
Exhibit O
Historic Waste Manifests



State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421



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

Form Approved, OMB No. 2050-0039. Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD98698064791600		Manifest Document No. 9/1600		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address MOSCOM 3750 MONROE AVE PITTSFORD, NY 14534 716 381-6000						A. State Manifest Document Number NJA 2169318							
4. Generator's Phone ()						B. State Generator's ID-(Gen. Site Address) SAME 08690							
5. Transporter 1 Company Name SAFETY-KLEEN CORP				6. US EPA ID Number ILD984908202		C. State Trans ID-NJDEPE Decal No.- 716 626666							
7. Transporter 2 Company Name						D. Transporter's Phone ()							
8. US EPA ID Number						E. State Trans ID-NJDEPE							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036 0-006-35						Decal No.-							
10. US EPA ID Number NJD002182897						F. Transporter's Phone ()							
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM a. X NO WASTE FLAMMABLE LIQUIDS, N.O.S. (1,1,1-TRICHLOROETHANE AND ETHANOL) JUN1993 PGLI (P002) (ERG#28)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
						001 D M		00450 P		F002			
J. Additional Descriptions for Materials Listed Above 0001 (T, I) (L) 7 WATER 2 WAXES 5000 FLUX 40% ETHYL ALCOHOL 46%, 34% PROPYL ALCOHOL 22%, 1% TETRHYDRO-2-FURFURAL TRICHLOROETHANE, 1,1,1-10% 2% ETHYL ALCOHOL 2%						K. Handling Codes for Wastes Listed Above T04-BLENDING a. N1-B (B)							
15. Special Handling Instructions and Additional Information 11A) CONTROL#241494-9 SAMPLE#520827 EMERGENCY RESP #1-708-888-4660 (24HRS)						NTG3000 2-028-02-9274 PPH 791600 SKDOT A:5115 B: C: D:							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 84086505													
Printed/Typed Name STEPHEN ZABROCKI				Signature <i>Stephen Zabrocki</i>				Month Day Year 07/12/95					
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <i>David Phibbs</i>				Signature <i>David Phibbs</i>				Month Day Year 07/12/95					
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature				Month Day Year					
19. Discrepancy Indication Space JA added, [initials]													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Darlene Grier				Signature <i>Darlene Grier</i>				Month Day Year 07/18/95					

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

GENERATOR
TRANSPORTER
FACILITY

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST

V 940728-1-2

Please print or type. Do not Staple.

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NYD98698064700001		Manifest Document No. 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.							
3. Generator's Name and Mailing Address MOSCOM CORP. 3750 MONROE AVE. PITTSFORD NY 14534				A. State Manifest Document No. NY B543472 2		B. Generator's ID SAME									
4. Generator's Phone (716+381-6000)				C. State Transporter's ID 102478(NY)		D. Transporter's Phone 716-827-7200									
5. Transporter 1 (Company Name) HAZMAT ENVIRONMENTAL GROUP		6. US EPA ID Number NYD980769947		E. State Transporter's ID		F. Transporter's Phone ()									
7. Transporter 2 (Company Name)		8. US EPA ID Number		G. State Facility's ID		H. Facility's Phone									
9. Designated Facility Name and Site Address CHEMTRON CORP. 35850 SCHNEIDER CT. AVON OH 44011				10. US EPA ID Number OH D066060609		(800)-676-5091									
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. WASTE TETRACHLOROETHYLENE 6.1 UN1897 PGIII, MARINE POLLUTANT (D039/F001)						No. Type		Quantity		Wt/Vol		EPA Waste No.			
						0 0 1 D M		0 0 6 0 0		P		EPA RCRA F001 STATE			
b. NON-RCRA REGULATED WASTE OIL						0 0 1 D M		0 0 4 5 0		P		EPA RCRA REGULATED MATERIAL STATE			
c.												EPA STATE			
d.												EPA STATE			
J. Additional Descriptions for Materials listed Above TETRACHLOROETHYLENE Sg=1.40						K. Handling Codes for Wastes Listed Above									
a. NON-REGULATED						a. <input checked="" type="checkbox"/> R <input type="checkbox"/> c <input type="checkbox"/>									
b.						b. <input checked="" type="checkbox"/> <input type="checkbox"/> d <input type="checkbox"/>									
15. Special Handling Instructions and Additional Information Q-940518-02/TETRACHLOROETHYLENE/ERG#: 74/55GAL Q-940518-05/WASTE OIL /ERG#: NA/55GAL						EMERGENCY RESPONSE: INFOTRAC 1-800-535-5053									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name STEPHEN ZABROCKI				Signature <i>Stephen Zabrocki</i>				Mo. Day Year 07 26 94							
17. Transporter 1 (Acknowledgement or Receipt of Materials)				Printed/Typed Name WAYNE PAUC				Signature <i>Wayne Pauc</i>				Mo. Day Year 07 26 94			
18. Transporter 2 (Acknowledgement or Receipt of Materials)				Printed/Typed Name				Signature				Mo. Day Year			
19. Discrepancy Indication Space															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.															
Printed/Typed Name Glen O'Sullivan				Signature <i>Glen O'Sullivan</i>				Mo. Day Year 07 28 94							

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

NY B 543472 2



State of New Jersey
 Department of Environmental Protection and Energy
 Hazardous Waste Regulation Program
 Manifest Section
 CN 421, Trenton, NJ 08625-0421

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

Form Approved. OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. N Y D 9 8 6 9 8 0 6 4 7 9 7 9 1 5		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address MOSCOM 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1824690							
4. Generator's Phone (716) 381-6000						B. State Generator's ID-(Gen. Site Address) SNE							
5. Transporter 1 Company Name SAFETY-KLEEN CORP			6. US EPA ID Number I T I D 9 8 4 9 0 8 2 0 2			C. State Trans. ID-NJDEP Decal No.- NRV5213							
7. Transporter 2 Company Name Safety Kleen Corp			8. US EPA ID Number I T I D 9 8 4 9 0 8 2 0 2			D. Transporter's Phone (716) 226-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036 0-006-35						E. State Facility ID NRV5213 Decal No.- 51882							
						F. Transporter's Phone (609) 386-3904							
						G. State Facility's ID							
						H. Facility's Phone (908) 862-2000							
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM						12. Containers		13. Total Quantity		14. Unit W/Vol		15. Waste No.	
a. RQ WASTE FLAMMABLE LIQUIDS NOS (ISOPROPANOL) 3 UN1993 PG II (P002) (ERG#27)						No. 001		Type D		Quantity 10428		Unit P	
b.												F002	
c.													
d.													
J. Additional Descriptions for Materials Listed Above (Isopropyl Alcohol) (D. propylene Glycol methyl ether) a. P001 (I) IPA 77% DME 7% b. (U)(T)(I) c. WATER (T) (S)						K. Handling Codes for Wastes Listed Above T04 BLENDING a. NY 42							
15. Special Handling Instructions and Additional Information 11a Control #114541-5 Sample #119433 EMERGENCY RESP #1-708-888-4660 (24HRS)						2-028-02-9274		PP# 97953		B: C: D:			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name STEPHEN ZABROCKI						Signature Stephen Zabrocki						Month Day Year 01/10/94	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Chris Cardilli						Signature Chris Cardilli						Month Day Year 01/10/94	
19. Discrepancy Indication Space Raymond Ward						Signature Raymond Ward						Month Day Year 01/14/94	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name Darlene Grier													
Signature Darlene Grier						Month Day Year 01/14/94							

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ A 1824690



2-038-02

State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section
 CN 028, Trenton, NJ 08625

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

Form Approved. OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 986980647		Manifest Document No. 41002		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.									
3. Generator's Name and Mailing Address MOSCOM 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1374382											
4. Generator's Phone (716) 381-6000						B. State Generator's ID SAME											
5. Transporter 1 Company Name SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		C. State ID NYG09250											
7. Transporter 2 Company Name SAFETY KLEEN CORP				8. US EPA ID Number ILD051060408		D. Transporter's Phone (716) 226-2411											
9. Transporter 1 Facility Name and Address SAFETY KLEEN CORP 1200 SYLVAN STREET LINDEN, NJ 07036						10. US EPA ID Number 0-006-35		E. State Trans. ID NJDEP 58690									
						10. US EPA ID Number NJD 002182897		F. Transporter's Phone (609) 381-3404									
								G. State Facility's ID									
								H. Facility's Phone (908) 862-2000									
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.					
a. X RC WASTE FLAMMABLE LIQUID N.O.S. (ISOPROPRANOL) UN1993 (PO02) (ERG#27)						001 DM		00429 P		F		002					
b.																	
c.																	
d.																	
J. Additional Descriptions for Materials Listed Above 100% D001 9% WATER 2% ETHYL ALCOHOL 77% PROPYL ALCOHOL 7% DIPROPYLENE GLYCOL ETHYL ETHER						K. Handling Codes for Wastes Listed Above 204-BLENDING a. NY-B-B c.											
b.																	
c.																	
d.																	
15. Special Handling Instructions and Additional Information 11a) CONTROL# 114541-5 SURVEY# 110433 EMERGENCY RESP#708-888-4660 24HR IF UNDELIVERABLE RETURN TO GENERATOR SKDOT# A: B: C: D:						0000 34646323 000000 2-028-02-9274		141092									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.																	
Printed/Typed Name STEPHEN ZABROSKI						Signature Stephen Zabroski				Month Day Year 11/20/79							
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name ERIC J GARTZ				Signature Eric J Gartz				Month Day Year 11/20/79			
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name MATT AMEN				Signature Matt Amen				Month Day Year 11/20/79			
19. Discrepancy Indication Space																	
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Printed/Typed Name Denise Dore				Signature Denise Dore				Month Day Year 11/20/79			

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA 1374382



State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section
 CN-028, Trenton, NJ 08625

G-101

Form Approved. OMB No. 2050-0039. Expires 9-30-91

Please type or print in block letters. (Form designed for use on 8 1/2" (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD98161981064757222	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address N08001 3750 MONROE AVE, PITTSFORD NY 14534				A. State Manifest Document Number NJA 1210111		
4. Generator's Phone (716) 381-6000				B. State Generator's ID SAME		
5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number TLD051060408		C. State Trans. ID NY GJ5250		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 0-006-35 1200 SYLVAN ST LINDEN NJ 07036		10. US EPA ID Number NJDO02132897		E. State Trans. ID		
				F. Transporter's Phone ()		
				G. State Facility's ID 2009C1		
				H. Facility's Phone (908) 862-2000		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM		12. Containers No.	Type	13. Total Quantity	14. Unit W/Vol	15. Waste No.
a. X RO WASTE FLAMMABLE LIQUID N.C.S. (ISOPROPRANOL) UN1993 (POO2)(ERG#27)		001	DM	00430	P	F O O 2
b.						
c.						
d.						
Additional Descriptions for Materials Listed Above (DOT) 9% WATER 2% ETHYL ALCOHOL 77% PROPYL ALCOHOL, ISO- 7% DIPROPYLENE GLYCOL METHYL ETHER				K. Handling Codes for Wastes Listed Above A04 BLENDING		
15. Special Handling Instructions and Additional Information EMERGENCY RESP #1-708-838-4660 11a) CONTROL#0114541-5 Ka) NY HANDLING CODE = B				2-028-02-9274 M57222 A 2089		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name STEPHEN ZABROCKI		Signature <i>Stephen Zabrocki</i>		Month Day Year 11/20/91		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Scott Hulbert		Signature <i>Scott C Hulbert</i>		Month Day Year 11/20/91		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 11. Printed/Typed Name Darlene Grier Signature <i>Darlene Grier</i> Month Day Year 11/20/91						

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

GENERATOR

TRANSPORTER

FACILITY

NJ 1210111

JUL-07-1994 13:07 FROM NYSDOC TECHNICAL SUPPORT TO 0-358398716-4820387 P.83

SITE NAME 3750 MONROE AVENUE

EPA ID NO.
NY10 9102 249 740



N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 1983 HAZARDOUS WASTE IDENTIFICATION AND CERTIFICATION

FORM IC

INSTRUCTIONS: Read the detailed instructions beginning on page 7 of the Hazardous Waste Report booklet before completing this form.

Sec I **SITE NAME AND LOCATION ADDRESS - COMPLETE ITEMS A THROUGH H**

A. EPA ID NO. NY10 9102 249 740 **E. County:** MONROE

C. Disposing name: 3750 MONROE AVENUE ASSOCIATES **D. Has the site name associated with this EPA ID No. changed since 1987?** Yes No

E. Street name and number, if not applicable, use "Industrial park, building name or other physical location description":
3750 MONROE AVENUE

F. City, town, village, etc.: P. HSFORD **G. State:** NY **H. Zip Code:** 11405-1411

Sec II **MAILING ADDRESS OF SITE - Instructions, Page 7**

A. Is the mailing address the same as the location address in "I" above? Yes No (Go to section II)

B. Number and street of mailing address: 410 NABBY MANAGEMENT PO BOX 51

C. City, town, village, etc.: ROCHESTER **D. State:** NY **E. Zip Code:** 11416-0111

Sec III **NAME, TITLE AND TELEPHONE NUMBER OF PERSON WHO SHOULD BE CONTACTED ABOUT THIS REPORT - Instructions, Page 7**

A. Last name: FLANNIGAN **First name:** ROBERT **ML:** 5 **B. Title:** MANAGER **C. Telephone:** 716 481-2744 1111

Sec IV **Enter the standard classification (SC) code that describes the principal products or group of products, produced or distributed, or the services rendered at the site's physical location. Enter more than one code only if two or more industry descriptions include the combined activities of the site. Instructions Page 7**

A: 16019 **B:** 16012 **C:** 1111 **D:** 1111

Sec V **CERTIFICATION**

I verify under penalty of law that this document and all attachments were prepared under my direction or supervision, in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties under section 3008 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violators.

