	W AN AS	7 JULY JULY
		<ol> <li>GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manife</li> </ol>	this shipment are fully and accurately described and a est are not subject to federal hazardous waste regulation	re in all respects ons.		
		Printed/Typed Name Agent/Linda Scott	Signature /	11	Mont	Date h Day Year
	T	17. Transporter 1 Acknowledgement of Receipt of Materials	Signature Such	(Ageny	4 3	31 2  Date
	RANSP	Printed/Typed Name Mark Robbins	Signature Mulish	hh	Mont 3	
	ORTER	18. Transporter 2 Acknowledgement of Receipt of Materials  Printed/Typed Name	Signature		Mont	Date /
	FAC	19. Discrepancy Indication Space				
	L	20. Facility Owner or Operator: Certification of receipt of the waste material	Is covered by this manifest, except as noted in item 19			
	TY	Printet/Typed Name	Signature /		(Dont	h Day Year

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## NON-HAZARDOUS WASTE

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Please print or type

	NON-HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. N / A	Document No. BHE 355	2. Page 1
	3. Generator's Name and Mailing Address Niagara Mohawk Power Corp. 144 Kensington Ave. Buffalo NY 14214 4. Generator's Phone ( 7 1 )6 8 3	Att: Lisa Montesand	Flect Garage Dew Buffalo NY	ey SC
	5. Transporter 1 Company Name NRC East Environmental Ser	rvices, Inc.   M A C 3 0 0 0 9 8 3 9 9	A. State Transporter's iD  B. Transporter 1 Phone 9/8 455-15	95
	7. Transporter 2 Company Name	8. US EPA ID Number	C. State Transporter's ID  D. Transporter 2 Phone	
	<ol> <li>Designated Facility Name and Site Address         Covanta Environmental Solutions         8335 Quarry Road</li> </ol>	10. US EPA ID Number	E. State Facility's ID	
	NIAGARA FALLS NY 14304	NYD986930543	F. Facility's Phone 716 298-52	97
	11. WASTE DESCRIPTION	No.	Containers 13. Total Type Quantity	14. Unit Wt/Vol.
	a. NON DOT, NON RCRA REGUL	ATED LIQUID, NOS (Contaminated Water/Sludge)  001	тт //	T
GEN	b.			
RAT	C.			
OR	d.			
	G. Additional Descriptions for Materials Listed Above  a. Profile # NRC1S1406A	e C.	H. Handling Codes for Wastes Listed Above	
	b. Job/PO# 143291	d.	b. d.	
	15. Special Handling Instructions and Additional Info	ormation	ER CONTA Ecology- 24 H 800-839-4672	OURS-
	16. GENERATOR'S CERTIFICATION: I hereby cert	tily that the contents of this shipment are fully and accurately described and are		AN AN
	in proper condition for transport. The materials d	described on this manifest are not subject to federal hazardous waste regulations	S.	Date
	Printed/Typed Name Agent/Linda Scott	Signature 5	Month 3	
T R	17. Transporter 1 Acknowledgement of Receipt of M	Materials Signature	Month Month	Date Day Year
N P O	Mark Kabbin  18. Transporter 2 Acknowledgement of Receipt of N	15 Mych M	di 3	Day Year
TRAZSPORTER	Printed/Typed Name	Signature	Month	
FAC	19. Discrepancy Indication Space			
L	20. Facility Owner or Operator: Certification of receip	pt of the waste materials covered by this manifest, except as noted in item 19.		D.I.
T Y	Printed/Typed Name	Jerce signature .	Month	Date Year
С	F14 © 2002 LABEL MASTER ® (800) 621-	-5808 www.labelmaster.com	PRINTED ON PECH	CLED PAPER PAINTED WITH SOY INK

