

CleanHarbors

ENVIRONMENTAL SERVICES®

Page # 1 of 1

Bulk Load Worksheet

1-800-444-4244

Run #:	Sales Order #: <u>1403295524</u>	Tractor #: <u>4058</u>	Trailer #: <u>—</u>
Job Date:	Customer / Generator Name: <u>Maxon Holdings</u>		
Expected Arrival Time:	Address: <u>301 W Nott St, Schenectady, NY 12305</u>		
Start Odometer: <u>4098</u>	Manifest #: <u>BOL859029</u>	Gallons/ EST Pounds/Tons: <u>1050 G</u>	
End Odometer: <u>4161</u>	Container Drop: #	#	#
Employee ID#: <u>078302</u>	Container Pick Up: #	#	#
Driver Name: <u>Brian Goble</u>	Total Number of Liners Used: <u>1</u>		

Please Use Military Hrs for Start/End Times

Activity Code	Start Time	End Time	Reason Code	Hours (H)	Minutes (M)	Comments
<u>015</u>	<u>1000</u>	<u>1030</u>			<u>30</u>	<u>pre trip / paperwork</u>
<u>017</u>	<u>1030</u>	<u>1115</u>			<u>45</u>	<u>travel to job site</u>
<u>079</u>	<u>1115</u>	<u>1245</u>		<u>1</u>	<u>30</u>	<u>arrive → pump out frac tank → depart</u>
<u>082</u>	<u>1245</u>	<u>1330</u>			<u>45</u>	<u>travel to Global for disposal</u>
<u>083</u>	<u>1330</u>	<u>1415</u>			<u>45</u>	<u>arrive → unload → depart</u>
<u>060</u>	<u>1415</u>	<u>1430</u>			<u>15</u>	<u>return to shop</u>
<u>042</u>	<u>1430</u>	<u>1500</u>			<u>30</u>	<u>post trip / paperwork</u>

Customer's signature verifies arrival and departure times and authorizes any demurrage charges to be billed by Clean Harbors when applicable as outlined in your quote or contract.

Customer's Signature:	Date:
Driver's Signature: <u>Brian Goble</u>	Date: <u>12/19/2014</u>

Site address
SAME

WORK ORDER NO. 14032953
TRAIL #2

DOCUMENT NO. 859029

STRAIGHT BILL OF LADING

TRANSPORTER 1 CLEVIN HARBORS VEHICLE ID # 4058
 EPA ID # MHD 039322250 TRANS. 1 PHONE 781 792 5000
 TRANSPORTER 2 _____ VEHICLE ID # _____
 EPA ID # _____ TRANS. 2 PHONE _____

DESIGNATED FACILITY <u>GLOBAL COMPANIES LLC ALBANY</u>			SHIPPER <u>MAXON HOLDINGS LLC</u>		
FACILITY EPA ID # <u>NYS 093248698</u>			SHIPPER EPA ID # <u>CLEOB</u>		
ADDRESS <u>50 Church Street</u>			ADDRESS <u>301 WOTT St.</u>		
CITY <u>ALBANY</u>	STATE <u>NY</u>	ZIP <u>12202</u>	CITY <u>Schenectady</u>	STATE <u>NY</u>	ZIP <u>12305</u>
CONTAINERS NO. & SIZE	TYPE	HM	DESCRIPTION OF MATERIALS	TOTAL QUANTITY	UNIT WT/VOL
<u>1/3250</u>	<u>TT</u>		<u>A. UN 1268 Red KLEUM Dir to Antec NOS (Fuel oil water)</u>	<u>EST 1050</u>	<u>G</u>
			B.		
			C.		
			D.		
			E. <u>SPILL #1407234</u>		
			F.		
			G.		
			H.		
SPECIAL HANDLING INSTRUCTIONS <u>PO # W140519801</u> <u>OFN - MAXON Holdings</u> <u>- GLOBAL PROFILE # 610114008</u>					

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

SHIPPER	PRINT <u>JAMIE KENT</u>	SIGN <u>Jamie Kent</u>	DATE <u>12/18/14</u>
TRANSPORTER 1	PRINT <u>Brian Goble</u>	SIGN <u>Brian Goble</u>	DATE <u>12/19/14</u>
TRANSPORTER 2	PRINT	SIGN	DATE
RECEIVED BY	PRINT <u>Nicholas Colaneri</u>	SIGN <u>Nicholas Colaneri</u>	DATE <u>12/19/14</u>

3

Clean Harbors

ENVIRONMENTAL SERVICES®

5.5



Page # 1 of 1

Bulk Load Worksheet

1-800-444-4244

Run #:	Sales Order #: <u>1403295524</u>	Tractor #: <u>SR-5799</u>	Trailer #:
Job Date: <u>12/2/14</u>	Customer / Generator Name: <u>MAXON Holdings UC</u>		
Expected Arrival Time:	Address: <u>301 Nott St Schenecady</u>		
Start Odometer:	Manifest #: <u>859012</u>	Gallons/ Pounds/Tons:	
End Odometer:	Container Drop: #	#	#
Employee ID#: <u>074082</u>	Container Pick Up: #	#	#
Driver Name: <u>Dave Harvey</u>	Total Number of Liners Used:		

Please Use Military Hrs for Start/End Times

Activity Code	Start Time	End Time	Reason Code	Hours (H)	Minutes (M)	Comments
				1	30	TRAVEL TO CUSTOMER SITE
<u>017</u>	<u>1200</u>	<u>1330</u>		1	30	ARRIVE/DEPART CUSTOMER SITE
<u>079</u>	<u>1330</u>	<u>1500</u>			30	TRAVEL TO DESTINATION FACILITY
<u>082</u>	<u>1500</u>	<u>1530</u>		1	30	ARRIVE/DEPART DESTINATION FACILITY
<u>083</u>	<u>1530</u>	<u>1630</u>			15	RETURN TO DOMICILE
<u>060</u>	<u>1630</u>	<u>1645</u>			45	POST TRIP INSPECTION
<u>042</u>	<u>1645</u>	<u>1730</u>				

Customer's signature verifies arrival and departure times and authorizes any demurrage charges to be billed by Clean Harbors when applicable as outlined in your quote or contract.

Customer's Signature: Dave Harvey

Date: 12/2/14

WORK ORDER NO. 1403295524
TASK#2

DOCUMENT NO. 859012

STRAIGHT BILL OF LADING

TRANSPORTER 1 CLEAV HARBORS ENVIRONMENTAL VEHICLE ID # _____

EPA ID # MAD 039322250 TRANS. 1 PHONE _____

TRANSPORTER 2 _____ VEHICLE ID # _____

EPA ID # _____ TRANS. 2 PHONE _____

DESIGNATED FACILITY <u>GLOBAL COMPANIES LLC - ALBANY TERMINAL</u>			SHIPPER <u>MAXON HOLDINGS LLC</u>		
FACILITY EPA ID # <u>NY0093248698</u>			SHIPPER EPA ID # <u>PENDING</u>		
ADDRESS <u>50 Church Street</u>			ADDRESS <u>301 NOTT ST</u>		
CITY <u>ALBANY</u>		STATE <u>NY</u>	ZIP <u>12202</u>	CITY <u>Schenenady</u>	
		STATE <u>NY</u>	ZIP <u>12305</u>		
CONTAINERS NO. & SIZE	TYPE	HM	DESCRIPTION OF MATERIALS	TOTAL QUANTITY	UNIT WT/VOL
<u>1-3250G</u>	<u>TT</u>		<u>A. UN 1268, PETROLEUM DISTILLATES, NOS, (Fuel oil/water)</u>	<u>3025</u>	<u>G</u>
			<u>B. P6 #1</u>		
			C.		
			D.		
			E.		
			F.		
			G.		
			H.		
SPECIAL HANDLING INSTRUCTIONS <u>- PO # 140519801</u> <u>GLOBAL PROFILE # 610114008</u> <u>GEU - MAXON Holdings</u>					

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

SHIPPER	PRINT <u>Austin DiSienna</u>	SIGN <u>Austin DiSienna</u>	DATE <u>12/2/17</u>
TRANSPORTER 1	PRINT <u>Dave Harvey</u>	SIGN <u>Dave Harvey</u>	DATE <u>12/2/17</u>
TRANSPORTER 2	PRINT	SIGN	DATE
RECEIVED BY	PRINT <u>William Callender</u>	SIGN <u>William Callender</u>	DATE <u>12.2.17</u>

1

BO 2 170714A

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone (888)888-7464	4. Waste Tracking Number 00716	
5. Generator's Name and Mailing Address Maxon Alco Holdings 695 Rotterdam Industrial Park Generator's Phone: 518 356 4446 Schenectady NY 12306			Generator's Site Address (if different than mailing address) ALCO Site, 301 Nott Street Schenectady, NY 12305			
6. Transporter 1 Company Name Precision Industrial Maint, Inc		518 346-5800		U.S. EPA ID Number NY0001031814		
7. Transporter 2 Company Name Clean Venture, Inc		908 355-5800		U.S. EPA ID Number NJ0000027193		
8. Designated Facility Name and Site Address Cycle Chem, Inc 217 South First Street Elizabeth NJ 07208 Facility's Phone: (908) 355-5800			U.S. EPA ID Number NJ0002200046			
GENERATOR	9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	
			No.	Type	12. Unit Wt./Vol.	
	1. Non RCRA Non DOT Regulated Liquid (water w/trace petroleum)		002	TP	3200	P
	2.					
	3.					
4.						
13. Special Handling Instructions and Additional Information		NYSDEC#4A265 Trans #1 Truck # _____				
1 SEE PROFILE 2x 275g (water w/trace petroleum) totes		3				
2.		4				
972476-rom002-01						
14. 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.						
Generator's/Offero's Printed/Typed Name William Verheyden (Agent for Generator)				Signature [Signature]		
				Month Day Year 12 08 14		
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
16. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name William Verheyden		Signature [Signature]		Month Day Year 12 08 14		
Transporter 2 Printed/Typed Name Nancy O'Rourke		Signature [Signature]		Month Day Year 12 18 14		
17. Discrepancy						
17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number: _____						
17b. Alternate Facility (or Generator)			U.S. EPA ID Number			
Facility's Phone: _____						
17c. Signature of Alternate Facility (or Generator)				Month Day Year		
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name Kathyana Ronquillo		Signature [Signature]		Month Day Year 12 29 14		

BOL 170713A

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number
N/A

2. Page 1 of
1

3. Emergency Response Phone
(888)888-7464

4. Waste Tracking Number
00716

5. Generator's Name and Mailing Address

Maxon Alco Holdings
695 Rotterdam Industrial Park

Generator's Phone: 518 356-4445

Schenectady NY 12306

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

ALCO Site, 301 Nott Street
Schenectady, NY 12305

6. Transporter 1 Company Name

Precision Industrial Maint., Inc.