A. Last name: FLANNIGAN **First name:** ROBERT **ML:** 5 **B. Title:** MANAGER

C. Signature: Robert Flannigan **D. Date Signed:** 10/21/94

Continues on reverse

FORM IC

Enter EPA ID No. W1110 17112 1249 17111

GENERATOR STATUS

A. 1989 RCRA generator status - Instructions, Page 8 (check one box below)

1. LGS
 2. SOG (Only to SW VI)
 3. QCSOS
 4. Non-generator (CONTINUE TO BOX II)

B. Reason for not generating - Instructions, Page 8 (Check all that apply)

1. Never
 2. No longer in business
 3. Only excluded or deleted waste
 4. Only non-hazardous
 5. Periodic or occasional generator
 6. Waste administration activity
 7. Other (Specify in comments box)

ON-SITE WASTE MANAGEMENT STATUS

A. RCRA permitted or interim status storage - Instructions, Page 10 1

B. RCRA permitted or interim status treatment, disposal, or recycling - Instructions, Page 10 1

C. RCRA exempt treatment, disposal, or recycling - Instructions, Page 11 1

WASTE REDUCTION ACTIVITY DURING 1993

A. Did this site begin or expand a source reduction activity during 1993? - Instructions, Page 11

1. Yes
 2. No

B. Did this site begin or expand a recycling activity during 1993? - Instructions, Page 11

1. Yes
 2. No

C. Did this site systematically investigate opportunities for source reduction or recycling during 1993? - Instructions, Page 12

1. Yes
 2. No

D. Did any of the factors listed below delay or limit this site's ability to initiate new or additional source reduction activities in 1993? - Instructions, Page 12 (YOU MUST CHECK YES OR NO FOR EACH ITEM)

Yes No

1 2 a. Insufficient capital to install new source reduction equipment or implement new source reduction practices.

1 2 b. Lack of technical information on source reduction techniques applicable to the specific production processes.

1 2 c. Source reduction is not economically feasible; cost savings in waste management or production will not recover the capital investment.

1 2 d. Concern that the product quality may decline as a result of source reduction.

1 2 e. Technical limitations of the production processes.

1 2 f. Permitting burdens.

1 2 g. Source reduction previously implemented - additional reduction does not appear to be technically feasible.

1 2 h. Source reduction previously implemented - additional reduction does not appear to be economically feasible.

1 2 i. Source reduction previously implemented - additional reduction does not appear to be feasible due to permitting requirements.

1 2 j. Other (Specify in comments box below)

E. Did any of the factors listed below delay or limit this site's ability to initiate new or additional on-site or off-site recycling activities in 1993? - Instructions, Page 12 (YOU MUST CHECK YES OR NO FOR EACH ITEM)

Yes No

1 2 a. Insufficient capital to install new recycling equipment or implement new recycling practices.

1 2 b. Lack of technical information about recycling techniques applicable to this site's specific production processes.

1 2 c. Recycling is not economically feasible; cost savings in waste management or production will not recover the capital investment.

1 2 d. Concern that product quality may decline as a result of recycling.

1 2 e. Requirement to manifest wastes inhibit shipments off site for recycling.

1 2 f. Financial liability provisions inhibit shipments off site for recycling.

1 2 g. Technical limitations of production processes inhibit shipments off site for recycling.

Yes No

1 2 h. Technical limitations of production processes inhibit on-site recycling.

1 2 i. Permitting burdens inhibit recycling.

1 2 j. Lack of permitted off-site recycling facilities.

1 2 k. Unable to identify a market for recyclable materials.

1 2 l. Recycling previously implemented; additional recycling does not appear to be technically feasible.

1 2 m. Recycling previously implemented; additional recycling does not appear to be economically feasible.

1 2 n. Recycling previously implemented; additional recycling does not appear to be feasible due to permitting requirements.

1 2 o. Other (Specify in the comments box below)

COMMENTS: 3780 Morrow Avenue Associates do not produce, store or distribute any hazardous materials. We dispose of oil filled electrical transformers on a periodic basis. Our 1993 change out and disposal completes our building wide program.

ADDRESS 3750 Manor Avenue

WPA ID NO. W410 902 249 74e



N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 1988 HAZARDOUS WASTE REPORT
WASTE GENERATION AND MANAGEMENT

FORM
GM

INSTRUCTIONS: Read the detailed instructions beginning on page 10 of the Hazardous Waste Report booklet before completing this form.

Sec I A. Waste description - Instructions, Page 11 Removal of oil (P&B) Filled ELECTRICAL TRANSFORMER

B. EPA Hazardous waste code: Instructions, Page 10 _____

C. New York State hazardous waste code: Instructions, Page 10 B006 B047

D. SIC code: Page 10 15119 E. Origin Code: Page 12 2 F. Source code: Page 17 W410 G. Point of measurement: Page 17 1 H. Fats code: Page 17 0206 I. RCRA Reference plant: Page 17 2

J. Reported TDI certificate: Page 10 _____ K. MSD number: Page 10 _____

Sec II A. Quantity of Hazardous Waste generated in 1988: Instructions, Page 10 44 B. Quantity of Hazardous Waste generated in 1987: Instructions, Page 10 16447.0 C. UOM: Instr., Page 10 3 Density: _____ D. Did this site treat on site, dispose of on site, recycle on site, or discharge to a waterbody? Instr., Page 10

1. Yes (continue to Section 3)
 2. No (Skip to Sec. IV)

ON-SITE SYSTEM 1: Quantity treated, disposed of, or recycled on site in 1988: _____ PG Page Number 2
 ON-SITE SYSTEM 2: Quantity treated, disposed of, or recycled on site in 1988: _____ PG Page Number 2

Sec III A. Was any of this waste shipped off site in 1988? Instructions, Page 20 1. Yes (continue to Sec. IV) 2. No (Skip to Sec. IV)

Site 1: B. EPA ID Number of facility to which waste was shipped: Instr., Page 20 0410 053 576 294 C. System type shipped to: Instr., Page 20 W410 D. Off-site availability code: Instr., Page 21 1 E. Total quantity shipped to this facility in 1988: Instr., Page 21 16447.0

Site 2: B. EPA ID Number of facility to which waste was shipped: Instr., Page 20 _____ C. System type shipped to: Instr., Page 20 _____ D. Off-site availability code: Instr., Page 21 _____ E. Total quantity shipped to this facility in 1988: Instr., Page 21 _____

Sec IV A. Did any new activities in 1988 result in reduction of this waste? Instructions, Page 20 1. Yes (continue to Sec. IV) 2. No (This form is now complete)

B. Activity: Instr., Page 22 _____ C. Other activity? Instr., Page 22 1. Yes 2. No D. Quantity recycled in 1988 due to new activities: Instr., Page 22 _____ E. Activity production index: Instr., Page 22 _____ F. 1988 volume reduction quantity: Instr., Page 22 _____

Comments:



FAX TRANSMISSION COVER SHEET

FAX NUMBER (716) 482-0387

DATE: 7-12-94 FROM: BOB FLANNIGAN

TIME: _____

TO: NAME ERNIE ROBBINS

DEPARTMENT DIV of HAZ: SUBSTANCES Regulation

COMPANY NYS DEC

CITY ALBANY STATE NY

FAX NUMBER: 518-457-7349

TYPE OF DOCUMENT: Form 16 & 6M # NYD 982 269 718

TOTAL NUMBER OF PAGES (INCLUDING COVER SHEET): 5

If this transmission is not clearly or completely received, please call (716) 482-5700.

MESSAGE: Mr. Robbins - Find Enclosed copies
mailed this date per your request
last week.

Original mailed X

Original not mailed _____

100 CARLSON ROAD • ROCHESTER, NEW YORK 14610 • (716) 482-5700

**3750 Monroe Avenue
Associates**

July 12, 1994

New York State
Department of Environmental Conservation
Technical Services Section
Room 438
50 Wolf Road
Albany, New York 12233-7250

Via Express Mail
Return Receipt

Gentlemen:

Find enclosed our 1993 Hazardous Waste Report as
first requested by Mr. Ernie Robbins on 7-7-94.

Sincerely,

3750 MONROE AVENUE ASSOCIATES


ROBERT S. FLANNIGAN

FAX COPY:

Ernie Robbins
518-457-7349

encl.

Norry Management Company, Agent
PO. Box 51 / Rochester, New York 14601
(716) 272-9000
FAX (716) 272-0126



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

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

Picoco print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MA01192289738		Manifest Document No.	2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.		
3. Generator's Name and Mailing Address T & A TOOL INC 73 SUMMER ST ADAMS MA 01220					A. State Facility ID Number MA 682823-2				
4. Generator's Phone (413) 743-5638					B. Generator's ID				
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.			6. US EPA ID Number ILD061060408		C. State Transporter's ID MA 190746N				
7. Transporter 2 (Company Name)			8. US EPA ID Number		D. Transporter's Phone (518) 783-8080				
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 72 SICKER ROAD LATHAM, NY 12110			10. US EPA ID Number NYD000708206		E. State Transporter's ID				
					F. Transporter's Phone ()				
					G. State Facility's ID				
					H. Facility's Phone (518) 783-8080				
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)					12. Containers		13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA: IGNITABILITY, D001)					1		45	P	D001
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above					K. Handling Codes for Wastes Listed Above				
a.					R <input checked="" type="checkbox"/>				
b.					c <input type="checkbox"/>				
c.					d <input type="checkbox"/>				
d.					e <input type="checkbox"/>				
15. Special Handling Instructions and Additional Information 2-004-01-2206 BPT 729837 TERR 0101 WK 8741									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name Carol A. Libozek				Signature Carol A. Libozek			Mo. Day Year 10/20/87		
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name JOHN PARATORE				Signature John Paratore			Mo. Day Year 10/20/87		
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name				Signature			Mo. Day Year		
19. Discrepancy Indication Space 001 53 11 02 01.01									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Gene Black									
Signature Gene Black				Mo. Day Year 10/20/87					

In case of emergency or spill immediately call the National Response Center (800) 424-9302 and the N.Y. Department of Transportation (518) 457-7332.

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete.

COPY 1-Disposer State-Mailed by TSD Facility

EPA Form 8700-22 (Rev. 9-86) Previous editions are obsolete
2 - TSD MAIL TO - GENERATOR STATE

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

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NYA 682823-2

CA0490 4



STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

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

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MA0119225738	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address T & A TOOL INC 73 SUMNER ST ADAMS MA 01220				A. State Manifest Document Number NYA 694450-1		
4. Generator's Phone (413) 743-9638				B. Generator's ID		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD051060408		C. State Transporter's ID NY 49902		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (518) 783-8020		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 72 SICKER ROAD LATHAM, NY 12110		10. US EPA ID Number NYD000708206		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (518) 783-8000		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, IGNITABILITY, D001)				No. 1	Type DM	45
b.						P
c.						D001
d.						
Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a.				a. <input checked="" type="checkbox"/> R		
b.				c. <input type="checkbox"/>		
b.				d. <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 2-004-01-2206 BPT 433231 TERR 0101 WK 8750						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name JAMES T SHAKER		Signature <i>James T Shaker</i>		Mo. Day Year 12/1/87		
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Printed/Typed Name JOHN PARATORE		Signature <i>John Paratore</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 hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name GENE BLACK		Signature <i>Gene Black</i>		Mo. Day Year 12/1/87		

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete.

COPY 1-Disposer State-Mailed by TSD Facility

2 - TSD MAIL TO - GENERATOR STATE

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

BE LEGIBLE ON ALL COPIES

In case of emergency or spill immediately call the National Response Center (800) 424-6622 and the N.Y. Department of Transportation (518) 457-7609.

GENERATOR

TRANSPORTER

FACILITY

NYA 694450-1

6A0490 4

is (are) incorrect (blank) correct information in the following blank spaces:

10-0039, Expires 9-30-88

Generator's US EPA No. MI0109812126191741818711517		Manifest Document No. 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.	
3150 MONROE AVE. ASSOC. 3750 MONROE AVE PITTSFORD N.Y. 14534				A. State Manifest Document No. NY A 609463 8			
6. US EPA ID Number MI01099328395				B. Generator's ID SAME			
8. US EPA ID Number				C. State Transporter's ID 4613A NY			
10. US EPA ID Number				D. Transporter's Phone (716) 285-288			
10. US EPA ID Number				E. State Transporter's ID			
10. US EPA ID Number				F. Transporter's Phone ()			
10. US EPA ID Number				G. State-Facility's ID			
10. US EPA ID Number				H. Facility's Phone 916 842-9148			
Facility Name and Site Address CENTAL INTERNATIONAL ELECTRICAL SERVICES INC 170 MINING ST. AS CITY, MO 64101		10. US EPA ID Number MI010981091735516					
US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol	
1. (RQ) WASTE Hazardous Substance, Solid, NOS. ORM-E NA 9188 (Poly chlorinated Biphenyls) B-006		No. Type		1381010 P		B-006	
2. (RQ) WASTE Hazardous Substance, Solid, NOS. ORM-E NA 9188 (Poly chlorinated Biphenyls) B-007		No. Type		111010 P		B-007	
3. (RQ) WASTE Hazardous Substance Liquid, NOS. ORM-E NA 9189 (Poly chlorinated Biphenyls) B-001		No. Type		1381010 P		B-001	
J. Additional Descriptions for Materials listed Above		K. Handling Codes for Wastes Listed Above					
a. DENIED TRANSFER		c. OIL >500PPM		L		B	
b. Fabric >500PPM		d.		L			
15. Special Handling Instructions and Additional Information EIES w/ # 87-151							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name GEORGE R WAILES		Signature George R Wailes		Mo. Day Year 07/17/87			
17. Transporter 1 (Acknowledgement or Receipt of Materials)		Printed/Typed Name Alan Huth		Signature Alan Huth		Mo. Day Year 07/17/87	
18. Transporter 2 (Acknowledgement or Receipt of Materials)		Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space N.C. THE CODE IS N.A. 9188							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name TIM GUNN		Signature Tim Gunn		Mo. Day Year 07/17/87			

C10490 4

Kabc HANDLING (6285) is (are) incorrect (blank)

Correct information in the following blank spaces:

30-0039, Expires 9-30-88

Generator's US EPA No. NY19181212619171418171511		Manifest Document No. 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.	
3750 MONROE AVE. ASSOC. 3750 MONROE AVE PITTSFORD N.Y. 14534		A. State Manifest Document No. NY 609463 8		B. Generator's ID SANA			
LIAL WHES. INC. NY191919328395		C. State Transporter's ID 44613A NY		D. Transporter's Phone (716) 285-2881			
		E. State Transporter's ID		F. Transporter's Phone ()			
City Name and Site Address PITTSFORD N.Y. 14534		10. US EPA ID Number		G. State-Facility's ID			
CENTRAL INTERNATIONAL ELECTRICAL SERVICES INC. 1000 W. 10TH ST. CITY, MO 64101		H. Facility's Phone (916) 842-9148					
12. Containers		13. Total Quantity		14. Unit (Wt/Vol)		15. Waste No.	
No. Type							
(RQ) WASTE Hazardous Substance, Solid, NOS. ORM-E NA 9188 (Polychlorinated Biphenyls) B-006		0101		DIM 1381010		P B-006	
(RQ) WASTE Hazardous Substance, Solid, NOS. ORM-E NA 9188 (Polychlorinated Biphenyls) B-007		0101		DIM 111010		P B-007	
(RQ) WASTE Hazardous Substance Liquid, NOS. ORM-E NA 9189 (Polychlorinated Biphenyls) B-001		0101		DIM 1381010		P B-001	
J. Additional Descriptions for Materials listed Above		K. Handling Codes for Wastes Listed Above					
a. DENIED TRANSFER		c. OIL >500 PPM		<input type="checkbox"/>		<input type="checkbox"/>	
b. Debris >500 PPM		d.		<input type="checkbox"/>		<input type="checkbox"/>	
15. Special Handling Instructions and Additional Information EIES w/p # 87-151							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, If I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name GEORGE R WATERS		Signature George R Waters		Mo. Day Year 12 21 1987			
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Printed/Typed Name Allan Huth		Signature Allan Huth		Mo. Day Year 07 11 1987	
18. Transporter 2 (Acknowledgement or Receipt of Materials)		Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space i.e. THE CODE IS N.A. 9188 TC.							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Printed/Typed Name Tim Gunn		Signature Tim Gunn		Mo. Day Year 07 23 1987	

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete.