## **NON-HAZARDOUS WASTE MANIFEST** (Form designed for use on elite (12 pitch) typewriter)

Manifest Document No. BAE-336 2. Page 1 of 1 NON-HAZARDOUS 1. Generator's US EPA ID No. WASTE MANIFEST Generator's Name and Mailing Address
 Niagara Mohawik Power Corp. Att: Lisa Montesano 144 Kensington Ave. Buffalo NY 14214 4. Generator's Phone ( 7 1 /S 831-7209 5. Transporter 1 Company Name US EPA ID Number A. State Transporter's ID NRC East Environmental Services, Inc. MAC300098399 465-1595 8. Transporter 1 Phone 978 7. Transporter 2 Company Name 8. US EPA ID Number C. State Transporter's ID D. Transporter 2 Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number E. State Facility's ID Covanta Environmental Solutions, LLC 8335 Quarry Road F. Facility's Phone NIAGARA FALLS NY 14304 716 298-5297 NYD986930543 11. WASTE DESCRIPTION Containers Total Unit No. Type Quantity Wt./Vol. a. NON DOT, NON RCRA REGULATED LIQUID, NOS (Contaminated Water/Sludde) 001 TT T b. G ENE C. R A 0 d. R G. Additional Descriptions for Materials Listed Above a. Profile # NRC181406A H. Handling Codes for Wastes Listed Above C. a. T C. b. Job/PO# 163291 d. 15. Special Handling Instructions and Additional Information ER CONTACT: US Ecology- 24 HOURS -800-899-4672 16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of this shipment are fully and accurately described and are in all respects in proper condition for transport. The materials described on this manifest are not subject to federal hazardous waste regulations. Date Printed/Typed Name Signature Month Day Year 1 Agent/Linda Scott TRANSPORTER Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature / Day Year 21 4 18. Transporter 2 Acknowledgement of Receipt of Materials Date Signature Day Month Year 19. Discrepancy Indication Space F A 1 20. Facility Owner or Operator: Certification of receipt of the waste materials covered by this manifest, except as noted in item 19. L Date T Printed/Typed Name Signature Y

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# NON-HAZARDOUS WASTE

_	NON-HAZARDOUS WASTE MANIFEST  1. Generator's US	EPA ID No.		Manifest Document No.	BAE 301	2. Page 1 1
	Generator's Name and Mailing Address     Generator's Phone ( )	Alt: Lise Monb	esano	Deviey-D Bullato N	Fleet C	-वा वडु
-	5. Transporter 1 Company Name NRC East Environmental Services, Inc.	6. US EPA ID Number	9 9	A. State Trans		
1	7. Transporter 2 Company Name	US EPA ID Number		B. Transporter	TTHORE	rau
	7. Transporter 2 company value	o. OS EPA ID Number		C. State Trans  D. Transporter	A STATE OF THE STA	
	Designated Facility Name and Site Address	10. US EPA ID Number		E. State Facili		
	Covente Environmental Solutions, LLC					
	NIAGARA FALLS NY 14384	NYD9869305	4 3	F. Facility's Ph	one 716 298-52	97
	11. WASTE DESCRIPTION			ntainers	13. Total	14. Unit
	a. NON DOT, NON RORA REGULATED LIQUID	NOS (Contaminated Water/Sludd	No.	Туре	Quantity	Wt./Ve
			001	тт	2900	F
	b.		7. 30			
	c.					
	d. **					
	G. Additional Descriptions for Materials Listed Above			H. Handling C	odes for Wastes Listed Above	1
	b. Job/PO#462844 d.			6.	d.	
					ER CONTA	mm. 1 5 m
	15. Special Handling Instructions and Additional Information				Ecology- 24 H 800-899-4672	ours-
	Special Handling Instructions and Additional Information      Section 16. Generator's Certification: I hereby certify that the contents of in proper condition for transport. The materials described on this manifestation.	of this shipment are fully and accurately described a ifest are not subject to federal hazardous waste regu	nd are in ulations.	all respects	Ecology- 24 H	ours-
	16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manif		nd are in ulations.	all respects	Ecology- 24 H 800-899-4672	OURS -
		Signature	nd are in ulations.	all respects	Ecology- 24 H	Date Day
	16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manif		nd are in ulations.	all respects	Ecology- 24 H 800-899-4672	Date  Day
	16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manipulation of the contents of the co	Signature	nd are in ulations.	all respects	Ecology- 24 H 800-899-4672	Date  Date  Date
	16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manipulation of the contents of the c	Signature Sc.	14	1	Ecology- 24 H 800-899-4672 Month	Date  Date  Date  Date
	16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manipulation of the contents of the co	Signature	14	1	Ecology- 24 H 800-899-4672 Month	Date  Date  Date  Date
	16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manipulation of the contents of the co	Signature	14	1	Ecology- 24 H 800-899-4672 Month	Date  Date  Date  Date  Date
	16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manipulation of the materials described on the materials described on the materials.  Printed/Typed Name  17. Transporter 1 Acknowledgement of Receipt of Materials.  Printed/Typed Name	Signature	14	1	Ecology- 24 H 800-899-4672 Month 3	Date  Date  Date  Date  Date
	16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manifold in proper condition for transport. The materials described on this manifold.  Printed/Typed Name  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed/Typed Name  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed/Typed Name	Signature	2H	1	Ecology- 24 H 800-899-4672 Month 3	Date  Date  Date  Date  Date
	16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manipulation of transport. The materials described on this manipulation.  Printed/Typed Name  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed/Typed Name  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed/Typed Name  19. Discrepancy Indication Space	Signature	2H	1	Ecology- 24 H 800-899-4672 Month 3	Date  Day y  Date  Day y  Date
	16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manifold in proper condition for transport. The materials described on this manifold.  Printed/Typed Name  17. Transporter 1 Acknowledgement of Receipt of Materials  Printed/Typed Name  18. Transporter 2 Acknowledgement of Receipt of Materials  Printed/Typed Name  19. Discrepancy Indication Space	Signature	2H	1	Ecology- 24 H 800-899-4672 Month 3	Date  Date  Date  Day  Date  Day  Y