(518) 346-5800

U.S. EPA ID Number

NY0001031814

7. Transporter 2 Company Name

Clean Venture, Inc.

(908) 355-5800

U.S. EPA ID Number

NJ0000027193

8. Designated Facility Name and Site Address

Cycle Chem, Inc
217 South First Street

Facility's Phone: (908) 355-5800

Elizabeth NJ 07206

U.S. EPA ID Number

NJD002200046

9. Waste Shipping Name and Description

1. Non RCRA Non DOT Regulated Liquid
(water w/trace petroleum)

10. Containers

No. Type

002 TP

11. Total Quantity

3000

12. Unit Wt./Vol.

P

State Codes

N018

D72

13. Special Handling Instructions and Additional Information

1. SEE PROFILE 2 notes
(water w/trace petroleum)

NYSDEC#4A285 Trans #1 Truck #

972476 - Rem 002-01

14. 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.

Generator's/Offoror's Printed/Typed Name

Signature

Month Day Year

William Verhaeyden (Agent for Generator)

William Verhaeyden

12 | 18 | 14

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

William Verhaeyden

William Verhaeyden

12 | 18 | 14

Transporter 2 Printed/Typed Name

Signature

Month Day Year

MAURO DOMINIC

MAURO DOMINIC

12 | 18 | 14

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

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

Printed/Typed Name

Signature

Month Day Year

Kathyana Ponquillo

Kathyana Ponquillo

12 | 24 | 14

BOL 17172414

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

N/A

2. Page 1 of 1

3. Emergency Response Phone

(888)888-7464

4. Waste Tracking Number

00609

5. Generator's Name and Mailing Address

Maxon Alco Holdings
695 Rotterdam Industrial Park

Generator's Phone: 518 356 4445

Schenectady NY 12306

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

ALCO Site, 301 Nott Street
Schenectady, NY 12305

6. Transporter 1 Company Name

Precision Industrial Maint., Inc.

(518) 346-5800

U.S. EPA ID Number

NY0001031814

U.S. EPA ID Number

8. Designated Facility Name and Site Address

Clean Venture, Inc.

(908) 355-5800

U.S. EPA ID Number

NJ0000027193

U.S. EPA ID Number

Facility's Phone: (908) 355-5800

Cycle Chem, Inc
217 South First Street
Elizabeth NJ 07206

NJD002200046

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

State Codes

HM

1. Non RCRA Non DOT Regulated Sludge
(oily tank bottom sludge)

003

DM

600

P

N012

ID72

2.

3.

4.

13. Special Handling Instructions and Additional Information

1. SEE PROFILE (oily tank bottom sludge)
2. (JXSS)

PC042

3.
4.

NYSDEC#4A285 Trans #1 Truck # Rock IV

978476

14. 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.

Generator's/Offor's Printed/Typed Name

Agent for Kevin Rizzo

Signature

Agent for Kevin Rizzo

Month Day Year

1 20 15

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Kevin Rizzo

Signature

Kevin Rizzo

Month Day Year

1 20 15

Transporter 2 Printed/Typed Name

Damon Harley

Signature

Damon Harley

Month Day Year

1 26 15

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

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

Printed/Typed Name

Kevin Rizzo

Signature

Kevin Rizzo

Month Day Year

8 1 20 15

PRECISION
 Industrial Maintenance, Inc
 1710 Erie Boulevard
 Schenectady, NY 12308

Phone # 518-346-5800
 Fax # 518-346-6077

www.pim-inc.com

Invoice

Date	Invoice #
9/9/2015	14115

Bill To:	Site Address
----------	--------------

Rifenburg Contracting Corp.
 1175 Hoosick Road
 Troy, NY 12180

Alco holdings
 301 Nott St
 Schenectady, NY 12308
 Albany, NY

P.O. No	Terms	Rep	Job #	
	Net 30	SK	15-0719	
Description	Quantity	Rate	Amount	
9/8/15 Labor and Equipment to Vacuum 2 tanks found on-site-lump sum	1	875.00	875.00	
Disposal of 1 -275 gallon tote of oil water sludge	1	525.00	525.00	
Tote 275 Gallon	1	250.00	250.00	
9/9/15 Labor, Equipment and Materials to clean 2 tanks- lump sum	1	500.00	500.00	

Job# 11410
 BI 9000 cc 9906-A
 CAT SSS
 Rvd By SSS Date 10/14/15
 PM BBB Date 10/16/15
 \$\$ 2,150-
 Buried Tank Condents

(T+M) REB24

A 1 1/2% per month late charge to be assessed on past due amounts over 30 days.	Subtotal	\$2,150.00
	Sales Tax	\$0.00
	Total	\$2,150.00
	Payments/Credits	\$0.00
	Balance Due	\$2,150.00

Due Date
10/9/2015

BDL180425A

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

N/A

2. Page 1 of 1

3. Emergency Response Phone

(888) 808-7464

4. Waste Tracking Number

00719

5. Generator's Name and Mailing Address

Maxon Alco Holdings
695 Rotterdam Industrial Park

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

ALCO Site, 301 Nott Street
Schenectady, NY 12305

Generator's Phone: 518-356-4445

Schenectady NY 12308

U.S. EPA ID Number

8. Transporter 1 Company Name

Precision Industrial Maint., Inc.

(518) 346-5800

U.S. EPA ID Number NY 0001031814

7. Transporter 2 Company Name

Clean Venture, Inc

(908) 355-5800

U.S. EPA ID Number NJ 10000027193

8. Designated Facility Name and Site Address

Cycle Chem, Inc
217 South First Street

Facility's Phone: (908) 355-5800

Elizabeth NJ 07206

U.S. EPA ID Number NJ 10002200046

9. Waste Shipping Name and Description

1. Non RCRA Non DOT Regulated Liquid
(water w/trace petroleum)

10. Containers

No.

Type

11. Total Quantity

12. Unit Wt./Vol.

01

TP

1600

↓

State Codes

N018

1072

13. Special Handling Instructions and Additional Information

1. SEE PROFILE
(water w/trace petroleum)

Note 3

NYSDEC#4A285 Trans #1 Truck # 069

Removal - 1

4.

972476

14. 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/labelled, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Generator's/Offereor's Printed/Typed Name

Asst for Kevin Brown

Signature

[Signature]

Month Day Year

9/18/18

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Kevin Brown

Signature

[Signature]

Month Day Year

9/18/18

Transporter 2 Printed/Typed Name

Francesca Hughes

Signature

[Signature]

Month Day Year

9/18/18

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

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

Printed/Typed Name

Alicia Gibson

Signature

[Signature]

Month Day Year

09/25/18

PRECISION

Industrial Maintenance, Inc

1710 Erie Boulevard
Schenectady, NY 12308

Phone # 518-346-5800 Fax # 518-346-6077


www.pim-inc.com

Invoice

Date	Invoice #
8/18/2015	13339

Bill To	Site Address
Rifenburg Contracting Corp. 1175 Hoosick Road Troy, NY 12180	Alco holdings 301 Nott St Schenectady, NY 12308 Albany, NY

P.O. No.	Terms	Rep	Job #	
	Net 30	SK	15-0719	
Description	Quantity	Rate	Amount	
8/17/15 Provide vacuum truck and operator to vacuum oil/water from (2) UST tanks Vacuum Truck & Operator/hr	4	175.00	700.00	
8/18/15 Provide Labor and materials to clean (2) excavated UST tanks - lump sum	1	350.00	350.00	
8/25/15 Offload oil/water from 8/17 to permitted disposal facility Vacuum Truck & Operator/hr	3	175.00	525.00	
Disposal of oil/water (1308 gallons)	1,308	0.85	1,111.80	

 Job# 11410
 BI 9000 CC 9904-B
 CAT 5
 Rvd By SS Date 9/25/15
 PM BB Date 9/30/15
 \$\$ 2,686.80
IRM Tank Removal

REQ #24

A 1 1/2% per month late charge to be assessed on past due amounts over 30 days.	Subtotal	\$2,686.80
	Sales Tax	\$0.00
	Total	\$2,686.80
	Payments/Credits	\$0.00
	Balance Due	\$2,686.80

Due Date
9/17/2015

STRAIGHT BILL OF LADING—ORIGINAL—NOT NEGOTIABLE

00609

SHIPPER NO. _____

CARRIER NO. 4A-285

DATE 8/25/15

Precision Industrial Maint., Inc.

CARRIER		SCAC	
TO CONSIGNEE		FROM SHIPPER	
STREET		STREET	
ESTINATION		ORIGIN	
ROUTE		VEHICLE NUMBER	
STATE		STATE	
ZIP		ZIP	
U.S. DOT Hazmat Reg. No.		U.S. DOT Hazmat Reg. No.	