COPY 2 - G... ..

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CAN490 A



State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421



2 8 8 9 2 1 3

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

Form Approved OMB No. 2050-C039 Expires 12-31-97

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD982269748		Manifest Document No. 89213		2. Page 1 of 1		Information in this shaded area is not required by Federal law.			
3. Generator's Name and Mailing Address THE NORRY COMPANY P.O. BOX 51 ROCHESTER, NY 14601				A. State Manifest Document Number NJA 2889213		B. State Generator's ID (Gen. Site Address) 3750 MONROE AVENUE PITTSFORD, NY 14534					
4. Generator's Phone () 716 272-9000		6. US EPA ID Number		C. State Trans. ID-NJDEP		Decal No. -					
5. Transporter 1 Company Name ENVIRONMENTAL PRODUCTS & SERVICES, INC				8. US EPA ID Number NYD980761191		D. Transporter's Phone () 315 471-0503		E. State Trans. ID-NJDEP ST0060		Decal No. - 88662	
7. Designated Facility Name and Site Address CYCLE CHEM, INC. 215 SOUTH FIRST STREET ELIZABETH, NJ 07206				10. US EPA ID Number NJD002200046		F. Transporter's Phone () (315) 471-0503		G. State Facility's ID		H. Facility's Phone () 908 355-5800	
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM				12. Containers		13. Total Quantity		Unit (Wt/Vol)		Waste No.	
X WASTE PAINT RELATED MATERIAL, 3, UN1263, PGII										D001	
X WASTE CORROSIVE LIQUID, N.O.S. (METHYLENE PHOSPHONIC ACID), 8, UN1760, PGIII				M 001 DM 00055 G						D002	
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		a. SO1 B		c.		d.	
1. SEE PROFILE (L,I)						b. SO1 B					
2. SEE PROFILE (L,C)											
14. Special Handling Instructions and Additional Information 11a. GEN#365657 004287-Product IK 11b. GEN#365657 04289-Product CEH022 Emergency Phone: (315) 471-0503				PO #: 33881 Job #: R2377 ERG#127,154		A. NY=B					
15. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and the classification, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and used the best waste management method that is available to me and that I can afford.											
Printed/Typed Name GREGORY A. LYONS				Signature <i>Gregory A. Lyons</i>				Month Day Year 03 10 99			
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name THOMAS HENDERSON				Signature <i>Thomas Henderson</i>				Month Day Year 03 10 99			
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name <i>Chuck</i>				Signature <i>Chuck</i>				Month Day Year 03 31 99			
19. Discrepancy Indication Space ADDITIONAL DRIVER RICHARD TERPSTRA											
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name HELEN ELLIS											
Signature <i>Helen Ellis</i>				Month Day Year 04 10 99							

NJ A 2889213

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172



State of New Jersey
 Department of Environmental Protection
 Hazardous Waste Regulation Program
 Manifest Section
 CN 421, Trenton, NJ 08625-0421

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Form Approved. OMB No. 2050-0039 Expires 9-30-97

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NY D E B R R 6 0 7 4 3 4 0 0 1		Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address THE WORRY COMPANY P.O. BOX 51 ROCHESTER, NY 14501				A. State Manifest Document Number NJA 2889211		B. State Generator's ID (Gen. Site Address) 3750 HUNDE AVENUE PUTTSBURGH, NY 14534	
4. Generator's Phone () 716 272-9000		6. US EPA ID Number		C. State Trans ID-NJDEP		Decal No.	
5. Transporter 1 Company Name ENVIRONMENTAL PRODUCTS & SERVICES, INC. NY D E B R R 6 0 7 4 3 4 0 0 1				8. US EPA ID Number		D. Transporter's Phone () 315 471-0503	
7. Transporter 2 Company Name Environmental Products & Services, Inc. NY D E B R R 6 0 7 4 3 4 0 0 1				10. US EPA ID Number		E. State Trans ID-NJDEP 55996	
9. Designated Facility Name and Site Address CYCLE CHEM, INC. 215 SOUTH FIRST STREET ELIZABETH, NJ 07206				10. US EPA ID Number		F. Transporter's Phone () 315 471-0503	
				H. Facility's Phone () 908 345-5800		G. State Facility's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM					12. Containers No.	13. Total Quantity	14. Unit (WT/VOL)
a.	X	WASTE CORROSIVE LIQUID, FLAMMABLE, N.O.S. (POTASSIUM HYDROXIDE, ETHANOL), 8, UN2920, PGII			15		DOO1 DOO2
b.	X	WASTE FLAMMABLE LIQUID, N.O.S. (ISOPROPYL ALCOHOL), 3, UN1993, PGII					DOO1
c.	X	WASTE FLAMMABLE LIQUID, N.O.S. (COAL TAP PITCH, NAPHTHA), 3, UN1993, PGII					DOO1
d.	X	WASTE CORROSIVE LIQUID, FLAMMABLE N.O.S. (POTASSIUM HYDROXIDE, ETHANOL), 8, UN2920, PGII			1001	DM00010	DOO1 DOO2
12. Additional Descriptions for Materials Listed Above LIN 2920, PGII					13. Handling Codes for Wastes Listed Above		
a. SEE PROFILE (L, T, O)					a. S1		
b. SEE PROFILE (L, T)					b. S1		
15. Special Handling Instructions and Additional Information 11a. Code 303037-04292 ID-0111c. Code 303037LP1 UNK PO #: 33831 A. NY-T G. NY-T 11b. Code 303037-04290 ID-0111d. Code 303037-04290 Job #: R2376 B. NY-T Emergency Phone: (315) 471-0503							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, If I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name GREGORY A. LYONS				Signature [Signature]		Month Day Year 03 17 99	
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name CHRISTIAN HANULSON				Signature [Signature]		Month Day Year 03 17 99	
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name [Signature]				Signature [Signature]		Month Day Year 03 31 99	
19. Discrepancy Indication Space Ib) delete DOO1 and ID02 NO PETE NOT II							
20. Facility Owner or Operator, Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name EILEEN ELLIS				Signature [Signature]		Month Day Year 04 01 99	

NJ A 2889211



State of New Jersey
Department of Environmental Protection
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421



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

Form Approved OMB No. 2050-C039 Expires 3-30-97

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD9822597488921	Manifest Document No. 1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address THE NORRY COMPANY P.O. BOX 51 ROCHESTER, NY 14601			A. State Manifest Document Number NJA 2889211		
4. Generator's Phone 716 272-9000		5. State Generator's ID (Gen. Site Address) 3750 MONROE AVENUE PITTSFORD, NY 14534		B. State Trans. ID-NJDEP 88662	
6. Transporter 1 Company Name ENVIRONMENTAL PRODUCTS & SERVICES, INC		7. US EPA ID Number NYD980761191		C. State Trans. ID-NJDEP 88662	
8. Transporter 2 Company Name Environmental Products & Services, Inc		9. US EPA ID Number NYD980761191		D. Transporter's Phone 315 471-0503	
10. Display Facility Name and Site Address CYCLE CHEM, INC. 215 SOUTH FIRST STREET ELIZABETH, NJ 07206		11. US EPA ID Number NJD002200045		E. State Trans. ID-NJDEP 88662	
12. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) WASTE CORROSIVE LIQUID, FLAMMABLE, N.O.S. (POTASSIUM HYDROXIDE, ETHANOL), 8, UN2920, PGII		13. Containers No. Type 15		14. Total Quantity Unit 15 G	
15. Additional Descriptions for Materials Listed Above LN 2920, PGII		16. Handling Codes for Wastes Listed Above a. S01 b. S01 T c. S01 d. T S01		17. Waste No. D001 D002	
18. Special Handling Instructions (Additional Information) 11a. Code 363637-04292 ID-00 11b. Code 365657-04290 ID-01 11c. Code 365657LP#1 UIK PO #: 33881 11d. Code 365657-4290 ID-01 Job #: R2376 Emergency Phone: (315) 471 - 0503 EB# 32, 128, 128, 132		19. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name, hazard class, ID number, marking and labeling, and are in all respects in proper condition for transport by highway according to applicable international and national code requirements. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste and used the best waste management method that is available to me and that I can afford.		A. NY=T C. NY=T B. NY=T D. NY=T	
20. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name: GREGORY A. LYONS Signature: <i>[Signature]</i> Month Day Year: 03/17/99		21. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name: THOMAS A HENDERSON Signature: <i>[Signature]</i> Month Day Year: 03/17/99		22. Discrepancy Indication Space ADDITIONAL DRIVER RICHARD TERPSTRA IID) PGII NOT !!	
23. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name: HELEN ELLES Signature: <i>[Signature]</i> Month Day Year: 04/01/99					

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ 2889211



State of New Jersey
 Department of Environmental Protection
 Hazardous Waste Regulation Program
 Manifest Section
 CN 421, Trenton, NJ 08625-0421

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.) Form Approved OMB No. 2050-0039, Expires 1-30-97

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD98225974889520		Manifest Document No. 0		2. Page 1 of 1		Information in the shaded areas is not required by Federal law					
3. Generator's Name and Mailing Address THE NORRY COMPANY P.O. BOX 51 ROCHESTER, NY 14601				A. State Manifest Document Number NJA 2889520		B. Generator's (Current) Address 3750 MONROE AVENUE PITTSFORD, NY 14534							
4. Generator's Phone # 716 272-9000		6. US EPA ID Number NYD980761191		C. State Trans. ID-NJDEP S50060		Decal No.-							
5. Transporter 1 Company Name ENVIRONMENTAL PRODUCTS & SERVICES, INC				8. US EPA ID Number NYD98101761191		D. Transporter's Phone # 315 471-0503		E. State Trans. ID-NJDEP S50060					
7. Transporter 2 Company Name Environmental Products & Services				10. US EPA ID Number NJDD002200046		Decal No.- 12447		F. Transporter's Phone # 315 471-0503					
9. Designated Facility Name and Site Address CYCLE CHEM, INC. 215 SOUTH FIRST STREET ELIZABETH, NJ 07206				H. Facility's Phone # 908 355-5800									
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) X WASTE CORROSIVE LIQUID, N.O.S. (METHYLENE PHOSPHONIC ACID), 8, UN1760, PGIII						12. Containers No. Type		13. Total Quantity		14. Unit Wt./Vol		15. Waste No.	
						001 DE 00030				D002			
16. Additional Descriptions for Materials Listed Above SEE PROFILE 4289 (L,C)						K. Handling Codes for Wastes Listed Above S01 T							
17. Source Handling Instructions and Additional Information 11a. Code 365657-CE#022 ERG#154 PO #: 33915 Job #: R2376 A. NY=T Emergency Phone: (315) 471 - 0503													
18. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are consistent packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the adverse and future impact to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and I select the best waste management method that is available to me and that I can afford.													
19. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name: GREGORY A. LYONS				Signature: <i>[Signature]</i>		Month Day Year: 03 26 99							
20. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name: RICHARD TERASTRA				Signature: <i>[Signature]</i>		Month Day Year: 03 26 99							
21. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19 Printed/Typed Name: CHESTER P BRUNALLO				Signature: <i>[Signature]</i>		Month Day Year: 04 08 99							
22. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19 Printed/Typed Name: HELEN ELLIS				Signature: <i>[Signature]</i>		Month Day Year: 04 09 99							

LDC ON FILE

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ 2889520



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820 Albany, New York 12212

Please print or type

UNIFORM HAZARDOUS WASTE MANIFEST

NY D 9 8 2 2 6 9 7 4 8 8 7 1 5 1

Generator Name, Address and City
**Bx 3750 Monroe Ave. Associates
3750 Monroe Ave., Pittsford, NY 14534
Telephone No. 716 482-5700**

Generator's Identification No.
Hazmat Environmental Group Inc. NY D 8 0 7 6 9 9 4 7

Generator's Name, Address and City
**General Electric Co.
175 Milens Road
Tonawanda, NY 14150 NY D 0 6 7 5 3 9 9 4 0**

Manifest Number
1

State Manifest Document No.
NY A805950 9

Generator's Site
same

State Transportation Department
**75298NY
716-877-5533**

Facility's Phone
716 876-1200

In case of emergency or spill immediately call the National Response Center (800) 424-9802 and the N.Y. Department of Transportation (518) 457-7362.