(Form designed for use on elite (12 pitch) typewriter)

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	NON-HAZARDOUS WASTE MANIFEST	1. Generator's US E	PA ID No.		Manifest Document No.	.B <i>AF</i> 302	2. Page 1 of
	3. Generator's Name and Mailing Address Niagara Mohawk Power Corp. 144 Kensington Ave. Buffalo NY 14214 4. Generator's Phone (7 1) 6 8 3	1 - 7 2 0 9		Att: Lisa Monte	Buffalo N	Fleet G	arage
	5. Transporter 1 Company Name NRC East Environmental Se	rvices. Inc.	6. USEP	A ID Number 0 0 0 9 8 3	A. State Transp		1595
-	7. Transporter 2 Company Name		8. US EF	A ID Number	B. Transporter C. State Trans	7 1 110110	10.00
1					D. Transporter		
	<ol> <li>Designated Facility Name and Site Address         Covanta Environmental Solutions     </li> <li>8335 Quarry Road</li> </ol>	s, LLC	10. US EF	A ID Number	E. State Facility  F. Facility's Ph	200	
L	NIAGARA FALLS NY 14304		NYD9	8 6 9 3 0 5	4 3	716 298-	5297
	11. WASTE DESCRIPTION				Containers No. Type	13. Total Quantily	14. Unit Wt./Vo
	a NON DOT, NON RCRA REGUL	ATED LIQUID	, NOS (Contamir	Ī	)	,	WEVO
-	b.			0	01 T T	/0	T
-							
-	c.						
	d.						
	G. Additional Descriptions for Materials Listed Above 2. Profile # NRC181406A	C.		-	H. Handling Co	odes for Wastes Listed Above	)
Passed as	b. Job/PO# <del>162211</del> 163291	d.			b.	d.	
See Assess	15. Special Handling Instructions and Additional Info	rmation				ER CONT Ecology- 24 800-899-467	HOURS -
					W 4507 450		
	<ol> <li>GENERATOR'S CERTIFICATION: I hereby certin proper condition for transport. The materials of</li> </ol>	tify that the contents of escribed on this manife	f this shipment are fully a est are not subject to fed	and accurately described an leral hazardous waste regul	d are in all respects ations.	SOCIONAL STREET, PARTIE	ON REPORTED
	Printed/Typed Name Agent/Linda Scott		Signature	Linda Sect	1	Mor	
	17. Transporter 1 Acknowledgement of Receipt of N	Materials		VINDIA JEET	\$	3	10 0
	Printed/Typed Name W. Wean Smith		Signatuh	Mem RhA	)	Mora 3	th Day
-	<ol> <li>Transporter 2 Acknowledgement of Receipt of No.</li> <li>Printed/Typed Name</li> </ol>	Materials	Signatur	е		Mor	Date
	19. Discrepancy Indication Space						
-	20. Facility Owner or Operator: Certification of recei	pt of the waste materia	als covered by this manife	est, except as noted in item	12		Date
:	Printed/Typed Name	)~~	Signatur	11/	<del></del>	Mo	Date
		0111	/ / /	1 1/ 1	,		101

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NON-HAZARDOUS WASTE

(Form designed for use on elite (12 pitch) typewriter)