TO CONSIGNEE: EPS of Vermont, Inc
 40 Hamilton Lane
 Albany NY 12077

FROM SHIPPER: ALCO Site
 ALCO Site, 301 Nott Street
 Schenectady NY 12305

ROUTE: **VIA BEST**

VEHICLE NUMBER: 020

Number and Type of Packages	HM	Description of Articles	Total Quantity (mass, volume, or activity)	Weight (subject to correction)	Class or Rate
001	TT	Non RCRA Non DOT Regulated Liquid, n.o.s. (oil contaminated water) "For Recycling"	1302	G	

Received: EPS of VT Date: 8/25/15
 X: [Signature]

Permit COD to: Address: City: State: Zip:	Subject to Section 7 of conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.	COD AMT: \$ _____	COD FEE: Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> \$ _____
NOTE: Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____	(Signature of Consignor)	TOTAL CHARGES: \$ _____	FREIGHT CHARGES: <input type="checkbox"/> Prepaid <input type="checkbox"/> Collect

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request; and all applicable state and federal regulations; the Property described above, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said company (the word company being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to delivery at said destination, if on its route, or otherwise deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said Property over all or any portion of said route to destination and as to each party at any time interested in all or any of said Property that every service to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

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

SHIPPER: <u>ALCO Site</u>	CARRIER: <u>Precision Industrial Maint., Inc.</u>
BY: <u>[Signature]</u>	PER: <u>M. J. Pukewitz</u>
	DATE: <u>8/25/15</u>

EMERGENCY RESPONSE TELEPHONE NUMBER: 888 888-7464	OFFEROR'S NAME OR ERI CONTRACT NUMBER:
---	--

Nathan J. Shaffer

From: Bomba, Paul A <bombap@cleanharbors.com>
Sent: Tuesday, September 06, 2016 3:07 PM
To: Nathan J. Shaffer
Cc: Andrew Barber
Subject: RE: ALCO - Tank Cleaning Disposal Receipts
Attachments: Maxon Alco BOL.pdf; Maxon Alco Worksheet.pdf

Nathan,

On 7/27/16, at Maxon Alco Holdings site, located at 301 Nott Street, Schenectady, NY, CHES performed the following on a 500 gallon steel tank:

CHES crews will set up the decon area as required, place poly sheeting around the space to be entered, and properly cordon off the site to prohibit unauthorized access. Prior to execution, our CHES crew will communicate with your on site representatives to ensure site conditions are as expected, contents of the tank are as discussed, and any system lines are blanked.

After the appropriate lockout and tagouts are performed, field crews will complete the following:

- * open tank, perform appropriate monitoring and ventilation procedures tank as required
- * Cut access hole in tank.
- * Vacuum and hot water cut tank contents.
- * perform a final hot water wash down and decon of tank.
- * transfer rinsate and waste solids to drums or vacuum unit
- * remove blanking and lockout/tagout
- * manifest and label waste
- * Transport for disposal to CHES of Bristol, CT.

Waste generated from the tank cleaning was transported to Clean Harbors of Bristol, CT for disposal.

Associated BOL and worksheet attached.

Please feel free to contact me if you have any questions.

Thanks
Paul

Safety Starts with Me: Live It 3-6-5

Paul A. Bomba
Field Service Branch Manager
Clean Harbors Environmental Services
32 Bask Road
Glenmont, NY 12077
Office: 518-434-0149
Mobile: 845-642-8259
Fax: 518-434-9118
Email: bombap@cleanharbors.com

Site Address: SAME

SC PPW 7/20/2015

WORK ORDER NO. ~~NY 1602382302-002~~

DOCUMENT NO. 1176363

STRAIGHT BILL OF LADING

TRANSPORTER 1 Clean Harbors Environmental Service, Inc. VEHICLE ID # SR10579
 EPA ID # MAD039322250 TRANS. 1 PHONE (781) 792-5000
 TRANSPORTER 2 _____ VEHICLE ID # _____
 EPA ID # _____ TRANS. 2 PHONE _____

DESIGNATED FACILITY Clean Harbors of Connecticut Inc			SHIPPER Maxon Alco Holdings Llc		
FACILITY EPA ID # CTD000604488			SHIPPER EPA ID # CESOG		
ADDRESS 51 Broderick Road			ADDRESS 301 Nott St		
CITY Bristol		STATE CT	ZIP 06010	CITY Schenectady	
		STATE NY	ZIP 12305		
CONTAINERS NO. & SIZE	TYPE	HM	DESCRIPTION OF MATERIALS	TOTAL QUANTITY	UNIT WT/VOL
1x3250	TT		A. NON HAZARDOUS, NON D.O.T. REGULATED MATERIAL, (DIESEL SLUDGE)	EST 5000	P
			B.		
			C.		
			D.		
			E.		
			F.		
			G.		
			H.		
SPECIAL HANDLING INSTRUCTIONS A.1246541B EMERGENCY PHONE #: (800) 463-3718 GENERATOR: Maxon Alco Holdings Llc					

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

SHIPPER <u>BRIAN EGAN (AGENT FOR)</u>	PRINT	SIGN <u>[Signature]</u>	DATE <u>7/27/16</u>
TRANSPORTER 1 <u>STEVEN COOPER</u>	PRINT	SIGN <u>[Signature]</u>	DATE <u>7/27/16</u>
TRANSPORTER 2 _____	PRINT	SIGN _____	DATE _____
RECEIVED BY <u>CLAYTON DAIGLE</u>	PRINT	SIGN <u>[Signature]</u>	DATE <u>27 Jun 16</u>

1

Payment Terms

By signing this Daily Work Sheet, Customer acknowledges receipt of the labor, equipment and materials described herein, and agrees to pay Clean Harbors for same in accordance with Clean Harbors' published Rate Schedule. Customer's obligation to pay the amounts due pursuant to this Daily Work Sheet shall not be conditioned upon or limited by the types, amounts or availability of insurance coverage.

Clean Harbors' standard terms of payment are net fifteen (15) days from the date of invoice. Interest shall accrue at the rate of one and one half (1.5%) percent per month, or at the maximum rate allowed by law, after fifteen (15) days. In the event that legal or other action is required to collect unpaid balances or invoices, Customer agrees to pay all costs of collection, including reasonable attorneys' fees, which may be incurred by Clean Harbors. "Legal or other action" as used above shall include bankruptcy and insolvency proceedings.

Customer hereby assigns to Clean Harbors all rights to any insurance payments that Customer may be entitled to receive to pay for the labor, equipment or materials provided under this Daily Work Sheet and hereby authorizes its insurance company or agent to pay Clean Harbors directly.

Customer agrees that Clean Harbors shall not be responsible for pre-existing contamination at the job location, natural resource damage, or for incidental, consequential or special damages, including loss of use or lost profits, resulting from or arising out of the performance of services hereunder by Clean Harbors, its employees, agents and/or subcontractors.

Day & Date: Wednesday 7/27/16
 Sales Order #: 1602382302

Job Complete: Yes No (Circle One)

Job Description / Comments: LOAD SUPPLIES TRAVEL TO SITE. ARRIVED ONSITE. SET UP TO PUMP OUT AND CLEAN TANK. FINISH CLEANING TANK. SECURE SITE TRAVEL BACK TO OFFICE.

Customer: ARCADIS (MAXIDE)

PO # / COD Amount:

Billing Address:

Per Diem: Yes / No (Circle one) If yes, how many?:

Change Order Initiated: Yes / No (Circle One)

Contact: NATHAN SCHAFFER

Job Location: 301 NOTT ST
Schenectady NY

Task # / Description
Cut a
clean tank

Task Complete: Yes / No (Circle One)

Task Complete: Yes / No (Circle One)

Task Complete: Yes / No (Circle One)

Component Type

Name	Title	ID #	ST	OT	DT	ST	OT	DT	ST	OT	DT
<u>HENRY EVERETT</u>	<u>F</u>	<u>021099</u>	<u>7</u>								
<u>STEVE COOPER</u>	<u>E/O</u>	<u>2287</u>	<u>5</u>								
<u>STAN KARWAN</u>	<u>T</u>	<u>092222</u>	<u>6</u>								

SCANNED

LIQUID: Bulk / Drum

SOLID: Bulk / Drum

1176363 5000 gal
50000

Pickup / Van / Car / Crew Cab (Circle One)

1 80360

Vacuum Trailer

Tractor

Vacuum Truck, Straight

Box Truck

Guzzler / Vector (Circle One)

1 SR10579

Air Compressor, 175 CFM

Backhoe Loader 1 Yd bucket

Bobcat Loader—Mini Excavator

Rack Truck

Rolloff Truck, Straight

Pressure Washer (PSI: 3500) Hot / Cold (Circle One)

1 CH1023

Meter Type: SIRIUS/MSA

1 #3

Drum Type:

Drum Type:

Rope Type:

Degreaser Type:

Speedi Dry

Polycoated Rain Gear, 22mil

Poly Sheet, 6mil, 20ft x 100ft

Poly Bags, 6mil, per roll

Absorbent Pad (101 Grade) 100/bale

Absorbent Boom Each

Absorbent Boom Bale

Duct Tape/Roll

2 Rolls

Safety Plan

Rolloff Poly Liner

5 Gal./20 Litre Poly Drum 1H2

FLEX HOSE

(1) 4x100 4x100'

Rolloff / Intermodal / Frac Tank / Tanker (circle one)

Rolloff / Intermodal / Frac Tank / Tanker (circle one)

Colonie Landfill
OP BY CAPITAL REGION LANDFILLS
1319 Loudon Road
Cohoes, New York 12047

Weighed: Lauren T
Deposit: Lauren T
BILL TO: 868
MAXON ALCO LLC
695 ROTTERDAM INDUSTRIAL PARK
SCHENECTADY NY 12306

Vehicle ID:
Reference: TOC-14-88A
Grid: L6P2
Ship To: MAXON ALCO HOLDINGS LLC
Manifest#: 301 NOTT ST.
PO#: SCHENECTADY, NY 12305
: M

Origin: SCHENECTADY
DATE IN: 01/05/2015 TIME IN: 08:59:01
DATE OUT: 01/05/2015 TIME OUT: 09:32:10

INBOUND TICKET Number: 02-00185478

SCALE 1 GROSS WT.	76780	LB
SCALE 2 TARE WT.	32800	LB
NET WEIGHT	43980	LB

Qty	Description	Amount
21.99	CONT MATERIAL	1429.35

TICKET AMOUNT: 1429.35

X _____

Phone: (518)783-2827 Fax: (518)786-7331
Operating hours 7AM to 3PM Monday thru Friday
and Saturday 7AM thru 12PM. This is to certify
that this load contains no hazardous materials,
medical waste or liquids of any type. All loads
must be properly contained (Tied & Tarped)
All Cash, Check, and Credit Card transactions
are final.