Quantity	Waste No.
Hazardous Substance Solid, N.O.S., OR1-E, NA9188, RQ (Polychlorinated Biphenyls)	0 0 1 T P / 2 0 0 0 P B006
Hazardous Substance Liquid, N.O.S., ORM-E, NA9188, RQ (Polychlorinated Biphenyls)	0 0 4 D L / 0 2 8 6 0 P B001
<i>Hazardous Substance Solid, N.O.S., -orm-E, NA9188 RQ (Polychlorinated Biphenyls)</i>	<i>0 0 1 0 M 0 0 6 5 P B007</i>
Additional Description for Material (See Article 270.1)	K Handling Codes for Wastes Listed Above
Drained PCB Transformer <i>PCB Solids</i>	<input checked="" type="checkbox"/> L <input checked="" type="checkbox"/> L
PCB Fluid in Drums	<input type="checkbox"/> B <input type="checkbox"/>

In case of spill, dike and contain, Contact General Electric Co. at 1-800-635-8918 ext. 66

GENERATOR'S CERTIFICATION
I, the undersigned, certify that the information furnished on this manifest is true and correct, and that I am a representative of the generator of the waste described on this manifest. I have signed this manifest and the shipping papers accompanying the waste, and I have provided the appropriate handling, storage, and disposal instructions for the waste. I have provided the appropriate handling, storage, and disposal instructions for the waste. I have provided the appropriate handling, storage, and disposal instructions for the waste.

Printed/Typed Name: **George Maxine Waites** Signature: *George R. Waites* Mo. Day Year: **10 4 2 2 18 9**

17. Transporter 1 - Acknowledgement of Receipt of Materials:
Printed/Typed Name: **PAUL P. BRUTCHER** Signature: *Paul P. Brucher* Mo. Day Year: **10 4 22 89**

18. Transporter 2 - Acknowledgement of Receipt of Materials:
Printed/Typed Name: Signature: Mo. Day Year:

19. Discrepancy Indication Space

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

Printed/Typed Name: **Robert Keppell** Signature: *Robert Keppell* Mo. Day Year: **04 22 89**

NY A 805950 9

48-14-1 (4/81)

See cover sheet for instructions

PLEASE TYPE

Part A:

STATE OF NEW YORK DEPARTMENT OF ENVIRONMENTAL CONSERVATION HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY 232206 3

GENERATOR NAME: SINGER EDUCATION SYSTEMS, PHONE: (716) 586-2020, EPA ID NO.: NY1D0102205987

TRANSPORTER NO. 1: CATARACT TRUCKING CO., PHONE: (716) 284-7837, EPA ID NO.: NY1D01129551134

TRANSPORTER NO. 2: [Empty]

TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY: CECOS INTERNATIONAL INC., PHONE: (716) 731-3281, EPA ID NO.: NY1D0511809952

THIS FORM IS NO. OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS NY 2322063

To Be TYPED by Generator

Table with 10 columns: PROPER US DOT SHIPPING NAME, US DOT HAZARD CLASS, UN/NA NUMBER, FORM, NET QUANTITY, UNITS, CONTAINERS NO., TYPE, EPA HAZ CODE, EPA WASTE TYPE. Rows include: 1. FLAMMABLE LIQUID N.O.S., 2. WASTE CUTTING OIL, 3. WATER SOLUBLE CUTTING OIL, 4. NICKEL SOLUTION, 5. WASTE INK, 6. ETHYLENE DICHLORIDE.

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

WORK ORDER #48416 PRODUCTION CODE #1923-B/D/C/E/K/J

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE: William G. Caulkins, Manager Plant Services

DATE SHIPPED: 11/11/82, EXPECTED ARRIVAL DATE: 11/11/82, TRANSPORTER NO. 1 SIGNATURE: Victor J. LoStracco, PERMIT NUMBER: 9A0911, DATE RECEIVED: 11/11/82

COPY 1 Disposal State - Mailed by Generator Tear at this Perforation

48-14-1 (11/80)
See cover sheet
for instructions
PLEASE TYPE

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
HAZARDOUS WASTE MANIFEST

Part A:

DOCUMENT NO. **NY105840 2**

GENERATOR NAME Singer Education Systems		PHONE (716) 586-2020	EPA ID NO. NY10101212105191817
SITE ADDRESS 3750 Monroe Avenue, Rochester, NY 14603			
TRANSPORTER NO. 1 Tonawanda Tank Transport Service Inc.		PHONE	EPA ID NO. NY10109171614181011
SITE ADDRESS 1140 Military Road, Buffalo, NY 14217			
TRANSPORTER NO. 2		PHONE	
SITE ADDRESS			
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cecos International, Inc.		PHONE (716) 73103281	EPA ID NO. NY101015111010101512
SITE ADDRESS 56th & Pine Avenue, Niagara Falls, NY 14302			

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY ~~105840 2~~

To Be TYPED by Generator

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS NO.	EPA HAZ CODE	EPA WASTE TYPE
1 Waste Flammable Liquid N.O.S.	Flammable Liquid	UN-1993	01	1185	01	37	11	D101
2 Waste Flammable Solids N.O.S.	Flammable Solids	UN-1325	02	240	03	2	11	D101
3								
4								
5								
6								

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

Cecos Work Order #47156 Prod. Code #1923-M

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>W.G. Caulkins</i> William G. Caulkins, Manager Plant Services Please type name also	DATE SHIPPED 10 07 82 Mo. Day Yr.	EXPECTED ARRIVAL DATE 11 07 82 Mo. Day Yr.
TRANSPORTER NO. 1 SIGNATURE <i>J. Radich</i> "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."	TRANSPORTER NO. 1 PERMIT NUMBER 9 A XX-108101	DATE RECEIVED 11 07 82 Mo. Day Yr.

COPY 1 Disposal State—Mailed by Generator
Tear at this Perforation

48-14-1 (4/81)

See cover sheet,
for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY **276801 3**

Part A:

GENERATOR NAME Telex Communications, Inc.	PHONE (716) 586-2020	EPA ID NO. NYD002205987
SITE ADDRESS 3750 Monroe Avenue, Rochester, NY 14603		
TRANSPORTER NO. 1 Cecos International	PHONE (716) 873-4200	NYD080336241
SITE ADDRESS 2321 Kenmore Avenue, Buffalo, NY 14207		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cecos International	PHONE (716) 873-4200	NYD080336241
SITE ADDRESS 2321 Kenmore Avenue, Buffalo, NY 14207		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY **27680133**

To Be TYPED by Generator

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
						NO.	TYPE		
1 Waste Flammable Liquid N.O.S.	Flammable	UN1993	01	330	01	6	01	I	D001
2 Water Soluble Cutting Oil	None Hazard		01	330	01	6	01		
3 Waste Cutting Oil	None Hazard		01	935	01	7	01		
4 Waste Black Oxide Solution	None Hazard		01	165	01	3	01		
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

Work Order #70653 Product Codes 1923 - B/D/C/G

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>Richard W. Bacchetta</i> Please type name also Richard W. Bacchetta	DATE SHIPPED 12/01/83 Mo. Day Yr.	EXPECTED ARRIVAL DATE 12/01/83 Mo. Day Yr.
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>[Signature]</i>	TRANSPORTER NO. 1 PERMIT NUMBER 9A09D	DATE RECEIVED 12/01/83 Mo. Day Yr.



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY10101210591817	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY 14603				A. State Manifest Document No. NY A 274807 8		
4. Generator's Phone 716-385-5606				B. Generator's ID SAME		
5. Transporter 1 (Company Name) CECOS INTERNATIONAL		6. US EPA ID Number NY10080336241		C. State Transporter's ID 765161		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone 716123-4201		
9. Designated Facility Name and Site Address CECOS INTERNATIONAL INC. 56th ST & PINE AVE NIAGARA FALLS, N.Y. 14304				E. State Transporter's ID 9A-090		
10. US EPA ID Number NY10080336241				F. Transporter's Phone ()		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				G. State Facility's ID		
a. HAZARDOUS WASTE LIQUID N.O.S UN19189 ORM-E				12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol
					EST	
				01 TT	5000 G	D 006
J. Additional Descriptions for Materials listed Above TRACE OF DICHLOROETHANE AND REPORTABLE QUANTITY				K. Handling Codes for Wastes Listed Above		
				a	<input checked="" type="checkbox"/>	c
				b	<input type="checkbox"/>	d
15. Special Handling Instructions and Additional Information WO# 87237 ADDITIONAL WASTE TYPE PER LINK-A R# 8434001-E D007						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.						
Printed/Typed Name GEORGE R. WAITES				Signature <i>George R. Waite</i>		DATE 04/22/85
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Signature <i>Doug Barker</i>		DATE 04/22/85
Printed/Typed Name DOUG BARKER				Signature		DATE
18. Transporter 2 (Acknowledgement or Receipt of Materials)				Signature		DATE
Printed/Typed Name				Signature		DATE
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name DAVID P. JAROSZEWSKI				Signature <i>David Jaroszewski</i>		DATE 04/22/85

EPA Form 8700-22 (3-84)

COPY 1—Disposer State—Mailed by TSD Facility

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

TRANSPORTER

FACILITY

NY A 274807 8

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

1. Generator's US EPA No. NY 1010122059871010101		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER N.Y. 14615				A. State Manifest Document No. NYA 110397 6			
4. Generator's Phone () 716-586-2020				B. State generator's ID			
5. Transporter 1 (Company Name) CECOS INTERNATIONAL / SES 2321 KENNEDY AVE BUFFALO N.Y. 14207		6. US EPA ID Number NY 10180336241		C. State Transporter's ID U-52915			
7. Transporter 2 (Company Name)				D. Transporter's Phone () 716 873-4200			
				E. State Transporter's ID 9A-090			
				F. Transporter's Phone ()			
9. Designated Facility Name and Site Address CECOS / CER 5092 ABER ROAD WILLIAMSBURG, OHIO 45176				10. US EPA ID Number OH 104087433744		G. State Facility's ID	
				H. Facility's Phone (513) 724-6155			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol	
a. Cyanide Mixture, dry - Poison B UN 1588		No. Type 54 -1 DM 27000 P		I. Waste No. P030 F007			
b.							
c.							
d.							
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above			
a. 843400 1 IAIA		c.		a. 081		c.	
b.		d.		b.		d.	
15. Special Handling Instructions and Additional Information wo# 86837 AVOID ACIDS - DO NOT INGEST 54 DRS.							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name GEORGE R. WALTERS		Signature <i>George R. Walters</i>		DATE Month Day Year 03 12 1985			
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Printed/Typed Name Thomas R. Bradley		Signature <i>Thomas Bradley</i>		DATE Month Day Year 03 10 1985	
18. Transporter 2 (Acknowledgement or Receipt of Materials)		Printed/Typed Name		Signature		DATE Month Day Year	
19. Discrepancy Indication Space manifest # added - changed container # to 54 + added P030 to waste desc.							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.		Printed/Typed Name Tom Fleming		Signature <i>Tom Fleming</i>		DATE Month Day Year 3 21 85	

NYA 110397 6

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

1. Generator's US EPA No. WYD0022059871		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY 14603				A. State Manifest Document No. NYA 110314 8			
4. Generator's Phone () 716-385-5606				B. State generator's ID SAME			
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE BUFFALO NY 14207				6. US EPA ID Number WYD0080336241			
7. Transporter 2 (Company Name)				8. US EPA ID Number			
9. Designated Facility Name and Site Address CECOS INTERNATIONAL INC 56th ST + PINE AVE NIAGARA FALLS NY 14304				10. US EPA ID Number WYD0080336241			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total Quantity	14. Unit Wt/Vol
a. HAZARDOUS WASTE LIQUID N.O.S. UN19189 GRM-E				No. Type		EST.	I. Waste No.
						01TT 5000 G	D006
J. Additional Descriptions for Materials Listed Above TRACE OF THIOCARBAMIDES NOW REGULATED QUANTITY				K. Handling Codes for Wastes Listed Above			
a				b		c	d
b				c		d	e
15. Special Handling Instructions and Additional Information WO# 87278 PC 8434001-E				D007			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Signature		DATE	
Printed/Typed Name GEORGE R. WAITES				Signature <i>George R. Waites</i>		Month Day Year 04 23 85	
18. Transporter 2 (Acknowledgement or Receipt of Materials)				Signature		DATE	
Printed/Typed Name Richard Goodman				Signature <i>Richard Goodman</i>		Month Day Year 04 23 85	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name DAVID P. JAROSZEWSKI				Signature <i>David Jaroszewski</i>		DATE Month Day Year 10 12 85	

NYA 110314 8

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-85

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (516) 457-7382.