	NON-HAZARDOUS WASTE MANIFEST  1. Generator's US E	PA ID No.		Manifest Document No.	.B.AE303	2. Page 1
	3. Generator's Name and Mailing Address Niagara Mohawk Power Corp. 144 Kensington Ave. Buffalo NY 14214 4. Generator's Phone (7 1)6 8 3 1 - 7 2 0 9	Att: Lisa Monte	esano	Demoy DK 6		arage
	5. Transporter 1 Company Name NRC East Environmental Services, Inc.	6. US EPA ID Number	0.0	A. State Transporte	r's ID	
	7. Transporter 2 Company Name		9 9	B. Transporter 1 Ph		595
	7. Harisporter 2 Company Name	US EPA ID Number		C. State Transporte		
	Designated Facility Name and Site Address	10. US EPA ID Number		D. Transporter 2 Ph E. State Facility's ID		
46	Covanta Environmental Solutions, LLC			C. State Facility S ID		
	8335 Quarry Road NIAGARA FALLS NY 14304			F. Facility's Phone	7/0 000 0	5.00
		NYD9869305	4 3		716 298-5	297
	11. WASTE DESCRIPTION		Cor	ntainers	13. Total	14.
	NON DOT NON BODA BECUI ATER LIQUID	NO. (0	No.	Туре	Quantity	Unit Wt./Vol.
	a. NON DOT, NON RCRA REGULATED LIQUID,		e) 001	тт	10	Т
GEN	b.					
ERA	C.					+
T						
R	d.					
	G. Additional Descriptions for Materials Listed Above  a. Profile # NRC181406A C.		-	H. Handling Codes t	or Wastes Listed Above	
	a. Profile # NRC181406A c.			a. T	A A	
	b. Job/PO# <del>162211</del> d.			ca, i	C.	
	163291			b.	d.	
	15. Special Handling Instructions and Additional Information				ER CONTA Ecology- 24 H 800-899-4672	OURS -
	16. GENERATOR'S CERTIFICATION: I hereby certify that the contents of	this shipment are fully and accurately described an	W A	M M A	THE	
	<ol> <li>GENERATOR'S CERTIFICATION: I hereby certify that the contents of in proper condition for transport. The materials described on this manife</li> </ol>	st are not subject to federal hazardous waste regu	lations.	ar respects		Date
	Printed/Typed Name Agent/Linda Scott	Signature Linda Sc	of	ł.	Month 5	Day Year   10   2
TRA	Transporter 1 Acknowledgement of Receipt of Materials     Printgd/Typed Name	10.04	-	_		Date
AZWD	William South	Signafule ///	01	1	Month	
POR	18. Transporter 2 Acknowledgement of Receipt of Materials	William 16	No.	₹	3	10 21
TI	Printed/Typed Name	Signature			Month	Date  Day Year
F						
F	19. Discrepancy Indication Space					
A						
1	20. Facility Owner or Operator: Certification of receipt of the waste materials	Covered by this manifest assess as a second in	10			
	1	donated by this manifest, except as noted in item	19.			Deli
T	Printed/Typed Name	Signature //			Month	Date Vocas
Y	HOTHE Merce		/		Month	13 M 2
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# NON-HAZARDOUS WASTE

Blan.	NON-HAZAPPOUR		A ID No.					
	WASTE MANIFEST	erator's US EP	A IU No.		Manifest Document No.	BAE	30/2	Page 1 f
	3. Generator's Name and Mailing Address Niagara Monawk Power Corp. 144 Kensington Ave. Buffalo NY 14214		Att Lisa Mo	ontesano	Berrey B	Hoo Fleet		iose
Bin	4. Generator's Phone ( 7 1) 6 8 3 1 - 7	209			CAMPAGE P	T.		
	5. Transporter 1 Company Name		6. US EPA ID Number		A Ctota Toos	and de ID	-	
Boos	NRC East Environmental Services	, inc.	MAC 3 0 0 0 9 8	3 9 9	A. State Trans		55-10	45
	7. Transporter 2 Company Name		US EPA ID Number		B. Transporter	11110110	10	27
100	The second of th		US EFA ID Number		C. State Trans		-	
	Designated Facility Name and Site Address		10. US EPA ID Number		D. Transporter			
	Covents Environmental Solutions, LLC 8335 Quarry Road		<ol> <li>US EPA ID Number</li> </ol>		E. State Facilit			
1	NIAGARA FALLS NY 14304		NYD986930	5 4 3	F. Facility's Ph	716 25	18-52	97
100 m	11. WASTE DESCRIPTION				ntainers			
				No.		13. Total		14. Unit Wt./Vol.
	a. NON DOT, NON RCRA REGULATED	LIOUD I	NOS (Conteminated Water/Sir		Туре	Quantity		Wt./Vol.
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G	b.			+				
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ER	C.			1				
ATO								
R	d.							
	G. Additional Descriptions for Materials Listed Above					L		
Db.	G. Additional Descriptions for Materials Listed Above	C.			H. Handling Co	odes for Wastes Listed A	Above	
					8. 7			
000	b. Job/PO# 162211	ď						
	163291				b.	5		
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	15. Special Handling Instructions and Additional Information					FF. 6.4	SE THERE A	0.00 T125
	13. Special reliancy instructions and Additional Information					Ecology-		CT: US
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	<ol> <li>GENERATOR'S CERTIFICATION: I hereby certify that the in proper condition for transport. The materials described or</li> </ol>	contents of the	is shipment are fully and accurately describe	ed and are in	all respects	Annual Assess	all sold	ASSES 1494
	in proper condition for transport. The materials described or	n this manifest	are not subject to federal hazardous waste	regulations.	an respons			
						ſ		Date
	Printed/Typed Name		Signature / A	_	1 /		Month	Day Year
	Agent/Linda Scott		Linda	200	Hope		3 1	10101
I	17. Transporter 1 Acknowledgement of Receipt of Materials						-	Date
RA	Printed/Typed Name		Signature , (#)	9 1			Month	
ANSP	William Smith		Waltern V	A.A.			Nionin 2 1	Day Year
POR	18. Transporter 2 Acknowledgement of Receipt of Materials		Contradiction by	- QXI			12	Date
TI	Printed/Typed Name		Signature				Month	
ER							WOTH	Day Year
-	19. Discrepancy Indication Space							
FA								
6								
!!	20. Facility Owner or Operator: Certification of receipt of the wa	aste materials of	covered by this manifest except adhoted in	item 10			-	
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t	Printed/Typed Name 1		Signature /	-)		l		Date
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## NON-HAZARDOUS WASTE MANIFEST 50068