NON-HAZARDOUS WASTE MANIFEST	1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone (888)888-7464	4. Waste Tracking Number 00452
---------------------------------	-------------------------------	-------------------	--	-----------------------------------

5. Generator's Name and Mailing Address Maxon Alco Holdings 695 Rotterdam Industrial Park Generator's Phone: 518 358-4445 Schenectady NY 12306	Generator's Site Address (if different than mailing address) ALCO Site, 301 Nott Street Schenectady, NY 12305
--	---

6. Transporter 1 Company Name Precision Industrial Maint., Inc. (518) 346-5800	U.S. EPA ID Number NY0001031814
--	------------------------------------

7. Transporter 2 Company Name	U.S. EPA ID Number
-------------------------------	--------------------

8. Designated Facility Name and Site Address Town Of Colonie Landfill 1319 New Loudon Road Cohoes NY 12047 Facility's Phone: (518) 763-2927	U.S. EPA ID Number
---	--------------------

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	State Codes
	No.	Type			
1. Non RCRA Non DOT Regulated Solid Petroleum Contaminated Flowable Fill Concrete Profile# TOC-14-088 Spill# 1408926	01	CM	8	T	
2.					
3.					
4.					

13. Special Handling Instructions and Additional Information 1. Profile# TOC-14-088 Spill# 1408926 2. Ed. WT. 3. TANK I.D. # 001 4. NYSDEC#4A285 Trans #1 Truck # 020

14. 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.

Generator's/Offero's Printed/Typed Name Peter J. Latino	Signature <i>Peter J. Latino</i>	Month 1	Day 5	Year 18
--	-------------------------------------	------------	----------	------------

15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.	Port of entry/exit: Date leaving U.S.:
--	---

16. Transporter Acknowledgment of Receipt of Materials	Signature	Month	Day	Year
Transporter 1 Printed/Typed Name <i>Monte S. Long</i>	<i>Monte S. Long</i>	1	5	18
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

17. Discrepancy	17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection
-----------------	--

17b. Alternate Facility (or Generator)	Manifest Reference Number:	U.S. EPA ID Number
--	----------------------------	--------------------

Facility's Phone:	17c. Signature of Alternate Facility (or Generator)	Month	Day	Year
-------------------	---	-------	-----	------

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a	Signature	Month	Day	Year
Printed/Typed Name <i>Ed. WT.</i>	<i>Ed. WT.</i>	1	5	18

Colonie Landfill
OP BY CAPITAL REGION LANDFILLS
1319 Loudon Road
Cohoes, New York 12047

Weighed: Lauren T
Deposit: Lauren T
BILL TO: 868
MAXON ALCO LLC
695 ROTTERDAM INDUSTRIAL PARK
SCHENECTADY NY 12306

Vehicle ID:
Reference: TOC-14-88A
Grid: L6P2
Ship To: MAXON ALCO HOLDINGS LLC
Manifest#: 301 NOTT ST.
PO#: SCHENECTADY, NY 12305
: M

Origin: SCHENECTADY
DATE IN: 01/05/2015 TIME IN: 12:26:56
DATE OUT: 01/05/2015 TIME OUT: 13:03:41

INBOUND TICKET Number: 02-00185549

SCALE 1 GROSS WT.	71520 LB
SCALE 2 TARE WT.	46300 LB
NET WEIGHT	25220 LB

Qty	Description	Amount
12.61	CONT MATERIAL	819.65

TICKET AMOUNT: 819.65

X _____

Phone: (518)783-2827 Fax: (518)786-7331
Operating hours 7AM to 3PM Monday thru Friday
and Saturday 7AM thru 12PM. This is to certify
that this load contains no hazardous materials,
medical waste or liquids of any type. All loads
must be properly contained (Tied & Tarped)
All Cash, Check, and Credit Card transactions
are final.

NON-HAZARDOUS WASTE MANIFEST

Generator ID Number

2. Page 1 of 1

3. Emergency Response Phone

4. Waste Tracking Number

1

(888)888-7464

00462

5. Generator's Name and Mailing Address

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

Maxon Alco Holdings
695 Rotterdam Industrial Park

ALCO Site, 301 Nott Street
Schenectady, NY 12306

Generator's Phone: 518 356-4445

Schenectady NY 12306

6. Transporter 1 Company Name

Precision Industrial Maint., Inc.

(518) 346-5800

U.S. EPA ID Number

NY0001031814

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

Town Of Colonie Landfill
1319 New Loudon Road

U.S. EPA ID Number

Facility's Phone: (518) 763-2827

Cohoes NY 12047

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

State Codes

No.

Type

1.	Non RCRA Non DOT Regulated Solid Petroleum Contaminated Flowable Fill Concrete Profile# TOC-14-088 Spill# 1408926	01	CM	18	T	
2.						
3.						
4.						

13. Special Handling Instructions and Additional Information

1. Profile# TOC-14-088 Spill# 1408926
2.

SCHULTZ

3. TANK I

NYSDEC#4A285 Trans #1 Truck # 027

Jan 27 1995

14. 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.

Generator's/Offoror's Printed/Typed Name

Signature

Month Day Year

Peter J Lafare, JR

[Signature]

7 5 15

TRANSPORTER INTL

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

[Signature]

[Signature]

1 5 15

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

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

Printed/Typed Name

Signature

Month Day Year

[Signature]

1 5 15

NON-HAZARDOUS WASTE MANIFEST

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

TRUCK CON 16

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No. 097	2. Page 1 of
3. Generator's Name and Mailing Address MAYON ALCO HOLDING LLC 695 BUTTEROAK INDUSTRIAL PARK SCHENECTADY N.Y. 12095		ACCU SITE 301 NOTT STREET SCHENECTADY 12035		TOC -14-088	
4. Generator's Phone (518) 461 4883 ANDY BARBER		SITE ENVIRONMENTAL		A. State Transporter's ID 364 PERMIT 4A597	
5. Transporter 1 Company Name CONSTRUCTION CONSTRUCTION		6. US EPA ID Number		B. Transporter 1 Phone 518 4588294	
7. Transporter 2 Company Name		8. US EPA ID Number		C. State Transporter's ID	
9. Designated Facility Name and Site Address TOWN OF COLONIE LANDFILL 1319 NEW LONDON ROAD COHUES N.Y. 12041		10. US EPA ID Number		D. Transporter 2 Phone	
				E. State Facility's ID	
				F. Facility's Phone 518 783 2827	
11. WASTE DESCRIPTION			12. Containers	13. Total Quantity	14. Unit Wt./Vol.
NON RCRA NON DOT REGULATED SOIL			No.	Type	
a. PETROLEUM CONTAMINATED SOIL			001	DT	22 ESTIMATE TN
b.					
c.					
d.					
G. Additional Descriptions for Materials Listed Above 1st load flow fill concrete from spill # 1408926 TANK # 002			H. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information EMERGENCY RESPONSE PHONE 1800 424 9300					
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 Pete LaFare Jr		Signature Pete LaFare Jr		Date 1/6/15	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name Jason Bowers		Signature Jason Bowers	
18. Transporter 2 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.					
Printed/Typed Name		Signature		Date	

NON-HAZARDOUS WASTE

GENERATOR

TRANSPORTER
LANDFILL CONSTRUCTION

Colonie Landfill
OP BY CAPITAL REGION LANDFILLS
1319 Loudon Road
Colonie, New York 12047

Weighed: Lauren T
BILL TO: 868
MAXON ALCO LLC
695 ROTTERDAM INDUSTRIAL PARK
SCHENECTADY NY 12306

HAULER: Cash Customer
Vehicle ID: 900/11
Reference: TOC-14-88A
Grid: L6P2
Ship To: MAXON ALCO HOLDINGS LLC
Manifest#: 301 NOTT ST.
PO#: SCHENECTADY, NY 12305
: M

Origin: SCHENECTADY
DATE IN: 01/06/2015 TIME IN: 14:14:23
DATE OUT: 01/06/2015 TIME OUT: 14:14:23

INBOUND TICKET Number: 02-00185750

SCALE 1 GROSS WT.	64760 LB
STORED TARE WT.	28100 LB
NET WEIGHT	36660 LB

Qty	Description	Amount
18.33	CONT MATERIAL	1191.45
	TICKET AMOUNT:	1191.45

X _____

Phone: (518)733-2827 Fax: (518)786-7331
Operating hours 7AM to 3PM Monday thru Friday
and Saturday 7AM thru 12PM. This is to certify
that this load contains no hazardous materials,
medical waste or liquids of any type. All loads
must be properly contained (Tied & Tarped)
All Cash, Check, and Credit Card transactions
are final.



NON-HAZARDOUS WASTE MANIFEST

Trak Con 17

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

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No. 098	2. Page 1 of
3. Generator's Name and Mailing Address <i>Maxon Alco Holding LLC 695 Rotterdam Industrial Park Schuylkill Co NY 12305</i>		<i>AK Site 311 Nott St. 5 Acres to be sold NY 12307</i>		<i>TOC - 14-085</i>	
4. Generator's Phone () <i>461-9883</i>		<i>Andy Becker site environmental consultant</i>			
5. Transporter 1 Company Name <i>Constantine Construction</i>		6. US EPA ID Number		A. State Transporter's ID <i>24 Kent 4A-517</i>	
7. Transporter 2 Company Name		8. US EPA ID Number		B. Transporter 1 Phone <i>484-58-8295</i>	
9. Designated Facility Name and Site Address <i>Town of Cologne Landfill 1319 New London Rd Cohoes NY 12041</i>		10. US EPA ID Number		C. State Transporter's ID	
				D. Transporter 2 Phone	
				E. State Facility's ID <i>40126003300001</i>	
				F. Facility's Phone <i>518-755-2827</i>	
11. WASTE DESCRIPTION <i>Non-RCRA Non-Dot Regulated Soil</i>		12. Containers		13. Total Quantity	
		No. Type		14. Unit Wt./Vol.	
a. <i>Petroleum Contaminated Flow Fill concrete</i>		<i>001 DT</i>		<i>22 estimate TN</i>	
b.					
c.					
d.					
G. Additional Descriptions for Materials Listed Above <i>LOAD 2 Flow Fill from SPILL # 1408926 TANK # 002</i>		H. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information <i>Emergency phone 1-800-424-9300</i>					
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 <i>Pete LaFarr JR</i>		Signature <i>Pete LaFarr JR</i>		Date <i>1 9 13</i>	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name <i>ANTHONY PARENTE</i>		Signature <i>Anthony Parente</i>	
18. Transporter 2 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.		Printed/Typed Name <i>Stan</i>		Signature <i>Stan</i>	
				Date <i>01/09/13</i>	