UNIFORM HAZARDOUS WASTE MANIFEST 1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7 1		Manifest Document No.		2. Page 1 of _____ Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELECOM COMMUNICATIONS INC. 3750 MONROE AVE ROCHESTER N.Y.			A. State Manifest Document No. NY A 110298 6		
4. Generator's Phone () 14603 716-385-5606			B. State generator's ID SAME		
5. Transporter 1 (Company Name) CECOS INTERNATIONAL		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID T 65160	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone () 716 875-4200	
9. Designated Facility Name and Site Address CECOS INTERNATIONAL INC. 560 ST & PINE AVE NIAGARA FALLS N.Y. 14304			10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		E. State Transporter's ID 7A-090
					F. Transporter's Phone ()
					G. State Facility's ID
					H. Facility's Phone (716) 282-2676
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity	
a. HAZARDOUS WASTE LIQUID N.O.S. UN1919 ORM-E		No. Type 01 TT		Unit EST 2213 5000 G	
b.				I. Waste No. D 006	
c.					
d.					
J. Additional Descriptions for Materials listed Above TRACE OF THICK ROCKETING NON REPORTABLE QUANTITY			K. Handling Codes for Wastes Listed Above		
a.			a. <input checked="" type="checkbox"/>		
b.			b. <input type="checkbox"/>		
c.			c. <input type="checkbox"/>		
d.			d. <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information WO# 87238 ADDITIONAL WASTE TYPE FOR LINE A PC# 8434001-E D007					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.					
Printed/Typed Name Geo RFE R. WATERS			Signature <i>Geo RFE R. Waters</i>		DATE Month Day Year 04 22 85
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Richard Goodman			Signature <i>Richard Goodman</i>		DATE Month Day Year 04 22 84
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name			Signature		DATE Month Day Year
19. Discrepancy Indication Space LINE A. #13 CHANGE AND #15 ADDITIONAL NPD PER G. WATERS / R. PROWASKA					
20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name DAVID P JAKOSZEWSKI			Signature <i>David P Jakowski</i>		DATE Month Day Year 04 23 85

NY A 110298 6

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7 1		Manifest Document No. 1 2		2. Page 1 of 2		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX Communications Inc. 3750 Monroe Avenue Rochester, New York 14615				A. State Manifest Document No. NYA 110287 8			
4. Generator's Phone No. 716-586-2020				B. State generator's ID SAME			
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE BUFFALO NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID U52915		D. Transporter's Phone (716) 873-4200	
7. Transporter 2 (Company Name)		8. US EPA ID Number		E. State Transporter's ID 9A-090		F. Transporter's Phone ()	
9. Designated Facility Name and Site Address CECOS International, Inc. 5500 Niagara Falls Blvd. Niagara Falls, NY 14304				10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		G. State Facility's ID	
				H. Facility's Phone (716) 731-3281			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.		
a. Waste flammable solid NOS, UN #1325 Ignitable		No. 1 Type D, M	900	P	D001		
b. Waste Oxidizer solid NOS, UN #1479 Ignitable		No. 4 Type D, M	1200	P	D001		
c. Waste poisonous solid corrosive NOS, UN #2928 Poison B		No. 1 Type D, M	300	P	D002		
d. Waste corrosive solid NOS, UN #1759 corrosive		No. 1 Type D, M	300	P	D002		
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above			
a		c		a	<input type="checkbox"/>	c	<input type="checkbox"/>
b		d		b	<input type="checkbox"/>	d	<input type="checkbox"/>
15. Special Handling Instructions and Additional Information Work Order # 86540 Non-Hazardous waste: 1 drum 300 lb Product Code 8434-001-A DOT/E8129							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name W.H.G. CAULKINS				Signature <i>W.H.G. Caulkins</i>		DATE Month Day Year 10 20 85	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Bob MacDougal				Signature <i>Bob MacDougal</i>		DATE Month Day Year 10 20 85	
18. Transporter 2 (Acknowledgement or Receipt of Materials) Printed/Typed Name				Signature		DATE Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name DAVID P. TROTSZIEWSKI				Signature <i>David P. Trotszewski</i>		DATE Month Day Year 10 20 85	

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

GENERATOR

TRANSPORTER

FACILITY

NYA 110287 8

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 0022059871	Manifest Document No. 2 of 2	2. Page 1 2 of 2	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY 14615			A. State Manifest Document No. NYA 110286 9		B. State generator's ID SAME	
4. Generator's Phone 716-586-2020		5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE ROCHESTER NY 14207		6. US EPA ID Number NY D 080336241		C. State Transporter's ID U52915
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 873-4200		E. State Transporter's ID 9A-090
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th ST + PINE AVE NIAGARA FALLS NY 14304			10. US EPA ID Number NY D 080336241		G. State Facility's ID	
					H. Facility's Phone (716) 282-2676	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	L. Waste No.	
a. WASTE CUTTING OIL sludge Solid		No. Type	ESTIMATED			
		210 DM	10500	P		
b. EMPTY DRUMS - DISTRESSED			ESTIMATED			
		450 DM	2000	P		
J. Additional Descriptions for Materials listed Above		K. Handling Codes for Wastes Listed Above				
a. NON-REG		c.		a. <input checked="" type="checkbox"/>	c. <input type="checkbox"/>	
b. NON-REG		d.		b. <input checked="" type="checkbox"/>	d. <input type="checkbox"/>	
15. Special Handling Instructions and Additional Information A - PRODUCT CODE - 8434001 - A WORK ORDER 86540 B - PRODUCT CODE - 8434001 - D						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.						
Printed/Typed Name W.H.G. CAULKINS		Signature <i>W.H.G. Caulkins</i>		DATE Month Day Year 10 21 85		
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Printed/Typed Name Bob MacDougal		Signature <i>Bob MacDougal</i>		DATE Month Day Year 02 08 85
18. Transporter 2 (Acknowledgement of Receipt of Materials)		Printed/Typed Name		Signature		DATE Month Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name DAVID P JAROSZEWSKI		Signature <i>David Jaroszewski</i>		DATE Month Day Year 02 06 85		

NYA 110286 9

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7862.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7	Manifest Document No.	2. Page 1 of 1 2	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address Telex Communications 3750 Monroe Avenue Rochester, NY 14603			A. State Manifest Document No. NY A 110258 1		
4. Generator's Phone (716) 586-2020			B. State generator's ID SAME		
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE BUFFALO NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID S-79416	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 873-4200	
9. Designated Facility Name and Site Address CECOS International, Inc. 5500 Niagara Falls Blvd. Niagara Falls, NY 14302		10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		E. State Transporter's ID 9A-090	
11. US DOT Description (including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity	
a. Waste Flammable Solid NOS, UN#1325, Ignitable		No. Type		14. Unit Wit/Vol	
b. Waste Oxidizer Solid NOS, UN#1479, Ignitable		2 7 D M		6 7 5 0 P	
c. Waste Corrosive Solid NOS, UN#1759, Corrosive		3 D M		7 5 0 P	
d. Waste Poisonous Solid Corrosive NOS, UN#2928 Poison B		9 D M		2 2 5 0 P	
J. Additional Descriptions for Materials listed Above		K. Handling Codes for Wastes Listed Above		I. Waste No.	
a		c		a <input type="checkbox"/> L <input type="checkbox"/> c <input type="checkbox"/> L	
b		d		b <input type="checkbox"/> L <input type="checkbox"/> d <input type="checkbox"/> L	
15. Special Handling Instructions and Additional Information Product Code 8434-001-A Non Hazardous Waste 1 Drum Work Order # 86491 DOT E-8129					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.					
Printed/Typed Name WM.G. CAULKINS		Signature 		DATE Month Day Year 10 11 8 18 85	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name ROBERT GRAF		Signature 		DATE Month Day Year 10 11 8 18 85	
18. Transporter 2 (Acknowledgement or Receipt of Materials) Printed/Typed Name		Signature		DATE Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name DAVID P JAROSZEWSKI		Signature 		DATE Month Day Year 10 12 3 18 85	

NY A 110258 1

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7 1		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER, NY 14603				A. State Manifest Document No. NY A 110255 4			
4. Generator's Phone 716-586-2020				B. State generator's ID SAME			
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE BUFFALO, NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID T65152		D. Transporter's Phone 716 813-4200	
7. Transporter 2 (Company Name)		8. US EPA ID Number		E. State Transporter's ID 9M-090		F. Transporter's Phone ()	
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th ST & PINE AVE NIAGARA FALLS, NY 14314				10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		G. State Facility's ID	
				H. Facility's Phone (716) 282-2676			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers	
a. HAZARDOUS WASTE SOLIDS FROM PLATING APLA N.O.S. 9189 ORM-E						No. Type	
						13. Total Quantity	
						14. Unit Wt/Vol	
						I. Waste No.	
b. 001CM						30 Y	
c. FOOB							
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above	
a. c						a. <input checked="" type="checkbox"/> L c. <input type="checkbox"/>	
b. d						b. <input type="checkbox"/> d. <input type="checkbox"/>	
15. Special Handling Instructions and Additional Information WORK ORDER 86509 PRODUCT CODE 8484001-H							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name W.H. G. CAULKINS				Signature <i>W.H. G. Caulkins</i>		DATE Month Day Year 10 11 28 85	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Bob MAC DOUGAN				Signature <i>Bob MacDougall</i>		DATE Month Day Year 10 11 28 85	
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name				Signature		DATE Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name DAVID P. JAROSZEWSKI				Signature <i>David Jaroszewski</i>		DATE Month Day Year 10 12 8 85	

NY A 110255 4

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved, OMB No. 2000-0404, Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER, N.Y. 14603				A. State Manifest Document No. NYA 110254 5			
4. Generator's Phone 716-586-2020				B. State generator's ID SAME			
5. Transporter 1 (Company Name) CELOS INTERNATIONAL 56 ST 2321 KENMERE AVE BUFFALO, NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID T65155		D. Transporter's Phone 716 873-4200	
7. Transporter 2 (Company Name)				E. State Transporter's ID 9A-090		F. Transporter's Phone ()	
9. Designated Facility Name and Site Address CELOS INTERNATIONAL 56th ST PINE AVE NIAGARA FALLS NY 14304				10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		G. State Facility's ID	
				H. Facility's Phone (716) 282-2676			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity		14. Unit WI/Vol	
		No. Type				I. Waste No.	
a. WASTE - PAINT SLODGE Solids UN 1325		47 DM		ESTIMATED 16400		P D001	
b. EMPTY PAILS - DISTRESSED		385 DM		6Y			
c. EMPTY DRUMS - DISTRESSED		27 DM		ESTIMATED 1100P			
d.							
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above			
a. 5 gallon empty pails on pallets				a. <input checked="" type="checkbox"/> L c. <input checked="" type="checkbox"/> L			
b.				b. <input type="checkbox"/> L d. <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information WORK ORDER 86508 PRODUCT CODE 8434001-C PRODUCT CODE 8434001-B							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name WM. G. CAULKINS				Signature <i>Wm G Caulkins</i>		DATE Month Day Year 10 11 25 85	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Richard Goodman				Signature <i>Richard Goodman</i>		DATE Month Day Year 10 12 25 85	
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name				Signature		DATE Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name DAVID P. JAROSZEWSKI				Signature <i>David Jaroszewski</i>		DATE Month Day Year 01 25 85	

NYA 110254 5

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

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In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 2 7 1		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC. 3750 MONROE AVE ROCHESTER NY 14603				A. State Manifest Document No. NY A 110252 7			
4. Generator's Phone () 716-586-2020				B. State generator's ID SAME			
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE BUFFALO NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID T65152		D. Transporter's Phone () 716-873-4200	
7. Transporter 2 (Company Name)		8. US EPA ID Number		E. State Transporter's ID 9A-090		F. Transporter's Phone ()	
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th ST & NINE AVE NIAGARA FALLS NY 14304 NY D 0 8 0 3 3 6 2 4 1				10. US EPA ID Number			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total Quantity	
				No. Type		14. Unit Wt/Vol	
a. HAZARDOUS WASTE SLUDGS FROM PLATING AREA - M.O.S. 9189 ORM-E				001CM		30 Y	
b.						FOOB	
c.							
d.							
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above			
a				a <input checked="" type="checkbox"/> L c <input type="checkbox"/>			
b				b <input type="checkbox"/> d <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information WORK ORDER 86507 PRODUCT CODE 8434001-H							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name WM. G. CAULKINS				Signature <i>Wm. G. Caulkins</i>		DATE Month Day Year 10 11 25 85	
17. Transporter 1 (Acknowledgement of Receipt of Materials)				DATE			
Printed/Typed Name				Signature		Month Day Year	
18. Transporter 2 (Acknowledgement or Receipt of Materials)				DATE			
Printed/Typed Name Bob MAC DOUGALL				Signature <i>Bob MacDougall</i>		DATE Month Day Year 01 25 85	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name DAVID P. JAROSZEWSKI				Signature <i>David Jaroszewski</i>		DATE Month Day Year 01 25 85	

NY A 110252 7



STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 10 0 2 2 0 5 9 8 7 1		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY, 14603						A. State Manifest Document No. NYA 110251 8			
4. Generator's Phone () 716-586-2020						B. State generator's ID SAME			
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE BUFFALO NY, 14207			6. US EPA ID Number NY D 10 8 0 3 3 6 2 4 1			C. State Transporter's ID T65152		D. Transporter's Phone () 716 873-4200	
7. Transporter 2 (Company Name)						8. US EPA ID Number		E. State Transporter's ID 9A-090	
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56 R ST & PINE AVE NIAGARA FALLS, NY 14304						10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		G. State Facility's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total	
a. HAZARDOUS WASTE SOLIDS FROM PLATING AREA - N.O.S. 9189 ORM-E						No. Type		Quantity	
						30		Y	
						001		CM	
								30	
								Y	
								FOO8	
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above			
a						b		c	
b						c		d	
15. Special Handling Instructions and Additional Information WORK ORDER 86493 PRODUCT CODE 8434001-H									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.									
Printed/Typed Name W.H.G. CAULKINS				Signature <i>W.H.G. Caulkins</i>		DATE Month Day Year 10 11 24 85			
17. Transporter 1 (Acknowledgement of Receipt of Materials)						DATE			
Printed/Typed Name BOB MACDOUGALL				Signature <i>Bob MacDougall</i>		DATE Month Day Year 10 11 24 85			
18. Transporter 2 (Acknowledgement or Receipt of Materials)						DATE			
Printed/Typed Name				Signature		DATE Month Day Year			
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name DAVID P. JAROSZEWSKI				Signature <i>David Jaroszewski</i>		DATE Month Day Year 10 11 24 85			

NYA 110251 8

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved, OMB No. 2000-0404, Expires 7-31-86

Please print or type

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

1. Generator's US EPA No. NY D 10 0 2 20 59 8 7 1		Manifest Document No. 2 of 2		2. Page 1 of 2		Information in the shaded areas is not required by Federal Law.	
UNIFORM HAZARDOUS WASTE MANIFEST				A. State Manifest Document No. NYA 110115 9			
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER, N.Y. 14603				B. State generator's ID SAME			
4. Generator's Phone 716-586-2020		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID S-19416		D. Transporter's Phone 716 873-4200	
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 NEW MOORE AVE BUFFALO, NY 14207				E. State Transporter's ID 9A-090			
7. Transporter 2 (Company Name)				F. Transporter's Phone ()			
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th ST & PINE AVE NIAGARA FALLS, NY 14304				10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1			
G. State Facility's ID				H. Facility's Phone 716 282-2676			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol	
a. WASTE CORROSIVE LIQUID, N.O.S. UN 1760		280 Drums		1540		G D002	
b.							
c.							
d.							
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above			
a.				a <input checked="" type="checkbox"/> c <input type="checkbox"/>			
b.				b <input type="checkbox"/> d <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information WORK ORDER 86491 PRODUCT CODE 8434001-L							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name W.H.G. CAULKINS				Signature <i>W.H.G. Caulkins</i>		DATE Month Day Year 10 11 1985	
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Printed/Typed Name ROBERT GRAF		Signature <i>Robert Graf</i>	
18. Transporter 2 (Acknowledgement or Receipt of Materials)				Printed/Typed Name		Signature	
19. Discrepancy Indication Space				Printed/Typed Name DAVID P. JAROSZEWSKI		Signature <i>David Jaroszewski</i>	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.				Printed/Typed Name		DATE Month Day Year 10 12 3 1985	