NON-HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No.	BAE 355 2	. Page 1
3. Generator's Name and Mailing Address Niagara Mohawk Power Corp. 144 Kensington Ave. Buffalo NY 14214 4. Generator's Phone ( 7 1) 6 8 3	1 - 7 2 0 9	Buffalo NY	Fleet	Craraz
5. Transporter 1 Company Name NRC East Environmental Se	ervices, Inc.   MAC 3 0 0 0 9 8 3	A. State Transpor		OK.
7. Transporter 2 Company Name	8. US EPA ID Number	B. Transporter 1 P C. State Transport	110110	30
Designated Facility Name and Site Address	10. US EPA ID Number	D. Transporter 2 F E. State Facility's		
Covanta Environmental Solution 8335 Quarry Road	s, LLC	F. Facility's Phone		
NIAGARA FALLS NY 14304	NYD9869305	4 3	716 298-52	97
		Containers No. Type	13. Total Quantity	14. Unit Wt./Vol.
a. NON DOT, NON RCRA REGU	LATED LIQUID, NOS (Contaminated Water/Slud	ge)	1 2	WO VOI.
b.		001 TT	10	T
c.				
d,				
G. Additional Descriptions for Materials Listed Abov	e C.	H, Handling Codes	s for Wastes Listed Above	
b. Job/PO# <del>162211</del> 163291	ď.	b.	d.	
15. Special Handling Instructions and Additional Info	ormation		ER CONTAC Ecology- 24 Hi 800-899-4672	
16. GENERATOR'S CERTIFICATION: I hereby cer	tify that the contents of this shipment are fully and accurately described described on this manifest are not subject to federal hazardous waste re	and are in all respects		MI A
XIMO	rescribed on this manifest are not subject to federal hazardous waste re	gulations.		
Printed/Typed Name Agent/Linda Scott	Signature	1/1	Month	Date  Day Year
17. Transporter 1 Acknowledgement of Receipt of	Materials Zude 24	, Av	3	12 2/ Date
MARK Robbin	Signature Signature	Pull	Month 3	Day Year
Transporter 2 Acknowledgement of Receipt of Printed/Typed Name	Signature		Month	Date /
19. Discrepancy Indication Space				
/	pt of the waste materials covered by this manifest, except as noted in its	em 19.		Date
Printed/Typed Name	Terco / Signature	)	Mooun	Day Year