NON-HAZARDOUS WASTE GENERATOR

TRANSPORTER FACILITY



Colonie Landfill
OP BY CAPITAL REGION LANDFILLS
1319 Loudon Road
Cohoes, New York 12047

Weighed: Lauren T
Deposit: Lauren T
BILL TO: 368
MAXON ALCO LLC
695 ROTTERDAM INDUSTRIAL PARK
SCHENECTADY NY 12306

Vehicle ID:
Reference: TOC-14-88A
Grid: L6P2
Ship To: MAXON ALCO HOLDINGS LLC
Manifest#: 301 NOTT ST.
PO#: SCHENECTADY, NY 12305
: M

Origin: SCHENECTADY
DATE IN: 01/09/2015 TIME IN: 09:50:06
DATE OUT: 01/09/2015 TIME OUT: 10:00:39

INBOUND TICKET Number: 02-00185996

SCALE 1 GROSS WT.	72600 LB
SCALE 2 TARE WT.	29440 LB
NET WEIGHT	43160 LB

Qty	Description	Amount
21.58	CONT MATERIAL	1402.70

TICKET AMOUNT: 1402.70

X _____

Phone: (518)783-2827 Fax: (518)786-7331
Operating hours 7AM to 3PM Monday thru Friday
and Saturday 7AM thru 12PM. This is to certify
that this load contains no hazardous materials,
medical waste or liquids of any type. All loads
must be properly contained (Tied & Tarped)
All Cash, Check, and Credit Card transactions
are final.

NON-HAZARDOUS WASTE MANIFEST

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

Truck Cont 16

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No. 099	2. Page 1 of
3. Generator's Name and Mailing Address <i>Maximo Aho Holding LLC 695 Rotherham Industrial Park Schenectady, NY 12305</i>		<i>Alcosite 311 Nott St Schenectady, NY 12309</i>		TOC-14-088	
4. Generator's Phone (518) <i>461-4883</i> <i>Andy Barber site environmental consultant</i>		6. US EPA ID Number		A. State Transporter's ID <i>364 Perm. # 4A-597</i>	
5. Transporter 1 Company Name <i>Constantine Construction</i>		8. US EPA ID Number		B. Transporter 1 Phone <i>518 458-8299</i>	
7. Transporter 2 Company Name		10. US EPA ID Number		C. State Transporter's ID	
9. Designated Facility Name and Site Address <i>Town of Cohoes Landfill 1319 New London Rd Cohoes, NY 12041</i>		14. Unit Wt./Vol.		E. State Facility's ID <i>401260003300001</i>	
11. WASTE DESCRIPTION <i>Non RCRA Non-Dot Regulated Soil</i>		12. Containers		F. Facility's Phone <i>518 753-2827</i>	
		No.	Type	13. Total Quantity	
a. <i>Petroleum Contaminated Flow fill concrete</i>		<i>001</i>	<i>DT</i>	<i>22 estimate</i>	<i>TN</i>
b.					
c.					
d.					
G. Additional Descriptions for Materials Listed Above <i>3rd load from (flow fill) Spill # 1408926 TANK #002</i>			H. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information <i>Emergency response phone 1-800-424-9300</i>					
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 <i>Peter J Laferr JR</i>		Signature <i>Peter J Laferr JR</i>		Date Month Day Year <i>11 19 13</i>	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name <i>Jason Bowers</i>		Signature <i>J Bowers</i>	
18. Transporter 2 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.					
Printed/Typed Name		Signature <i>[Signature]</i>		Date Month Day Year <i>01 09 15</i>	

NON-HAZARDOUS WASTE

GENERATOR

TRANSPORTER

FACILITY

Landfill Constantine

24 -
Colonie Landfill
OP BY CAPITAL REGION LANDFILLS
1319 Loudon Road
Cohoes, New York 12047

Weighed: Lauren T
BILL TO: 868
MAXON ALCO LLC
695 ROTTERDAM INDUSTRIAL PARK
SCHENECTADY NY 12306

HAULER: Cash Customer
Vehicle ID: 900/11
Reference: TOC-14-88A
Grid: L6P2
Ship To: MAXON ALCO HOLDINGS LLC
Manifest#: 301 NOTT ST.
PO#: SCHENECTADY, NY 12305
: M

Origin: SCHENECTADY
DATE IN: 01/09/2015 TIME IN: 09:58:04
DATE OUT: 01/09/2015 TIME OUT: 09:58:04

INBOUND TICKET Number: 02-00186001

SCALE 1 GROSS WT.	63240 LB
STORED TARE WT.	28100 LB
NET WEIGHT	35140 LB

Qty	Description	Amount
17.57	CONT MATERIAL	1142.05

TICKET AMOUNT: 1142.05

X _____

Phone: (518)733-2827 Fax: (518)786-7331
Operating hours 7AM to 3PM Monday thru Friday
and Saturday 7AM thru 12PM. This is to certify
that this load contains no hazardous materials,
medical waste or liquids of any type. All loads
must be properly contained (Tied & Tarped)
All Cash, Check, and Credit Card transactions
are final.

NON-HAZARDOUS WASTE MANIFEST

Truck Con

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

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No. 100	2. Page 1 of	
3. Generator's Name and Mailing Address: Maxon Air Holding LLC 695 Rotterdam Industrial Park Schenectady, NY 12305				Ako Site 311 North St. Schenectady NY 12309		TOC-14-088
4. Generator's Phone (518) 401-4853 Andy Barber site environmental consultant		5. Transporter 1 Company Name Constantine Construction		6. US EPA ID Number		A. State Transporter's ID 364 Perm + 4A-597
7. Transporter 2 Company Name		8. US EPA ID Number		B. Transporter 1 Phone 518 458-3241		C. State Transporter's ID
9. Designated Facility Name and Site Address Town of Cohoes landfill 1319 New Loudon Rd Cohoes, NY 12041		10. US EPA ID Number		D. Transporter 2 Phone		E. State Facility's ID 1401260003360001
11. WASTE DESCRIPTION Non-RCRA Non Dot Regulate Soil a. Petroleum Contaminated Flow fill concrete				12. Containers No. Type		13. Total Quantity
b.				001 DT		22 estimate TN
c.						
d.						
G. Additional Descriptions for Materials Listed Above 4th load flow fill from spill # 1408926 TANK #002				H. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information Emergency phone 1-800-424-9300						
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 Peter Lafarr JR				Signature Peter Lafarr JR		Date 1 9 15
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name Anthony Parente		Date 1 9 15
18. Transporter 2 Acknowledgement of Receipt of Materials				Printed/Typed Name		Date
19. Discrepancy Indication Space				Signature		Date
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 BOB KENNEDY		Date 1 9 15

NON-HAZARDOUS WASTE

GENERATOR

TRANSPORTER

FACILITY

Colonie Landfill
OP BY CAPITAL REGION LANDFILLS
1319 Loudon Road
Cohoes, New York 12047

Weighed: Lauren T
BILL TO: 868
MAXON ALCO LLC
695 ROTTERDAM INDUSTRIAL PARK
SCHENECTADY NY 12306

HAULER: Cash Customer
Vehicle ID: 900/2
Reference: TOC-14-88A
Grid: L6P2
Ship To: MAXON ALCO HOLDINGS LLC
Manifest#: 301 NOTT ST.
PO#: SCHENECTADY, NY 12305
: M

Origin: SCHENECTADY
DATE IN: 01/09/2015 TIME IN: 11:12:30
DATE OUT: 01/09/2015 TIME OUT: 11:12:30

INBOUND TICKET Number: 02-00186033

SCALE 1 GROSS WT.	71760 LB
STORED TARE WT.	29440 LB
NET WEIGHT	42320 LB

Qty	Description	Amount
21.16	CONT MATERIAL	1375.40

TICKET AMOUNT: 1375.40

X _____

Phone: (518)783-2827 Fax: (518)786-7331
Operating hours 7AM to 3PM Monday thru Friday
and Saturday 7AM thru 12PM. This is to certify
that this load contains no hazardous materials,
medical waste or liquids of any type. All loads
must be properly contained (Tied & Taped)
All Cash, Check, and Credit Card transactions
are final.

NON-HAZARDOUS WASTE MANIFEST

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

Truck Can 16

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No. 101	2. Page 1 of	
3. Generator's Name and Mailing Address Maton ACP Holding, LLC 695 Rotterdam Industrial Park Schroonkill, NY 12305		Alco Site 311 Wall St Schroonkill, NY 12309		TOC-14-088		
4. Generator's Phone 518-461-4683 Andy Barber Site Environmental Consultant		6. US EPA ID Number		A. State Transporter's ID 364 Perm T-1A-59		
5. Transporter 1 Company Name Constantine Construction		8. US EPA ID Number		B. Transporter 1 Phone 518-458-8294		
7. Transporter 2 Company Name		10. US EPA ID Number		C. State Transporter's ID		
9. Designated Facility Name and Site Address Town of Colonie Landfill 1319 New Loudon RD Cohoes, NY 12041				D. Transporter 2 Phone		
				E. State Facility's ID 401260003300001		
				F. Facility's Phone 518-763-2827		
11. WASTE DESCRIPTION NON RCRA Non-DOT Regulated Soil			12. Containers		13. Total Quantity	14. Unit Wt./Vol.
			No.	Type		
a.						
b. Petroleum Contaminated Flow Fill concrete			001	DT	22 est.	TN
c.						
d.						
G. Additional Descriptions for Materials Listed Above 5th load Flow Fill from SPILL # 1408926 TANK #002				H. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information Emergency response phone 1-800-424-9300						
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 Pete Lafare Jr				Signature <i>[Signature]</i>		Date 1 9 15
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name Jason Brown		Date 1 9 15
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature <i>[Signature]</i>		Date
19. Discrepancy Indication Space				Printed/Typed Name BOB KENNEDY		Date 1 9 15
20. Facility Owner or Operator; Certification of receipt of the waste materials covered by this manifest, except as noted in item 19.				Signature <i>[Signature]</i>		Date

NON-HAZARDOUS WASTE GENERATOR

TRANSPORTER FACILITY

Colonie Landfill
OP BY CAPITAL REGION LANDFILLS
1319 Loudon Road
Cohoes, New York 12047

Weighed: Lauren T
BILL TO: 868
MAXON ALCO LLC
695 ROTTERDAM INDUSTRIAL PARK
SCHENECTADY NY 12306

HAULER: Cash Customer
Vehicle ID: 900/11
Reference: TOC-14-88A
Grid: L6P2
Ship To: MAXON ALCO HOLDINGS LLC
Manifest#: 301 NOTT ST.
PO#: SCHENECTADY, NY 12305
: M

Origin: SCHENECTADY
DATE IN: 01/09/2015 TIME IN: 11:14:30
DATE OUT: 01/09/2015 TIME OUT: 11:14:30

INBOUND TICKET Number: 02-00186034

SCALE 1 GROSS WT.	71920 LB
STORED TARE WT.	28100 LB
NET WEIGHT	43820 LB

Qty	Description	Amount
21.91	CONT MATERIAL	1424.15
	TICKET AMOUNT:	1424.15

X _____

Phone: (518)783-2827 Fax: (518)786-7331
Operating hours 7AM to 3PM Monday thru Friday
and Saturday 7AM thru 12PM. This is to certify
that this load contains no hazardous materials,
medical waste or liquids of any type. All loads
must be properly contained (Tied & Tarped)
All Cash, Check, and Credit Card transactions
are final.