NYA 110115 9

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY, 14615				A. State Manifest Document No. NY A 110113 2			
4. Generator's Phone 716-289-1611				B. State generator's ID SAME			
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE BUFFALO NY 14207				C. State Transporter's ID TG5153			
6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1				D. Transporter's Phone (716) 873-4200			
7. Transporter 2 (Company Name)				E. State Transporter's ID 9A-090			
8. US EPA ID Number				F. Transporter's Phone ()			
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th ST - PINE AVE NIAGARA FALLS N.Y. 14304				10. US EPA ID Number		G. State Facility's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total Quantity	
a. HAZARDOUS WASTE Solids From plating AREA N.O.S 9189 ORM-E				No. Type		14. Unit Wt/Vol	
b. 001 CM				30 Y		F008	
c.							
d.							
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above			
a.				a. <input checked="" type="checkbox"/> L			
b.				b. <input type="checkbox"/>			
c.				c. <input type="checkbox"/>			
d.				d. <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information WORK ORDER 86487 PRODUCT CODE 8434001-H							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name WM G. CAULKINS				Signature <i>Wm G. Caulkins</i>		DATE Month Day Year 10/11/85	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name ROBERT CAW				Signature <i>Robert Caw</i>		DATE Month Day Year 10/11/85	
18. Transporter 2 (Acknowledgement or Receipt of Materials) Printed/Typed Name				Signature		DATE Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name DAVID P. JAROSZEWSKI				Signature <i>David Jaroszewski</i>		DATE Month Day Year 10/11/85	

In case of emergency or spill immediately call the National Response Center (800) 424-9802 and the N.Y. Department of Transportation (518) 457-7362.

GENERATOR

TRANSPORTER

FACILITY

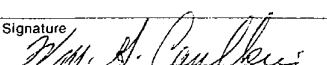
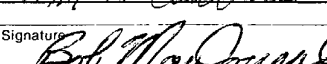

NYA 110113 2

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-6802 and the N.Y. Department of Transportation (518) 457-7382.

UNIFORM HAZARDOUS WASTE MANIFEST 1. Generator's US EPA No. <u>NY D 002205987</u> Manifest Document No.		2. Page 1 of _____ Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address <u>TELEX COMMUNICATIONS, INC</u> <u>3750 MONROE AVE</u> <u>ROCHESTER NY 14615</u>		A. State Manifest Document No. <u>NYA 110110 5</u>	
4. Generator's Phone () <u>716-289-1611</u>		B. State generator's ID <u>SAME</u>	
5. Transporter 1 (Company Name) <u>CECOS INTERNATIONAL</u> <u>2321 KENMORE AVE</u> <u>BUFFALO NY 14207</u>		C. State Transporter's ID <u>765153 NY</u>	
6. US EPA ID Number <u>NY D 080336241</u>		D. Transporter's Phone () <u>716 8734200</u>	
7. Transporter 2 (Company Name) _____		E. State Transporter's ID <u>9A-090</u>	
8. US EPA ID Number _____		F. Transporter's Phone () _____	
9. Designated Facility Name and Site Address <u>CECOS INTERNATIONAL</u> <u>56th ST + PINE AVE</u> <u>NIAQARA FALLS NY 14304</u>		10. US EPA ID Number <u>NY D 080336241</u>	
G. State Facility's ID _____		H. Facility's Phone <u>(716) 282-2676</u>	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers	
a. <u>HAZARDOUS WASTE Solids FROM PLATING</u> <u>AREA N.O.S. 9189 ORM-E</u>		No. Type Total Unit I. Waste No. <u>001CM</u> <u>30</u> <u>38</u> <u>FOOP</u>	
b. _____		c. _____	
c. _____		d. _____	
d. _____		e. _____	
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above	
a. _____ c. _____		a. <input checked="" type="checkbox"/> b. <input type="checkbox"/> c. <input type="checkbox"/> d. <input type="checkbox"/>	
b. _____ d. _____		e. _____	
15. Special Handling Instructions and Additional Information <u>WORK ORDER 86483</u> <u>PRODUCT CODE 8434001-H</u>			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.			
Printed/Typed Name <u>W.M.G. CAULKINS</u>		Signature 	
DATE Month Day Year <u>01 11 85</u>		DATE Month Day Year <u>01 11 85</u>	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name <u>Bob MacDougal</u>		Signature 	
DATE Month Day Year _____		DATE Month Day Year _____	
18. Transporter 2 (Acknowledgement or Receipt of Materials) Printed/Typed Name _____		Signature _____	
DATE Month Day Year _____		DATE Month Day Year _____	
19. Discrepancy Indication Space _____			
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.			
Printed/Typed Name <u>SAMIR S HADDAD</u>		Signature 	
DATE Month Day Year <u>10 11 85</u>		DATE Month Day Year <u>10 11 85</u>	

NYA 110110 5

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (618) 457-7362.

1. Generator's US EPA No. NY D 01022059871		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATION, INC 3750 MUNROE AVE ROCHESTER, NY 14615				A. State Manifest Document No. NYA 110109 6			
4. Generator's Phone () 716-289-1611				B. State generator's ID SAME			
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE BUFFALO, NY 14207		6. US EPA ID Number NY D 080336241		C. State Transporter's ID 0-51527 N.Y.		D. Transporter's Phone 716 873-4200	
7. Transporter 2 (Company Name)				8. US EPA ID Number		E. State Transporter's ID 9A090	
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th ST & PINE AVE NIAGARA FALLS, NY 14304				10. US EPA ID Number NY D 080336241		F. Transporter's Phone ()	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total Unit Quantity	
a. HAZARDOUS WASTE Solids From plating		b. AREA NBS 9189 ORN-E		No. Type		14. Unit Wt/Vol	
				001 CM		30 Y F008	
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above			
a. c				a. <input checked="" type="checkbox"/> b. <input type="checkbox"/> c. <input type="checkbox"/> d. <input type="checkbox"/>			
b. d				b. <input type="checkbox"/> d. <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information WORK ORDER 86482 PRODUCT CODE 8434001-H							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name W.M.G. CAULKINS				Signature <i>W.M.G. Caulkins</i>		DATE Month Day Year 10 11 15 85	
17. Transporter 1 (Acknowledgement of Receipt of Materials)							
Printed/Typed Name BOB MACDOUGALL				Signature <i>Bob MacDougall</i>		DATE Month Day Year 10 11 15 85	
18. Transporter 2 (Acknowledgement of Receipt of Materials)							
Printed/Typed Name				Signature		DATE Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name DAVID P. JAROSZEWSKI				Signature <i>David Jaroszewski</i>		DATE Month Day Year 10 11 15 85	

NYA 110109 6

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7 1	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal Law.		
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS, INC 3750 MONROE AVE ROCHESTER NY 14615			A. State Manifest Document No. NY A 110108 7		B. State generator's ID SAME		
4. Generator's Phone 716-289-1611			C. State Transporter's ID		D. Transporter's Phone 716 873-4200		
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE BUFFALO NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		E. State Transporter's ID 9A-090		F. Transporter's Phone ()	
7. Transporter 2 (Company Name)		8. US EPA ID Number		G. State Facility's ID		H. Facility's Phone	
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th ST + PINE AVE NIAGARA FALLS NY 14304			10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		G. State Facility's ID		H. Facility's Phone (716) 282-2676
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers			
a. HAZARDOUS WASTE Solids FROM plating AREA M.O.S. 9189 ORM-E				No.	Type	13. Total Quantity	14. Unit Wt/Vol
							I. Waste No.
b.						0.01 CM	30 Y
c.							F008
d.							
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above			
a.				a	<input checked="" type="checkbox"/>	c	<input type="checkbox"/>
b.				b	<input type="checkbox"/>	d	<input type="checkbox"/>
15. Special Handling Instructions and Additional Information WORK ORDER 86479 PRODUCT CODE 8434001-H							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name W.H.G. CAULKINS				Signature <i>W.H.G. Caulkins</i>		DATE Month Day Year 10 1 14 85	
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Printed/Typed Name Bob MACDOUGALL		Signature <i>Bob MacDougall</i>	
18. Transporter 2 (Acknowledgement of Receipt of Materials)				Printed/Typed Name		Signature	
19. Discrepancy Indication Space				Printed/Typed Name DAVID P. JAROSZEWSKI		Signature <i>David Jaroszewski</i>	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.				Printed/Typed Name		DATE Month Day Year 10 1 14 85	

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

RECEIVED

TRANSPORTER

FACILITY

NY A 110108 7

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

1. Generator's US EPA No. UNIFORM HAZARDOUS WASTE MANIFEST NY D 0 0 2 2 0 5 9 8 7		Manifest Document No.		2. Page 1 of Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATION, INC. 3750 MONROE AVE ROCHESTER, N.Y. 14615			A. State Manifest Document No. NYA 110107 8		
4. Generator's Phone 716-289-1611			B. State generator's ID U-51527		
5. Transporter 1 (Company Name) CECOS INTERNATIONAL INC 2321 KENMORG AVE BUFFALO NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID 9A090	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 873-4200	
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56 ST & PINE AVE NIAGARA FALLS NY 14304			10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		E. State Transporter's ID
					F. Transporter's Phone ()
					G. State Facility's ID
					H. Facility's Phone (716) 282-2676
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)					12. Containers
					13. Total Quantity
					14. Unit Wt/Vol
					I. Waste No.
a. HAZARDOUS WASTE SOLIDS FROM PLATING AREA N.O.S 9189 ORM-E					001 CM
					30 Y
					F008
J. Additional Descriptions for Materials listed Above					K. Handling Codes for Wastes Listed Above
a.					c.
b.					d.
15. Special Handling Instructions and Additional Information WORK ORDER 86477 PRODUCT CODE 8434001-H					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.					
Printed/Typed Name W. G. CAULKINS			Signature <i>W. G. Caulkins</i>		DATE Month Day Year 10 11 0 18 5
17. Transporter 1 (Acknowledgement of Receipt of Materials)			Printed/Typed Name FREDERICK PLUMMER		Signature <i>Frederick Plummer</i>
18. Transporter 2 (Acknowledgement or Receipt of Materials)			Printed/Typed Name		Signature
19. Discrepancy Indication Space			handling code for the above material is "L"		
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name DAVID P. JAROSZEWSKI			Signature <i>David Jaroszewski</i>		DATE Month Day Year 10 10 85

NYA 110107 8

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7 1	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address TELEX COMMUNICATION, INC 3750 MONROE AVE ROCHESTER, NY, 14615			A. State Manifest Document No. NY A 110106 9		
4. Generator's Phone 716-281-1611			B. State generator's ID 765152		
5. Transporter 1 (Company Name) CELOS INTERNATIONAL INC 2321 KENNEDY AVE BUFFALO, NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID 9A690	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone () 716 873-4200	
9. Designated Facility Name and Site Address CELOS INTERNATIONAL 56 th ST + PINE AVE NIAGARA FALLS, NY 14304		10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		E. State Transporter's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) a. HAZARDOUS WASTE SOLIDS FROM PLATING AREA M.O.S. 9189 ORM-E		12. Containers No. Type 001CM		13. Total Quantity 30 Y	
b.		14. Unit Wt/Vol F008		I. Waste No.	
c.		d.		J. Additional Descriptions for Materials listed Above	
a		c		K. Handling Codes for Wastes Listed Above <input checked="" type="checkbox"/> a <input type="checkbox"/> c	
b		d		<input type="checkbox"/> b <input type="checkbox"/> d	
15. Special Handling Instructions and Additional Information WORK ORDER 86478 PRODUCT CODE 8434001-H					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.					
Printed/Typed Name W.H.G. CAULKINS		Signature <i>W.H.G. Caulkins</i>		DATE 10/11/85	
17. Transporter 1 (Acknowledgement of Receipt of Materials)					
Printed/Typed Name Richard Goodman		Signature <i>Richard Goodman</i>		DATE 10/11/85	
18. Transporter 2 (Acknowledgement or Receipt of Materials)					
Printed/Typed Name		Signature		DATE	
19. Discrepancy Indication, Space Handling Code Ka = L					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name DAVID P. JAROSZEWSKI		Signature <i>David Jaroszewski</i>		DATE 10/11/85	

NY A 110106 9

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7382.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal Law.					
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS, INC 3750 MONROE AVE ROCHESTER NY 14615				A. State Manifest Document No. NY A 110103 3						
4. Generator's Phone () 716-289-1611				B. State generator's ID SAME						
5. Transporter 1 (Company Name) CELOS INTERNATIONAL 2321 KEN MORE AVE BUFFALO NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID T65153		D. Transporter's Phone () (716) 873-4200				
7. Transporter 2 (Company Name)		8. US EPA ID Number		E. State Transporter's ID 9A-090		F. Transporter's Phone ()				
9. Designated Facility Name and Site Address CELOS INTERNATIONAL 56th PINE AVE NIAGARA FALLS NY 14304				10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		G. State Facility's ID				
				H. Facility's Phone (716) 282-2676						
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)					12. Containers		13. Total Unit			
					No. Type		Quantity Wt/Vol			
a. HAZARDOUS WASTE SOLIDS FROM PLATING AREA N.O.S. 9189 ORM-E					0.01 CM		30 Y FOOT			
b.										
c.										
d.										
J. Additional Descriptions for Materials listed Above					K. Handling Codes for Wastes Listed Above					
a.					a. <input checked="" type="checkbox"/> L c. <input type="checkbox"/>					
b.					b. <input type="checkbox"/> d. <input type="checkbox"/>					
15. Special Handling Instructions and Additional Information WORK ORDER 86492 PRODUCT CODE 8434001-14										
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.										
Printed/Typed Name W.M. G. CAULKINS				Signature <i>W.M. G. Caulkins</i>		DATE Month Day Year 10 11 8 18 5				
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Printed/Typed Name DOUGLAS BARKER		Signature <i>Douglas Barker</i>		DATE Month Day Year 10 11 8 18 5		
18. Transporter 2 (Acknowledgement or Receipt of Materials)				Printed/Typed Name		Signature		DATE Month Day Year		
19. Discrepancy Indication Space										
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.										
Printed/Typed Name DAVID P. JARZEWSKI				Signature <i>David Jarzewski</i>		DATE Month Day Year 10 11 8 18 5				

NY A 110103 3

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-96

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-6802 and the N.Y. Department of Transportation (518) 457-7362.