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NON-HAZARDOUS WASTE

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WASTE MANIFEST	1. Generator's US EP	A ID No.			Manifest Document No.	BA: 306	2. Page 1
3. Generator's Name and Mailing Address Niagara Mohawk 144 Kensington Ave Buffalo NY 14214 4. Generator's Phone ( )							
5. Transporter 1 Company Name		6 USERAII	2.11 1-				
	lass bes	6. USEPAR			A. State Transpo		
NRC East Environmental Serv 7. Transporter 2 Company Name	ices, inc.			9 9	B. Transporter 1		595
7. Transporter 2 Company Name		8. US EPA II	O Number		C. State Transpo		
Designated Facility Name and Site Address		10. US EPA II	211		D. Transporter 2		
Covanta Environmental Solutions, 8335 Quarry Road	LLC	10. US EPA II	o Number		E. State Facility's  F. Facility's Phor		
NIAGARA FALLS NY 14304		NYD98	80305	4.3	r. raciity's riior	716 298-5	297
11. WASTE DESCRIPTION		IN 1 17 8 0	0 8 3 0 3	_	ntainers		
				No.	Туре	13. Total Quantity	14. Unit Wt./Vo
a. Non-RCRA, non-DOT regulated Li	iquid, NOS (Co	ntaminated Water	Sludge)	001	тт	4	т
b.				001	1 1		1
C.							
d.							
G. Additional Descriptions for Materials Listed Above  3. Profile # NRC181406A	G.				H. Handling Cod	es for Wastes Listed Above	
					3.	c.	
b. Job/PO 163291	d.						
b. Job/PO 163291	d.				b.	ď.	
b. Job/PO 163291  15. Special Handling Instructions and Additional Inform					b.	ER CONTAC EAST ENV. S INC 24 HO 800-899-4672	SERVICE URS -
15. Special Handling Instructions and Additional Inform	nation					ER CONTAC EAST ENV. S INC 24 HO	SERVICE URS -
15. Special Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certify in proper condition for transport. The materials design of the condition of transport.	nation	this shipment are fully and a st are not subject to lederal	accurately described hazardous waste re	d and are in egulations.		ER CONTAC EAST ENV. S INC 24 HO	SERVICE URS -
15. Special Handling Instructions and Additional Inform	nation	this shipment are fully and a st are not subject to lederal	accurately described hazardous waste re	and are in egulations.		ER CONTAC EAST ENV. S INC 24 HO	Date
15. Special Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certify in proper condition for transport. The materials des	nation		accurately described hazardous waste re	and are in egulations.		ER CONTAC EAST ENV. 3 INC 24 HO 900-899-4672	Date
15. Special Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certifing proper condition for transport. The materials design property in the condition of the co	y that the contents of t		accurately described hazardous waste re	and are in egulations.		ER CONTAC EAST ENV. 3 INC 24 HO 900-899-4672	Date th Day
15. Special Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certify in proper condition for transport. The materials design in proper Condition for transport.	y that the contents of t		accurately described hazardous waste re	and are in egulations.		ER CONTAC EAST ENV. S INC 24 HO 800-899-4672	Date th Day Date th Day
15. Special Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certify in proper condition for transport. The materials design printed/Typed Name  Agent/ Linda Scott  17. Transporter 1 Acknowledgement of Receipt of Materials (Typed Name)	y that the contents of the scribed on this manifestaterials	Signature	accurately described hazardous waste re	and are in egulations.		ER CONTAC EAST ENV. 3 INC 24 HO 900-899-4672	Date th Day Date th Day
15. Special Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certifing proper condition for transport. The materials des   Williams  Printed/Typed Name  Agent/ Linda Scott  17. Transporter 1 Acknowledgement of Receipt of Mark  Printed/Typed Name  Robbic	y that the contents of the scribed on this manifestaterials	Signature	accurately described hazardous waste re	and are in egulations.		ER CONTAC EAST ENV. S INC 24 HO 800-899-4672	Date th Day Date th Day Date th Day Date
15. Special Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certifing proper condition for transport. The materials design proper condition for transport. The materials design printed/Typed Name  Agent/ Linea Scott  17. Transporter 1 Acknowledgement of Receipt of Materials and Printed/Typed Name  Printed/Typed Name  18. Transporter 2 Acknowledgement of Receipt of Materials and Printed/Typed Name  19. Transporter 2 Acknowledgement of Receipt of Materials and Printed/Typed Name  19. Transporter 2 Acknowledgement of Receipt of Materials and Printed/Typed Name  19. Transporter 2 Acknowledgement of Receipt of Materials and Printed/Typed Name  19. Transporter 2 Acknowledgement of Receipt of Materials and Printed/Typed Name	y that the contents of the scribed on this manifestaterials	Signature	accurately described hazardous waste re	and are in egulations.		ER CONTAC EAST ENV. 3 INC 24 HO 900-899-4673	Date th Day Date th Day Date th Day Date
15. Special Handling Instructions and Additional Information  16. GENERATOR'S CERTIFICATION: I hereby certifing proper condition for transport. The materials des   Printed/Typed Name  Agent/ Lindia Scott  17. Transporter 1 Acknowledgement of Receipt of Mark  Printed/Typed Name  18. Transporter 2 Acknowledgement of Receipt of Mark  Printed/Typed Name  19. Discrepancy Indication Space	y that the contents of the scribed on this manifest atterials	Signature Signature Signature	I Sa	s.p		ER CONTAC EAST ENV. 3 INC 24 HO 900-899-4673	Date th Day Date th Day Date th Day Date
15. Special Handling Instructions and Additional Informal 19.  16. GENERATOR'S CERTIFICATION: I hereby certifin proper condition for transport. The materials des Agent/ Linda Scott  17. Transporter 1 Acknowledgement of Receipt of Ma Printed/Typed Name  18. Transporter 2 Acknowledgement of Receipt of Ma Printed/Typed Name  19. Discrepancy Indication Space  20. Facility Owner or Operator: Certification of receipt	y that the contents of the scribed on this manifest atterials	Signature Signature Signature Signature	I Sa	s.p		ER CONTAC EAST ENV. 3 INC 24 HO 900-899-4673	Date th Day Date th Day Date th Day Date
15. Special Handling Instructions and Additional Inform  1)  16. GENERATOR'S CERTIFICATION: I hereby certifing in proper condition for transport. The materials des   William  Printed/Typed Name  Agent/ Linds Scott  17. Transporter 1 Acknowledgement of Receipt of Ma  Printed/Typed Name  18. Transporter 2 Acknowledgement of Receipt of Ma  Printed/Typed Name  19. Discrepancy Indication Space	y that the contents of the scribed on this manifest atterials	Signature Signature Signature	I Sa	s.p		ER CONTAC EAST ENV. 3 INC 24 HO 900-899-4673	Date th Day Date th Day Date th Day Date th Day