NON-HAZARDOUS WASTE MANIFEST

CON 17

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

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No. 102	2. Page 1 of		
3. Generator's Name and Mailing Address MAXON ALCO HOLDING LLC 695 ROTTERDAM INDUSTRIAL PARK SCHENECTADY NY 12305 Generator's Phone (518) 461-4883				ALCO SITE 311 NOTT ST. SCHENECTADY NY 12309 ANDY BARBER SITE ENVIRONMENTAL CONSULTANT		TOC-14-088	
5. Transporter 1 Company Name CONSTANTINE CONST.		6. US EPA ID Number		A. State Transporter's ID 364 PERMIT 4A597		B. Transporter 1 Phone 518 458 8294	
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 TOWN of COLONIE LANDFILL 1319 NEW LOUDON Rd. COLONIE NY 12041		10. US EPA ID Number		E. State Facility's ID 401260003300001		F. Facility's Phone 518 783 2827	
11. WASTE DESCRIPTION NON-RCRA Non DOT REGULATED SOLID				12. Containers		13. Total Quantity	
a. PETROLEUM CONTAMINATED FLOW FILL CONCRETE				No. 001 Type DT		22 ESTIMATE TN	
b.							
c.							
d.							
G. Additional Descriptions for Materials Listed Above 6 th load flow fill from spill # 140 8926 TANK #002				H. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information Emergency Phone 1-800-424-9300							
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 Pete Lafore Jr				Signature <i>[Signature]</i>		Date 1 9 15	
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name ANTHONY PARENTE		Signature <i>[Signature]</i>	
18. Transporter 2 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.							
Printed/Typed Name <i>[Signature]</i>				Signature <i>[Signature]</i>		Date 0 9 15	

NON-HAZARDOUS WASTE GENERATOR

Colonie Landfill
OP BY CAPITAL REGION LANDFILLS
1319 Loudon Road
Cohoes, New York 12047

Weighed: Lauren T
BILL TO: 868
MAXON ALCO LLC
695 ROTTERDAM INDUSTRIAL PARK
SCHENECTADY NY 12306

HAULER: Cash Customer
Vehicle ID: 900/2
Reference: TOC-14-88A
Grid: L6P2
Ship To: MAXON ALCO HOLDINGS LLC
Manifest#: 301 NOTT ST.
PO#: SCHENECTADY, NY 12305
: M

Origin: SCHENECTADY
DATE IN: 01/09/2015 TIME IN: 12:22:55
DATE OUT: 01/09/2015 TIME OUT: 12:22:55

INBOUND TICKET Number: 02-00186063

SCALE 1 GROSS WT.	69040 LB
STORED TARE WT.	29440 LB
NET WEIGHT	39600 LB

Qty	Description	Amount
19.80	CONT MATERIAL	1287.00

TICKET AMOUNT: 1287.00

X _____

Phone: (518)783-2827 Fax: (518)786-7331
Operating hours 7AM to 3PM Monday thru Friday
and Saturday 7AM thru 12PM. This is to certify
that this load contains no hazardous materials,
medical waste or liquids of any type. All loads
must be properly contained (Tied & Tarped)
All Cash, Check, and Credit Card transactions
are final.



NON-HAZARDOUS WASTE MANIFEST

Truck Cont 16

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

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No. 103	2. Page 1 of
3. Generator's Name and Mailing Address <i>Maxon Alvo Holdings LLC 145 Rotterdam Industrial Park Schuylkill Co NY 12305</i>		4. Generator's Phone <i>(518) 461-4883 Andy Barber, site environmental consultant</i>		<i>ALVO SITE 311 North St Schuylkill Co NY 12305 JDC-14-088</i>
5. Transporter 1 Company Name <i>Constantine Construction</i>	6. US EPA ID Number	A. State Transporter's ID <i>261 Permit 4A-517</i>		
7. Transporter 2 Company Name	8. US EPA ID Number	B. Transporter 1 Phone <i>518 458-8274</i>		
9. Designated Facility Name and Site/Address <i>Town of Colosse Landfill 1319 New London Rd. Colosse, NY 12041</i>		10. US EPA ID Number	E. State Facility's ID <i>401260003300001</i>	
			F. Facility's Phone <i>518 783-2827</i>	
11. WASTE DESCRIPTION <i>Non RCRA Non-DOT Regulated Soil</i>		12. Containers No.	13. Total Quantity	14. Unit Wt./Vol.
a. <i>Petroleum Contaminated Flow Fill Concrete</i>		<i>001</i>	<i>DT</i>	<i>22 estimate TN</i>
b.				
c.				
d.				
G. Additional Descriptions for Materials Listed Above <i>7th load flow fill from SPill # 1408926 TANK #002</i>		H. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information <i>Emergency response phone 1-800-424-9300</i>				
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 <i>Pete Laferrere</i>		Signature <i>[Signature]</i>		Date <i>11/9/15</i>
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name <i>Jason Bowers</i>		Signature <i>[Signature]</i>
18. Transporter 2 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.				
Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Date <i>11/9/15</i>

NON-HAZARDOUS WASTE GENERATOR

TRANSPORTER FACILITY

Colonie Landfill
OP BY CAPITAL REGION LANDFILLS
1319 Loudon Road
Cohoes, New York 12047

Weighed: Lauren T
BILL TO: 868
MAXON ALCO LLC
695 ROTTERDAM INDUSTRIAL PARK
SCHENECTADY NY 12306

HAULER: Cash Customer
Vehicle ID: 900/11
Reference: TOC-14-88A
Grid: L6P2
Ship To: MAXON ALCO HOLDINGS LLC
Manifest#: 301 NOTT ST.
PO#: SCHENECTADY, NY 12305
: M

Origin: SCHENECTADY
DATE IN: 01/09/2015 TIME IN: 12:27:51
DATE OUT: 01/09/2015 TIME OUT: 12:27:51

INBOUND TICKET Number: 02-00186065

SCALE 1 GROSS WT.	68040 LB
STORED TARE WT.	28100 LB
NET WEIGHT	39940 LB

Qty	Description	Amount
19.97	CONT MATERIAL	1298.05

TICKET AMOUNT: 1298.05

X_____

Phone: (518)783-2827 Fax: (518)786-7331
Operating hours 7AM to 3PM Monday thru Friday
and Saturday 7AM thru 12PM. This is to certify
that this load contains no hazardous materials,
medical waste or liquids of any type. All loads
must be properly contained (Tied & Tarped)
All Cash, Check, and Credit Card transactions
are final.

NON-HAZARDOUS WASTE MANIFEST

CON 17

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

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		Manifest Document No. 104	2. Page 1 of
3. Generator's Name and Mailing Address MAXON Alco Holding LLC 695 ROTTERDAM INDUSTRIAL PARK SCHENECTADY NY 12305		Alco SITE 311 NOTT ST. SCHENECTADY NY 12309		TOC-14-088	
4. Generator's Phone (518) 461-4883 ANDY BARBER		SITE ENVIRONMENTAL CONSULTANT			
5. Transporter 1 Company Name CONSTANTINE CONSTRUCTION		6. US EPA ID Number		A. State Transporter's ID 364 PERMIT 4A597	
7. Transporter 2 Company Name		8. US EPA ID Number		B. Transporter 1 Phone 518 458 8274	
9. Designated Facility Name and Site Address TOWN of COLONIE LANDFILL 1319 NEW LOANPON Rd. COHOES NY 12041		10. US EPA ID Number		C. State Transporter's ID	
				D. Transporter 2 Phone	
				E. State Facility's ID 401260003300001	
				F. Facility's Phone 518 783 2827	
11. WASTE DESCRIPTION NON-RCRA NON DOT REGULATED SOIL			12. Containers		13. Total Quantity
			No.	Type	14. Unit Wt./Vol.
a. PETROLEUM CONTAMINATED FLOW FILL CONCRETE			001	DT	22 ESTIMATE TN
b.					
c.					
d.					
G. Additional Descriptions for Materials Listed Above 8th LOAD Flow fill from SPILL # 1408926 TANK #002			H. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information EMERGENCY PHONE 1-800 424-9300					
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 Pete Laferr JR				Signature <i>[Signature]</i>	
				Date 1 9 15	
17. Transporter 1 Acknowledgement of Receipt of Materials				Date	
Printed/Typed Name ANTHONY PARENTE				Signature <i>[Signature]</i>	
				Date 1 9 15	
18. Transporter 2 Acknowledgement of Receipt of Materials				Date	
Printed/Typed Name				Signature	
				Date	
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.					
Printed/Typed Name <i>[Signature]</i>				Signature <i>[Signature]</i>	
				Date 07 09 15	

NON-HAZARDOUS WASTE

GENERATOR

TRANSPORTER

FACILITY



Colonia Landfill
OP BY CAPITAL REGION LANDFILLS
1319 Loudon Road
Cohoes, New York 12047

Weighed: Lauren T
BILL TO: 868
MAXON ALCO LLC
695 ROTTERDAM INDUSTRIAL PARK
SCHENECTADY NY 12306

HAULER: Cash Customer
Vehicle ID: 900/2
Reference: TOC-14-88A
Grid: LGP2
Ship To: MAXON ALCO HOLDINGS LLC
Manifest#: 301 NOTT ST.
PO#: SCHENECTADY, NY 12305
: M

Origin: SCHENECTADY
DATE IN: 01/09/2015 TIME IN: 13:41:14
DATE OUT: 01/09/2015 TIME OUT: 13:41:14

INBOUND TICKET Number: 02-00186097

SCALE 1 GROSS WT.	74180 LB
STORED TARE WT.	29440 LB
NET WEIGHT	44740 LB

Qty	Description	Amount
22.37	CONT MATERIAL	1454.05

TICKET AMOUNT: 1454.05

X _____

Phone: (518)783-2827 Fax: (518)786-7331
Operating hours 7AM to 3PM Monday thru Friday
and Saturday 7AM thru 12PM. This is to certify
that this load contains no hazardous materials,
medical waste or liquids of any type. All loads
must be properly contained (Tied & Tarped)
All Cash, Check, and Credit Card transactions
are final.