TRANSPORTER

FACILITY

1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY 14603				A. State Manifest Document No. NYA 110098 8			
4. Generator's Phone () 716-385-5606				B. State generator's ID SAME			
5. Transporter 1 (Company Name) CELOS INTERNATIONAL 2321 KENNEDY RD AVE BUFFALO NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID T65160		D. Transporter's Phone () 716 873-4280	
7. Transporter 2 (Company Name)		8. US EPA ID Number		E. State Transporter's ID 9A-070		F. Transporter's Phone ()	
9. Designated Facility Name and Site Address CELOS INTERNATIONAL 57th ST + PINE AVE NIAGARA FALLS NY 14374 NY D 0 8 0 3 3 6 2 4 1				10. US EPA ID Number		G. State Facility's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total Quantity	
a. HAZARDOUS WASTE LIQUID N.O.S. UN19189 ORM-E				No. Type		14. Unit Wt/Vol	
b. UN19189 ORM-E				0 11 TT 2000 G		I. Waste No. D006	
J. Additional Descriptions for Materials listed Above TRACE OF TRICHLORATANE				K. Handling Codes for Wastes Listed Above			
a. NON REGULATED QUANTITY				a. <input checked="" type="checkbox"/>		c. <input type="checkbox"/>	
b. WOP 87280				b. <input type="checkbox"/>		d. <input type="checkbox"/>	
15. Special Handling Instructions and Additional Information PC 8434601-E				D007			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name GEORGE R. WAITES				Signature <i>George R. Waites</i>		DATE Month Day Year 10 4 2 4 18 5	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Richard Goodman				Signature <i>Richard Goodman</i>		DATE Month Day Year 10 4 2 4 18 5	
18. Transporter 2 (Acknowledgement or Receipt of Materials) Printed/Typed Name				Signature		DATE Month Day Year	
19. Discrepancy Indication Space Handling code was added on manifest.							
20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name DAVID P PROSZEWSKI				Signature <i>David Proszewski</i>		DATE Month Day Year 10 4 2 5 18 5	

NYA 110098 8

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address TELECOM COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY			A. State Manifest Document No. NY A 103640 4		
4. Generator's Phone 14603 716-385-5606			B. State generator's ID SAME		
5. Transporter 1 (Company Name) CELOS INTERNATIONAL 2321 KENMORE AVE BUFFALO NY 14207		6. US EPA ID Number NY D 0 8 0 3 6 2 4 1		C. State Transporter's ID T65161	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 873-4200	
9. Designated Facility Name and Site Address CELOS INTERNATIONAL INC 56th ST - PINE AVE NIAGARA FALLS NY 14304		10. US EPA ID Number NY D 0 8 0 3 6 2 4 1		E. State Transporter's ID 9A-090	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) a. HAZARDOUS WASTE LIQUID N.O.S UN 19189 ORM-E		12. Containers No. Type 01 TT 5000 G D006		F. Transporter's Phone ()	
J. Additional Descriptions for Materials listed Above TRAILER OF TRACHORATIVE NON REGULATED QUANTITY		K. Handling Codes for Wastes Listed Above a <input checked="" type="checkbox"/> T c <input type="checkbox"/> b <input type="checkbox"/> d <input type="checkbox"/>		G. State Facility's ID	
15. Special Handling Instructions and Additional Information W08 87279 PL 8434001-E D009		13. Total Quantity EST		14. Unit Wt/Vol G	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.					
Printed/Typed Name GEORGE R. WATERS		Signature <i>George R. Waters</i>		DATE Month Day Year 10 24 85	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name ROBERT H BRUECKNER		Signature <i>Robert H Brueckner</i>		DATE Month Day Year 10 24 85	
18. Transporter 2 (Acknowledgement or Receipt of Materials) Printed/Typed Name		Signature		DATE Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name DAVID P JAKOBSZEWSKI					
Signature <i>David P Jakobszewski</i>		DATE Month Day Year 10 24 85		EPA Form 8700-22 (3-84)	

20-T-22-PM-210

FACILITY

NY A 103640 4

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

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UNIFORM HAZARDOUS WASTE MANIFEST 1. Generator's US EPA No. <u>NY D 01022059871</u> Manifest Document No.		2. Page 1 of <u>1</u> Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address <u>TELEY COMMUNICATIONS INC</u> <u>3750 MONROE AVE</u> <u>ROCHESTER, NY</u>		A. State Manifest Document No. <u>NYA 103639 5</u>	
4. Generator's Phone () <u>14603</u> <u>716-385-5606</u>		B. State generator's ID <u>SAME</u>	
5. Transporter 1 (Company Name) <u>CELOS INTERNATIONAL</u> <u>2221 KEN MURPHY BLVD</u> <u>ROCHESTER, NY 14627</u>		C. State Transporter's ID <u>T65161</u>	
6. US EPA ID Number <u>NY D 090336241</u>		D. Transporter's Phone () <u>716 873 4200</u>	
7. Transporter 2 (Company Name)		E. State Transporter's ID	
8. US EPA ID Number		F. Transporter's Phone ()	
9. Designated Facility Name and Site Address <u>CECOS INTERNATIONAL INC</u> <u>56th ST & PINE AVE</u> <u>NIAGARA FALLS NY 14304</u>		G. State Facility's ID	
10. US EPA ID Number <u>NY D 080336241</u>		H. Facility's Phone <u>(716) 282-2676</u>	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers	
a. <u>HAZARDOUS WASTE LIQUID N.O.S</u> <u>UN 19189 ORM-E</u>		No. Type Total Quantity Unit Wt/Vol Waste No. <u>01 TT 5000 G D006</u>	
b.		c.	
c.		d.	
d.		J. Additional Descriptions for Materials listed Above <u>TRACE OF TRICHLOROETHANE</u> <u>NON REPORTABLE QUANTITY</u>	
K. Handling Codes for Wastes Listed Above a. <input checked="" type="checkbox"/> b. <input type="checkbox"/> c. <input type="checkbox"/> d. <input type="checkbox"/>		15. Special Handling Instructions and Additional Information <u>WO# 87239</u> <u>D007</u> <u>PC# 8434001-E</u>	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.			
Printed/Typed Name <u>GEORGE R. WAITES</u>		Signature <u>George R. Waites</u>	
DATE Month Day Year <u>10 23 85</u>		17. Transporter 1 (Acknowledgement of Receipt of Materials)	
Printed/Typed Name <u>DOUG BARKER</u>		Signature <u>Doug Barker</u>	
DATE Month Day Year <u>10 23 85</u>		18. Transporter 2 (Acknowledgement or Receipt of Materials)	
Printed/Typed Name		Signature	
DATE Month Day Year		19. Discrepancy Indication Space <u>LINE A- #13 CHANGE PER G. WAITES</u>	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.			
Printed/Typed Name <u>DAVID P. PROSZEWSKI</u>		Signature <u>David P. Proszecki</u>	
DATE Month Day Year <u>10 23 85</u>		EPA Form 8700-22 (3-84) COPY 1—Disposer State—Mailed by TSD Facility	

NYA 103639 5

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STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

G-1135

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7382.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. <i>NY D 002205987</i>	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address <i>TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY 14615</i>				A. State Manifest Document No. <i>NYA 103638 6</i>		
4. Generator's Phone <i>716-586-2020</i>				B. State generator's ID <i>SAME</i>		
5. Transporter 1 (Company Name) <i>CECOS INTERNATIONAL 2321 KENAMUE AVE BUFFALO NY 14207</i>		6. US EPA ID Number <i>NY D 080336241</i>		C. State Transporter's ID <i>T-65152 NY</i>		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone <i>716 813-4200</i>		
9. Designated Facility Name and Site Address <i>CECOS INTERNATIONAL 56th St + Pines Ave NIAGARA FALLS NY 14304</i>				E. State Transporter's ID <i>9A-090</i>		
10. US EPA ID Number <i>NY D 080336241</i>				F. Transporter's Phone ()		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) <i>a. HAZARDOUS WASTE SOLIDS FROM PLATING AREA N.O.S. 9199 ORM-E</i>				G. State Facility's ID		
12. Containers No. Type				H. Facility's Phone <i>(716) 282-7626</i>		
13. Total Quantity				14. Unit Wt/Vol		
15. I. Waste No.				16. Handling Codes for Wastes Listed Above		
17. Special Handling Instructions and Additional Information <i>WORK ORDER 86575 PRODUCT CODE 8434001-H</i>				18. J. Additional Descriptions for Materials listed Above		
19. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.				20. K. Handling Codes for Wastes Listed Above		
Printed/Typed Name <i>REINHOLD R. WAITES</i>		Signature <i>Reinhold R. Waites</i>		DATE Month Day Year <i>10 21 26 85</i>		
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name <i>DOUG BARKER</i>		Signature <i>Doug Barker</i>		DATE Month Day Year <i>10 21 26 85</i>		
18. Transporter 2 (Acknowledgement or Receipt of Materials) Printed/Typed Name		Signature		DATE Month Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name <i>DAVID P. JAROSZEWSKI</i>		Signature <i>David Jaroszewski</i>		DATE Month Day Year <i>10 22 6 85</i>		

NYA 103638 6

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 2 1		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROIE AVE ROCHESTER NY 14615				A. State Manifest Document No. NY A 103637 7			
4. Generator's Phone () 716-586-2020				B. State generator's ID SAME			
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORLE AVE BUFFALO NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID			
7. Transporter 2 (Company Name)				D. Transporter's Phone () (716) 873-4200			
8. US EPA ID Number				E. State Transporter's ID 9M-090			
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th ST + PINE AVE NIAGARA FALLS NY 14304				10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1			
G. State Facility's ID				H. Facility's Phone (716) 282-7626			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol	
a. HAZARDOUS WASTE SOLIDS FROM PLATING AREA N.O.S 9189 GRM-E		No. Type 001 CM		Quantity 30 Y		Waste No. FOUR	
b.							
c.							
d.							
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above			
a.				a. <input checked="" type="checkbox"/> L <input type="checkbox"/> c <input type="checkbox"/>			
b.				b. <input type="checkbox"/> <input type="checkbox"/> d <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information WORK ORDER: 86718 PRODUCT CODE 8434001-H							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations. FRANK R. McWHITES Signature: <i>Frank McWhites</i> DATE: 03-22-85 Month Day Year FRED LILLEY JR Signature: <i>Fred Lilley Jr</i>							
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name: FRED LILLEY JR Signature: <i>Fred Lilley Jr</i> DATE: 03 22 85 Month Day Year				18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name: Signature: DATE: 03 22 85 Month Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name: SAMIR HADDAD Signature: <i>Samir Haddad</i> DATE: 03 23 85 Month Day Year							

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

HAZARDOUS WASTE

TRANSPORTER

FACILITY

NY A 103637 7

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

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1. Generator's US EPA No. UNIFORM HAZARDOUS WASTE MANIFEST NY D 00 220 59871		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.					
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY 14615				A. State Manifest Document No. NY A 103632 3							
4. Generator's Phone () 716-586-2020				B. State generator's ID SAME							
5. Transporter 1 (Company Name) CELOS INTERNATIONAL 2321 KENNEDY AVE BUFFALO NY 14207				6. US EPA ID Number NY D 08 033 6241							
7. Transporter 2 (Company Name)				8. US EPA ID Number							
9. Designated Facility Name and Site Address CELOS INTERNATIONAL 56 ST PINE AVE NIAGARA FALLS NY 14304				10. US EPA ID Number NY D 08 033 6241							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. HAZARDOUS WASTE SOLIDS FROM PLATING AREA N.O.S. 9189 ORM-E				No. Type 001 CM		Quantity 30 Y		Unit Wt/Vol FOOB		Waste No.	
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information WORK ORDER 86563 PRODUCT CODE 8434001-H				16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name GEORGE R. WAITES				Signature <i>George R. Waites</i>				DATE Month Day Year 10 21 1985			
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name DOUG BARKER				Signature <i>Doug Barker</i>				DATE Month Day Year 10 21 1985			
18. Transporter 2 (Acknowledgement or Receipt of Materials) Printed/Typed Name				Signature				DATE Month Day Year			
19. Discrepancy Indication Space											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.											
Printed/Typed Name DAVID P JAROSZEWSKI				Signature <i>David Jaroszewski</i>				DATE Month Day Year 10 22 1985			

NY A 103632 3

48-1.