Periodic Review Report – National Grid Dewey/Kensington Service Center (Site #915144)

Reporting Period – November 01, 2020 to November 01, 2021

**Attachment 5 – Buffalo Sewer Authority – Temporary Discharge Permit** 

National Grid Page 13

From the Desk of ...

## TRASERRA ADAMS

Legal Investigator

		Date:	10-22-21
Referrea	10: Michael	C.1	Jones
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**Buffalo Sewer Authority Wastewater Treatment Plant Industrial Waste Section** 

90 W. Ferry St., Buffalo, NY 14213-1799 Phone: (716) 851-4664 ext. 5255; Fax: (716) 883-9016

E-mail: tadams@sa.ci.buffalo.nj us

Permit No.: 21-10-TP284

**EPA CATEGORY 40 CFR 403** 

**Expiration Date: September 29, 2022** 

Date Paid: September 29, 2021

## **BUFFALO SEWER AUTHORITY**

## TEMPORARY DISCHARGE PERMIT

Permittee: ARCADIS OF NEW YORK, INC.

Location Address: 110 W. Fayette Street, Suite 300, Syracuse, New York 13202

The above-named Permittee is hereby approved to discharge **treated excavation derived** water to the BSA Wastewater Treatment Plant only, from:

National Grid Dewey/Kensington Service Center 144 Kensington Avenue, Buffalo, New York 14214

to the Buffalo Sewer Authority facilities in accordance with the Buffalo Sewer Authority Regulations, Article VI, Section 14, and subject to the following conditions:

## ARTICLE 1 CONDITIONS OF ACCEPTANCE

The discharge of the approved waste by the Permittee shall be subject to the following conditions:

## a. Times, Location & Rate

The following location is designated for discharge during the hours listed and subject to the limit for rate of discharge specified:

Location: 144 Kensington Avenue, Buffalo, New York 14214 (see attached site map)

Time Discharge is Permitted: 8:00 am to 5:00 pm

Limit on Rate of Discharge: **60 gallons per minute**, Buffalo Sewer Authority Wastewater Treatment Plant only, **dry weather only**.

## b. Operations

The Permittee shall maintain cleanliness, minimize odors, ensure necessary sediment control measures are in place and maintained to protect the Buffalo Sewer Authority facilities during the permittee's operations. The Permittee shall not permit any condition to arise which may pose a threat to public health or safety.

Permit No.: 21-10-TP284

## c. <u>Samples and Analyses</u>

The Buffalo Sewer Authority may from time to time, require the Permittee to sample and analyze its waste discharges. Such sampling and analyses shall be performed and results submitted by a New York State Dept. of Health certified laboratory. The analyses required shall be as specified by the Buffalo Sewer Authority, which also reserves the right, at its convenience, to sample wastes discharged by the Permittee.

## d. Refusal to Discharge

The Buffalo Sewer Authority may refuse the Permittee permission to discharge wastes at any time and for any reason whatsoever, for the protection of sewer facilities against damage or flooding; to assure the proper operation and maintenance of said facilities; or to protect public health, safety or welfare.

## e. <u>Local Limits</u>

Except as otherwise specified in this permit, the permit holder shall comply with all specific prohibitions, limits on pollutants or pollutant parameters set forth in the Buffalo Sewer Authority Sewer Use Regulations, as amended from time to time, and such prohibitions, limits and parameters shall be deemed pretreatment standards for purposes for the Clean Water Act.

## **ARTICLE 2 REGULATIONS**

The Permittee must conform to all Buffalo Sewer Authority regulations and appropriate Federal, State and County Statutes, rules, mandates, directives, and orders concerning the collection, transportation, treatment and disposal of wastewaters.

## ARTICLE 3 INSURANCE AND INDEMNIFICATION

The Permittee, agrees to indemnify and hold harmless the Buffalo Sewer Authority and its agents and employees against any and all claims resulting from work performed under this permit. The permittee shall be solely responsible for any and all injury or damage to its employees or property arising from use of Buffalo Sewer Authority facilities under this permit.

In the event of any alteration, non-renewal or cancellation of these policies, at least (45) forty-five days advance notice shall be given to the Industrial Waste Section, Bird Island Treatment Plant, 90 West Ferry Street, Buffalo, New York 14213 - before such change shall be effective.