NON-HAZARDOUS WASTE MANIFEST

Truck Con 16

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

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No. 105	2. Page 1 of
3. Generator's Name and Mailing Address Maton Alco Holding LLC 695 Rotterdam Industrial Park Scheneclady, NY 12305		4. Generator's Phone (518) 467-4883 Andy Barber Site Environmental Consultant		
5. Transporter 1 Company Name Constantine Construction	6. US EPA ID Number	A. State Transporter's ID 364 Perm. T4A 597	B. Transporter 1 Phone 518 458-8294	
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 Town of Colonie Landfill 1319 New Loudon RD Cohoes, NY 12041		10. US EPA ID Number	E. State Facility's ID 40260003300001	F. Facility's Phone 518-783-2827
11. WASTE DESCRIPTION NON RCRA NON-DOT Regulated Soil		12. Containers	13. Total Quantity	14. Unit Wt./Vol.
a. Petroleum Contaminated flow fill Concrete		No. 001	Type DT	22 Est. TN
b.				
c.				
d.				
G. Additional Descriptions for Materials Listed Above		H. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information Emergency response phone 1-800-424-9300				
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 Pete Lafon		Signature <i>[Signature]</i>	Date 1 9 15	
17. Transporter 1 Acknowledgement of Receipt of Materials		Date		
Printed/Typed Name Jason Barber		Signature <i>[Signature]</i>	Date 1 9 15	
18. Transporter 2 Acknowledgement of Receipt of Materials		Date		
Printed/Typed Name		Signature	Date	
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.				
Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>	Date 01 09 15	

NON-HAZARDOUS WASTE GENERATOR

TRANSPORTER

FACILITY

Colonie Landfill
OP BY CAPITAL REGION LANDFILLS
1319 Loudon Road
Cohoes, New York 12047

Weighed: Lauren T
BILL TO: 868
MAXON ALCO LLC
695 ROTTERDAM INDUSTRIAL PARK
SCHENECTADY NY 12306

HAULER: Cash Customer
Vehicle ID: 900/11
Reference: TOC-14-88A
Grid: L6P2
Ship To: MAXON ALCO HOLDINGS LLC
Manifest#: 301 NOTT ST.
PO#: SCHENECTADY, NY 12305
: M

Origin: SCHENECTADY
DATE IN: 01/09/2015 TIME IN: 13:45:48
DATE OUT: 01/09/2015 TIME OUT: 13:45:48

INBOUND TICKET Number: 02-00186100

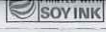
SCALE 1 GROSS WT.	70840 LB
STORED TARE WT.	28100 LB
NET WEIGHT	42740 LB

Qty	Description	Amount
21.37	CONT MATERIAL	1369.05

TICKET AMOUNT: 1369.05

X_____

Phone: (518)733-2827 Fax: (518)766-7331
Operating hours 7AM to 3PM Monday thru Friday
and Saturday 7AM thru 12PM. This is to certify
that this load contains no hazardous materials,
medical waste or liquids of any type. All loads
must be properly contained (Tied & Tarped)
All Cash, Check, and Credit Card transactions
are final.



NON-HAZARDOUS WASTE MANIFEST

Truck Con 16

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

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No. 106	2. Page 1 of
3. Generator's Name and Mailing Address Mayor Alco Holding LLC 695 Rotterdam Industrial Park Schenectady, NY 12305		Alco Site 311 North St Schenectady, NY 12309		
4. Generator's Phone (518) 461-4883 ANDY Barber Site Environmental Consultant		TOC-14-0888		
5. Transporter 1 Company Name Constantine Construction	6. US EPA ID Number	A. State Transporter's ID 364 Perm. T4A-597	B. Transporter 1 Phone 518 458-8294	
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 Town of Colonie Landfill 1319 New Loudon Rd Colonie, NY 12041	10. US EPA ID Number	E. State Facility's ID 401260003300001		F. Facility's Phone 518 783-2827
11. WASTE DESCRIPTION		12. Containers	13. Total Quantity	14. Unit Wt./Vol.
Non RCRA Non-Dot Regulated Soil		No.	Type	
a. Petroleum Contaminated flow fill Conc		501	DT	22 estimate TN
b.				
c.				
d.				
G. Additional Descriptions for Materials Listed Above 10th load flow fill from SPILL # 1408926 TANK 001		H. Handling Codes for Wastes Listed Above		
15. Special Handling Instructions and Additional Information Emergency response phone: 1-800-424-9300				
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 Pete Lafara JR		Signature <i>Pete Lafara JR</i>		Date 1/9/15
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name Jason Bowers		Signature <i>Jason Bowers</i>
18. Transporter 2 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.				
Printed/Typed Name		Signature <i>[Signature]</i>		Date 01/09/15

NON-HAZARDOUS WASTE

GENERATOR

TRANSPORTER

FACILITY



Colonie Landfill
OP BY CAPITAL REGION LANDFILLS
1319 Loudon Road
Cohoes, New York 12047

Weighed: Loran T
BILL TO: 368
MAXON ALCO LLC
695 ROTTERDAM INDUSTRIAL PARK
SCHENECTADY NY 12306

HAULER: Cash Customer
Vehicle ID: 900/11
Reference: TOC-14-88A
Grid: L6P2
Ship To: MAXON ALCO HOLDINGS LLC
Manifest#: 301 NOTT ST.
PO#: SCHENECTADY, NY 12305
: M

Origin: SCHENECTADY
DATE IN: 01/09/2015 TIME IN: 14:47:58
DATE OUT: 01/09/2015 TIME OUT: 14:47:58

INBOUND TICKET Number: 02-00186129

SCALE 1 GROSS WT.	66480 LB
STORED TARE WT.	28100 LB
NET WEIGHT	38380 LB

Qty	Description	Amount
19.19	CONT MATERIAL	1247.35
	TICKET AMOUNT:	1247.35

X _____

Phone: (518)783-2827 Fax: (518)786-7331
Operating hours 7AM to 3PM Monday thru Friday
and Saturday 7AM thru 12PM. This is to certify
that this load contains no hazardous materials,
medical waste or liquids of any type. All loads
must be properly contained (Tied & Tarped)
All Cash, Check, and Credit Card transactions
are final.

Invoice

Constantine Construction & Farm, Inc.

564 Albany Shaker Road
Loudonville, New York 12211

Phone: 518 458-8294
Fax: 518 438-7257
laura@ccfrm.com

DATE	INVOICE #
1/12/2015	25494

BILL TO
Rifenburg Contracting Corp. 1175 Hoosick Road Troy, NY 12180

P.O. NO.	TERMS
	Net 30

QUANTITY	DESCRIPTION	RATE	AMOUNT
28.29	tons of petro contaminated soil to Colonie Landfill on 1/5/2015 #02-00185457 #80	11.00	311.19
27.86	tons of petro contaminated soil to Colonie Landfill on 1/5/2015 #02-00185461 #81	11.00	306.46
26.22	tons of petro contaminated soil to Colonie Landfill on 1/5/2015 #02-00185484 #82	11.00	288.42
22.19	tons of petro contaminated soil to Colonie Landfill on 1/5/2015 #02-00185512 #83	11.00	244.09
20.98	tons of petro contaminated soil to Colonie Landfill on 1/5/2015 #02-00185529 #84	11.00	230.78
16.15	tons of petro contaminated soil to Colonie Landfill on 1/5/2015 #02-00185535 #85	11.00	177.65
21.24	tons of petro contaminated soil to Colonie Landfill on 1/5/2015 #02-00185562 #86	11.00	233.64
23.87	tons of petro contaminated soil to Colonie Landfill on 1/5/2015 #02-00185563 #87	11.00	262.57
22.5	tons of petro contaminated soil to Colonie Landfill on 1/5/2015 #02-00185595 #88	11.00	247.50
22.17	tons of petro contaminated soil to Colonie Landfill on 1/6/2015 #02-00185627 #89	11.00	243.87
20.12	tons of petro contaminated soil to Colonie Landfill on 1/6/2015 #02-00185644 #90	11.00	221.32
21.44	tons of petro contaminated soil to Colonie Landfill on 1/6/2015 #02-00185665 #91	11.00	235.84
21.59	tons of petro contaminated soil to Colonie Landfill on 1/6/2015 #02-00185670 #92	11.00	237.49
20.26	tons of petro contaminated soil to Colonie Landfill on 1/6/2015 #02-00185702 #93	11.00	222.86
19.15	tons of petro contaminated soil to Colonie Landfill on 1/6/2015 #02-00185704 #94	11.00	210.65
Accounts over 30 days are subject to 1.5% service charge (annual rate 18%) and all costs of collection including attorney's fees. This invoice is deemed correct unless errors are reported in writing to Constantine Construction & Farm, Inc. within 10 days of the invoice date.		Total	

Constantine Construction & Farm, Inc.

564 Albany Shaker Road
Loudonville, New York 12211

Phone: 518 458-8294
Fax: 518 438-7257
laura@ccfrm.com

Invoice

DATE	INVOICE #
1/12/2015	25494

BILL TO
Rifenburg Contracting Corp. 1175 Hoosick Road Troy, NY 12180

P.O. NO.	TERMS
	Net 30

QUANTITY	DESCRIPTION	RATE	AMOUNT
20.48	tons of petro contaminated soil to Colonie Landfill on 1/6/2015 #02-00185723 #95	11.00	225.28
17.85	tons of petro contaminated soil to Colonie Landfill on 1/6/2015 #02-00185726 #96	11.00	196.35
18.33	tons of petro contaminated soil to Colonie Landfill on 1/6/2015 #02-00185750 #97	11.00	201.63
21.58	tons of petro contaminated soil to Colonie Landfill on 1/9/2015 #02-00185996 #98	11.00	237.38
17.57	tons of petro contaminated soil to Colonie Landfill on 1/9/2015 #02-00186001 #99	11.00	193.27
21.16	tons of petro contaminated soil to Colonie Landfill on 1/9/2015 #02-00186033 #100	11.00	232.76
21.91	tons of petro contaminated soil to Colonie Landfill on 1/9/2015 #02-00186034 #101	11.00	241.01
19.8	tons of petro contaminated soil to Colonie Landfill on 1/9/2015 #02-00186063 #102	11.00	217.80
19.97	tons of petro contaminated soil to Colonie Landfill on 1/9/2015 #02-00186065 #103	11.00	219.67
22.37	tons of petro contaminated soil to Colonie Landfill on 1/9/2015 #02-00186097 #104	11.00	246.07
21.37	tons of petro contaminated soil to Colonie Landfill on 1/9/2015 #02-00186100 #105	11.00	235.07
19.19	tons of petro contaminated soil to Colonie Landfill on 1/9/2015 #02-00186129 #106	11.00	211.09
Accounts over 30 days are subject to 1.5% service charge (annual rate 18%) and all costs of collection including attorney's fees. This invoice is deemed correct unless errors are reported in writing to Constantine Construction & Farm, Inc. within 10 days of the invoice date.		Total	\$6,331.71

NON-HAZARDOUS WASTE MANIFEST

CON 14

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

NON-HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No. 003	2. Page 1 of
-------------------------------------	------------------------------	----------------------------------	--------------

3. Generator's Name and Mailing Address MAXON ALCO HOLDING LLC 695 ROTTERDAM INDUSTRIAL PARK SCHENECTADY NY 12305	ALCO SITE 301 NOTT ST SCHENECTADY NY 12309	LOT #3919-P
4. Generator's Phone (518) 401-4883	ANDY BARACK SITE ENVIRONMENTAL CONSULTANT	
5. Transporter 1 Company Name CONSTANTINE CONSTRUCTION	6. US EPA ID Number	A. State Transporter's ID 4A-597
7. Transporter 2 Company Name	8. US EPA ID Number	B. Transporter 1 Phone 518 365 4316
9. Designated Facility Name and Site Address RAPP ROAD WASTE MANAGEMENT FACILITY 525 RAPP ROAD ALBANY NY 12205	10. US EPA ID Number	C. State Transporter's ID
		D. Transporter 2 Phone
		E. State Facility's ID
		F. Facility's Phone 518 869 3651

11. WASTE DESCRIPTION	12. Containers		13. Total Quantity	14. Unit Wt./Vol.
	No.	Type		
a. PERMANENT SUBSTITUTED SAND concrete flow fill			32.41	
b.				
c.				
d.				

G. Additional Descriptions for Materials Listed Above SPILL # 1507232	H. Handling Codes for Wastes 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.

Printed/Typed Name BRIAN EGAN AGENT FOR MAXON/ALCO HOLDINGS LLC	Signature <i>Brian Egan</i>	Date Month Day Year 11 17 15
---	--------------------------------	---

17. Transporter 1 Acknowledgement of Receipt of Materials	Signature	Date
---	-----------	------

18. Transporter 2 Acknowledgement of Receipt of Materials	Signature	Date
---	-----------	------

19. Discrepancy Indication Space

NON-HAZARDOUS WASTE

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number ESQ6	2. Page 1 of 1	3. Emergency Response Phone (800) 225-6750	4. Manifest Tracking Number 007795706 FLE	
5. Generator's Name and Mailing Address Moxon Alco Holdings, LLC 695 Rotterdam Industrial Park Schenectady, NY 12306						
Generator's Site Address (if different than mailing address) 407 Front Street Schenectady, NY						
Generator's Phone: (518) 445-1565						
6. Transporter 1 Company Name OP-TECH Environmental Services, Inc.					U.S. EPA ID Number MD986980753	
7. Transporter 2 Company Name						
U.S. EPA ID Number						
8. Designated Facility Name and Site Address Cyche Chem, Inc. 550 Industrial Drive Lewisberry, PA 17339						
Facility's Phone: (717) 938-4700						
U.S. EPA ID Number PA067098822						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
X	UN2809 Waste Mercury, 8(6.1), PAIII, RQ ERG #172	001	DF	0015	P	D069 T
2.						
3.						
4.						
14. Special Handling Instructions and Additional Information Job # 102830 1x5 Refuse # OPT770-A-MM						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name Stephen Luciano				Signature <i>Stephen Luciano</i>		Month Day Year 14 11 06
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Christopher L. Kligan				Signature <i>Christopher L. Kligan</i>		Month Day Year 10 11 16
Transporter 2 Printed/Typed Name				Signature		Month Day Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)						Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name Annie E. Hied				Signature <i>Annie E. Hied</i>		Month Day Year 14 11 06

Generator Name: Merion AFB Holdings, LLC
Generator EPA ID #: CS09G
Manifest #: 007795706 FLE

LAND DISPOSAL RESTRICTION AND CERTIFICATION FORM
This land disposal restriction (LDR) notification must be submitted with the initial shipment of all new waste streams. Subsequent notification is not required unless the waste stream changes. All sections MUST be completed. **INSTRUCTION**

WASTE STREAM INFORMATION - For each manifest line complete the following sections. For LDR's previously submitted or LAB PACK's with packing slips indicate such in column A or B and stop.

Line #	LDR on file RCRA	Lab Pack & Packing Slip	EPA Waste Codes and subcategory reference letter from table (if applicable)	D Treatability		E			F					
				Waste Water < 1% TOC < 1% TSS	Not WW	Spent Solvent numbers of Constituents	For All SOIL Treatment Complete certification	Meets LDR standards 40CFR268 Listed Waste Certify below	Group	Waste per 40CFR268	Requires treatment mark which standard applies	Treatment Method for Hazardous		
1				<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>									
2				<input type="checkbox"/>	<input type="checkbox"/>									
3				<input type="checkbox"/>	<input type="checkbox"/>									
4				<input type="checkbox"/>	<input type="checkbox"/>									

ADDITIONAL INFORMATION FOR CHARACTERISTIC CODES D001 to D043 (check one)
 Some of all of these waste streams contain underlying hazardous constituents (UHCs) in excess of the treatment standard of 40CFR268.40. These are indicated on the UHC/TS table section of this LDR form or included on the waste profile.
 There are no underlying hazardous constituents (UHCs) present in any of these waste streams.

SUBCATEGORY LETTER TABLE

A	Ignitable except high TOC ignitable liquids
B	High TOC (> 10%) ignitable liquids
A	Reactive sulfide
C	Reactive cyanide
B	Water reactive
D	Other reactive
A	Cadmium non-battery
B	Cadmium containing batteries
A	Lead non-battery
B	Lead acid batteries
A	High mercury organic (>260 PPM Total Hg)
B	High mercury inorganic (> 260 PPM Total Hg)
C	Low mercury (< 260 PPM Total Hg)
D	Mercury wastewater

SPENT SOLVENT WASTE CONSTITUENTS

For F001-F005 indicate number of constituent in above table

(1) acetone	(1) o-dichlorobenzene
(2) n-butyl alcohol	(2) 1,1,1-trichloroethane
(3) iso-butyl alcohol	(3) carbon tetrachloride
(4) 1,2-dichloroethane	(4) carbon disulfide
(5) methyl ethyl ketone	(5) pyridine
(6) methylene chloride	(6) carbon tetrachloride
(7) methyl ethyl ketone	(7) chlorobenzene
(8) methyl isobutyl ketone	(8) carbon tetrachloride
(9) nitrobenzene	(9) carbon disulfide
(10) nitrobenzene	(10) carbon tetrachloride
(11) nitrobenzene	(11) carbon tetrachloride
(12) nitrobenzene	(12) carbon tetrachloride
(13) nitrobenzene	(13) carbon tetrachloride
(14) nitrobenzene	(14) carbon tetrachloride
(15) nitrobenzene	(15) carbon tetrachloride
(16) nitrobenzene	(16) carbon tetrachloride
(17) nitrobenzene	(17) carbon tetrachloride
(18) nitrobenzene	(18) carbon tetrachloride
(19) nitrobenzene	(19) carbon tetrachloride
(20) nitrobenzene	(20) carbon tetrachloride
(21) nitrobenzene	(21) carbon tetrachloride
(22) nitrobenzene	(22) carbon tetrachloride
(23) nitrobenzene	(23) carbon tetrachloride
(24) nitrobenzene	(24) carbon tetrachloride
(25) nitrobenzene	(25) carbon tetrachloride
(26) nitrobenzene	(26) carbon tetrachloride
(27) nitrobenzene	(27) carbon tetrachloride
(28) nitrobenzene	(28) carbon tetrachloride

THIS SOIL CERTIFICATION FOR ALTERNATE SOIL TREATMENT (268.192 FOR INDICATED CIRCLE ITEMS)
 This is a notice to certify that all the constituents listed below are not...
 exhibit a characteristic of hazardous waste and is subject to/compiles with...
 the universal treatment standards.

THIS CERTIFICATION FOR MATERIAL THAT MEETS TREATMENT STANDARDS APPLIES TO THE ABOVE LISTED ITEMS.
 This is an EPA hazardous waste that meets all applicable treatment standards set forth in 40 CFR 268 subpart O, and can be handled without further treatment. I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or thorough knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart O and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA Section 3004(d). I believe that the information I submitted is true, accurate and correct. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

CERTIFICATION - All sections MUST be completed & certify that all information on this and all associated documents is complete and accurate to the best of my knowledge.

Signature: Stephen Luciano
 Title: A.T. Rep
 Date: 4/11/16