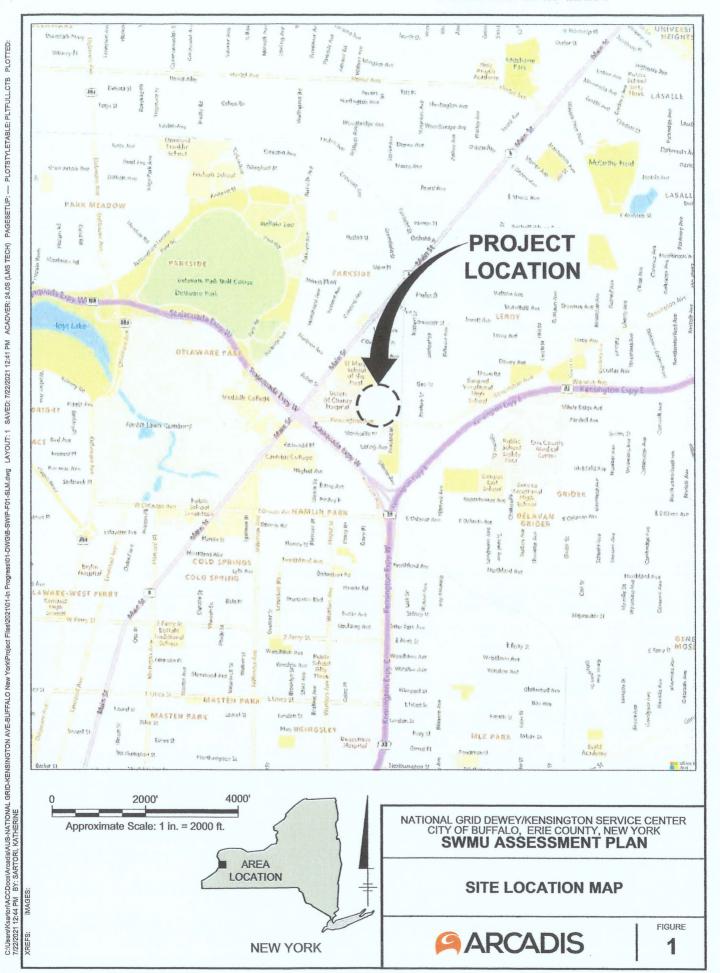
Permit No.: 21-10-TP284

## ARTICLE 4 TERMINATION FOR VIOLATION OF AGREEMENT

In the event of a violation of any of the terms and conditions of this permit by the Permittee or upon the failure to pay the charges herein specified, the Buffalo Sewer Authority shall terminate the permit by service of notice of termination by registered mail at the Permittee's office address as set forth above.

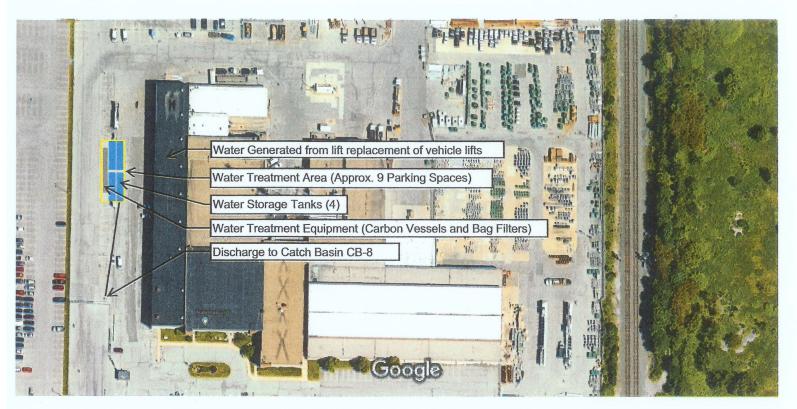
## ARTICLE 5 PERMITTEE APPROVAL

Official: Michael C. Jones	Title:	Vice President/Technical Expert
Print Name		Print
Signature: MIL	Date: _	October 20, 2021
ARTICLE 6 BUFFALO SEWER AUTHORIT	Y APPROV	VAL
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Imagery ©2021 Maxar Technologies, New York GIS, U.S. Geological Survey, Map data ©2021

Periodic Review Report – National Grid Dewey/Kensington Service Center (Site #915144)

Reporting Period – November 01, 2020 to November 01, 2021

**Attachment 6 – Spent Carbon Disposal Documentation** 

National Grid Page 14

Tidd5 # 23069

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Periodic Review Report – National Grid Dewey/Kensington Service Center (Site #915144)

Reporting Period – November 01, 2020 to November 01, 2021

**Attachment 7 – Tank Cleaning Disposal Documentation** 

National Grid Page 15

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