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NYD002205987	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MOURNE AVE ROCHESTER NY. 14615			A. State Manifest Document No. NYA 103629 6		B. State generator's ID SAME
4. Generator's Phone () 716-586-2020			C. State Transporter's ID T85163		
5. Transporter 1 (Company Name) CFCOS INTERNATIONAL 3321 KENMORE AVE BUFFALO NY. 14207		6. US EPA ID Number NYD080336241		D. Transporter's Phone () (716) 873-4200	
7. Transporter 2 (Company Name)		8. US EPA ID Number		E. State Transporter's ID 9A-090	
9. Designated Facility Name and Site Address CFCOS INTERNATIONAL 56th AVE AVE NIMGARA FALLS NY 14304		10. US EPA ID Number NYD080336241		F. Transporter's Phone ()	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity	
a. HAZARDOUS WASTE SOLIDS FROM PLATING AREA N.D.S. 9189 ORM-E		No. Type 001CM		14. Unit Wt/Vol 30 Y	
b.		c.		I. Waste No. F008	
c.		d.		J. Additional Descriptions for Materials listed Above	
d.		K. Handling Codes for Wastes Listed Above		a. <input checked="" type="checkbox"/> L	
J. Additional Descriptions for Materials listed Above		K. Handling Codes for Wastes Listed Above		b. <input type="checkbox"/> c. <input type="checkbox"/>	
a.		c.		b. <input type="checkbox"/> d. <input type="checkbox"/>	
b.		d.		15. Special Handling Instructions and Additional Information WORK ORDER 86551 PRODUCT CODE 8434001-H	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.					
Printed/Typed Name GEORGE R. WAILES		Signature <i>George R. Wailes</i>		DATE Month Day Year 2 18 85	
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Printed/Typed Name Bob MacDougal		Signature <i>Bob MacDougal</i>	
18. Transporter 2 (Acknowledgement or Receipt of Materials)		Printed/Typed Name		Signature	
19. Discrepancy Indication Space		Printed/Typed Name Jeffrey J. Wells		Signature <i>Jeffrey J. Wells</i>	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Printed/Typed Name		Signature	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Printed/Typed Name Jeffrey J. Wells		Signature <i>Jeffrey J. Wells</i>	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Printed/Typed Name		Signature	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Printed/Typed Name		Signature	

NYA 103629 6

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7 1		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.	
		3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY 14615		4. Generator's Phone () 716-586-2020		A. State Manifest Document No. NY A 103627 8		B. State generator's ID SAME	
5. Transporter 1 (Company Name) CELOS INTERNATIONAL 2321 KENNEDY AVE BUFFALO NY 14202		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID U 51527		D. Transporter's Phone () (716) 873-4200		E. State Transporter's ID 9A-090	
7. Transporter 2 (Company Name)		8. US EPA ID Number		F. Transporter's Phone ()		G. State Facility's ID		H. Facility's Phone ()	
9. Designated Facility Name and Site Address CELOS INTERNATIONAL 56th + PINE AVE NIAGARA FALLS NY		10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		12. Containers		13. Total Quantity		14. Unit Wt/Vol	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. HAZARDOUS WASTE SOLIDS FROM PLATING AREA U.O.S. 9189 ORN-E		No. Type 001 CM		Quantity 30 Y		Unit Wt/Vol F008		Waste No.	
b.									
c.									
d.									
J. Additional Descriptions for Materials listed Above		K. Handling Codes for Wastes Listed Above							
a.		c.		a. <input checked="" type="checkbox"/>		c. <input type="checkbox"/>			
b.		d.		b. <input type="checkbox"/>		d. <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information WORK ORDER 86550 PRODUCT CODE 8434001-H									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.									
Printed/Typed Name W.M. G. CAULKINS		Signature <i>W.M. G. Caulkins</i>		DATE Month Day Year 10 21 4 85					
17. Transporter 1 (Acknowledgement or Receipt of Materials)									
Printed/Typed Name DOUG BARKER		Signature <i>Doug Barker</i>		DATE Month Day Year 1 21 4 85					
18. Transporter 2 (Acknowledgement or Receipt of Materials)									
Printed/Typed Name		Signature		DATE Month Day Year					
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name DAVID P. JAROSZEWSKI		Signature <i>David Jaroszewski</i>		DATE Month Day Year 10 21 4 85					

NY A 103627 8

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NYD 01022059871	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal Law.		
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY 14615				A. State Manifest Document No. NYA 103626 9			
4. Generator's Phone () 716-586-2020				B. State generator's ID SAME			
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE BUFFALO NY 14207				C. State Transporter's ID U52915			
6. US EPA ID Number NYD 080336241				D. Transporter's Phone () 716 873-4200			
7. Transporter 2 (Company Name)				E. State Transporter's ID 9A-090			
8. US EPA ID Number				F. Transporter's Phone ()			
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th ST & PINE AVE NIAGARA FALLS NY 14304				10. US EPA ID Number NYD 080336241			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total Quantity	14. Unit Wt/Vol
a. WASTE CUTTING OIL SLUDGE SOLID				No.	Type	ESTIMATED	I. Waste No.
				800	M40	000	P
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above			
a. NON-REG				a. <input checked="" type="checkbox"/> L <input type="checkbox"/> c <input type="checkbox"/>			
b.				b. <input type="checkbox"/> <input type="checkbox"/> d <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information WO# 86534 PRODUCT CODE 8434001-D							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name W.H.G. CAULKINS				Signature <i>W.H.G. Caulkins</i>		DATE Month Day Year 02 20 785	
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Printed/Typed Name Bob MacDougal		Signature <i>Bob MacDougal</i>	
18. Transporter 2 (Acknowledgement of Receipt of Materials)				Printed/Typed Name		Signature	
19. Discrepancy Indication Space				Printed/Typed Name DAVID P. PROSZENSKI		Signature <i>David Proszewski</i>	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.				Printed/Typed Name		DATE Month Day Year 02 20 785	

NYA 103626 9

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type

1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7 1		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY 14615				A. State Manifest Document No. NYA 103625 1			
4. Generator's Phone () 14615 716-586-2020				B. State generator's ID SAME			
5. Transporter 1 (Company Name) CELOS INTERNATIONAL 2321 KENMORE AVE BUFFALO NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID T65163 NY		D. Transporter's Phone 716 873-4200	
7. Transporter 2 (Company Name)		8. US EPA ID Number		E. State Transporter's ID 9A-090		F. Transporter's Phone ()	
9. Designated Facility Name and Site Address CELOS INTERNATIONAL 560 ST & PINE AVE NIAGARA FALLS NY 14304				10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		G. State Facility's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total Quantity	
a. HAZARDOUS WASTE SOLIDS FROM PLATING AREA N.O.S. 9189 ORM-E				No. Type		14. Unit Wt/Vol	
				001 CM		30 Y	
						FOOB	
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above			
a				a <input checked="" type="checkbox"/> L c <input type="checkbox"/>			
b				b <input type="checkbox"/> d <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information WORK ORDER 86541 PRODUCT CODE 8434001-H							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name W.H. G. CAULKINS				Signature <i>W.H. G. Caulkins</i>		DATE Month Day Year 02 11 85	
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Signature <i>Bob MacDougal</i>		DATE Month Day Year 02 11 85	
Printed/Typed Name Bob MacDougal				Signature		DATE Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name DAVID P JAROSZEWSKI				Signature <i>David Jaroszewski</i>		DATE Month Day Year 02 11 85	

In case of emergency or spill immediately call the National Response Center (800) 424-6802 and the N.Y. Department of Transportation (518) 457-7382.

GENERATOR

TRANSPORTER

FACILITY

NYA 103625 1

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 0 0 2 2 0 5 9 8 7	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal Law.						
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY				A. State Manifest Document No. NY A 103623 3							
4. Generator's Phone () 14615				B. State generator's ID SAME							
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE BUFFALO NY 14207		6. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		C. State Transporter's ID T65152							
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone () 716 873 4200							
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th ST + PINE AVE NIAGARA FALLS, NY 14304		10. US EPA ID Number NY D 0 8 0 3 3 6 2 4 1		E. State Transporter's ID 9A-070							
				F. Transporter's Phone ()							
				G. State Facility's ID							
				H. Facility's Phone (716) 282-2676							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. HAZARDOUS WASTE SOLIDS FROM PLATING AREA N.O.S 9189 ORATE		No. Type		30 Y		FOOB					
b.											
c.											
d.											
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above							
a.				a		L		c			
b.				b		d					
15. Special Handling Instructions and Additional Information WORK ORDER 86531 PRODUCT CODE 8434001-H											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.											
Printed/Typed Name WM G CAULKINS				Signature <i>WM G Caulkins</i>				DATE Month Day Year 10 20 85			
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Printed/Typed Name R. P. Boden				Signature <i>R. P. Boden</i>		DATE Month Day Year 10 20 85	
18. Transporter 2 (Acknowledgement or Receipt of Materials)				Printed/Typed Name				Signature		DATE Month Day Year	
19. Discrepancy Indication Space											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.											
Printed/Typed Name DAVID P PROSZEWSKI				Signature <i>David P Proszewski</i>				DATE Month Day Year 10 20 85			

NYA 103623 3

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 010 220 59871	Manifest Document No.	2. Page 1 of 2	Information in the shaded areas is not required by Federal Law.		
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INTL 3750 MONROE AVE ROCHESTER NY 14615				A. State Manifest Document No. NYA 103622 4			
4. Generator's Phone () 716-586-2020				B. State generator's ID SAME			
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 WENMORE AVE BUFFALO NY 14204		6. US EPA ID Number NY D 080 336 241		C. State Transporter's ID			
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 873-4200			
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th + PINE AVE NIAGARA FALLS NY 14304		10. US EPA ID Number NY D 080 336 241		E. State Transporter's ID 9A 090			
				F. Transporter's Phone ()			
				G. State Facility's ID			
				H. Facility's Phone (716) 282-2676			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers	
						No.	Type
a. WASTE NICKLE SULFATE SOLUTION UN/1911 RQ 5000/2270 ORM-E						007	DM
b. WASTE CORROSIVE LIQ N.O.S UN/1760						006	DM
c.							
d.							
13. Total Quantity						14. Unit Wt/Vol	15. Waste No.
						385	
						07	B F006
						330	B F006
						06	B F006
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.						K. Handling Codes for Wastes Listed Above	
a.						<input checked="" type="checkbox"/>	<input type="checkbox"/>
b.						<input checked="" type="checkbox"/>	<input type="checkbox"/>
15. Special Handling Instructions and Additional Information WO# 86518 PRODUCT CODE 8434001-K PRODUCT CODE 8434001-AAC							
17. Transporter 1 (Acknowledgement of Receipt of Materials)						DATE	
Printed/Typed Name W. G. CAULKINS				Signature <i>W. G. Caulkins</i>		Month Day Year 10 21 01 1985	
18. Transporter 2 (Acknowledgement or Receipt of Materials)						DATE	
Printed/Typed Name Robert H Brueckner				Signature <i>Robert H Brueckner</i>		Month Day Year 10 21 01 1985	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name DAVID P JAROSZEWSKI				Signature <i>David Jaroszewski</i>		DATE Month Day Year 10 21 01 1985	

NYA 103622 4

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-85

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

1. Generator's US EPA No. IN Y D 0 0 2 2 0 5 9 8 7 1		Manifest Document No.		2. Page 1 of 2		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY - 14603				A. State Manifest Document No. NYA 103621 5		B. State generator's ID SAME	
4. Generator's Phone 716-586-2020		6. US EPA ID Number		C. State Transporter's ID		D. Transporter's Phone 716 873-4200	
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KEN MORE AVE BUFFALO NY 14207		8. US EPA ID Number IN Y D 0 8 0 3 3 6 2 4 1		E. State Transporter's ID 9A-090		F. Transporter's Phone ()	
7. Transporter 2 (Company Name)		10. US EPA ID Number		G. State Facility's ID		H. Facility's Phone (716) 282-2676	
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th ST + PINE AVE NIAGARA FALLS NY 14304				10. US EPA ID Number IN Y D 0 8 0 3 3 6 2 4 1			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total Quantity	
a. WASTE SOLIDS FROM PLATING AREA				No. 12 Type DM		Unit 6000	
b. WASTE PAINT SLUDGE SOLIDS/FLAMMABLE				No. 100 Type DM		Unit 12 P	
c. WASTE CUTTING OIL SOLID				No. 22 Type DM		Unit 8800	
d. WASTE CORROSIVE LIQUID, N.O.S				No. 20 Type DM		Unit 8000	
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above			
a. NON REG.				c. NON REG.		a. <input type="checkbox"/> b. <input type="checkbox"/> c. <input type="checkbox"/> d. <input type="checkbox"/>	
15. Special Handling Instructions and Additional Information WO# 86518 A PRODUCT CODE 8434001-J C PC# 8434001-D B PRODUCT CODE 8434001-C D PC# 8434001-L							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.							
Printed/Typed Name W.H.G. CAULKINS		Signature <i>W.H.G. Caulkins</i>		DATE Month Day Year 10 21 1985		17. Transporter 1 (Acknowledgement of Receipt of Materials)	
Printed/Typed Name ROBERT H BRUECKNER		Signature <i>Robert H Brueckner</i>		DATE Month Day Year 10 21 1985		18. Transporter 2 (Acknowledgement of Receipt of Materials)	
Printed/Typed Name		Signature		DATE Month Day Year		19. Discrepancy Indication Space	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name <i>David P. J. Proszewski</i>		Signature <i>DAVID P. J. PROSZEWSKI</i>		DATE Month Day Year 10 21 1985			

NYA 103621 5

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NYD0002205987	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY 14603			4. Generator's Phone () 14603 716-586-2020		A. State Manifest Document No. NYA 103619 7	B. State generator's ID SAME
5. Transporter 1 (Company Name) CECOS INTERNATIONAL 2321 KENMORE AVE BUFFALO NY 14207		6. US EPA ID Number NYD080336241		C. State Transporter's ID V 51521		D. Transporter's Phone () 716 873-4200
7. Transporter 2 (Company Name)		8. US EPA ID Number		E. State Transporter's ID 9A-090		F. Transporter's Phone ()
9. Designated Facility Name and Site Address CECOS INTERNATIONAL 56th ST + PINE AVE NIAGARA FALLS NY 14304			10. US EPA ID Number NYD080336241		G. State Facility's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) a. HAZARDOUS WASTE SOLIDS FROM PLATING AREA N.O.S. 9189 ORM-E			12. Containers No. Type		13. Total Quantity	14. Unit Wt/Vol
						15. Waste No.
J. Additional Descriptions for Materials listed Above			K. Handling Codes for Wastes Listed Above			
a			a <input checked="" type="checkbox"/> L c <input type="checkbox"/>			
b			b <input type="checkbox"/> d <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information WORK ORDER 86518 PRODUCT CODE 8434001-H						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.						
Printed/Typed Name W.H.G. CAULKINS			Signature <i>W.H.G. Caulkins</i>		DATE Month Day Year 0 2 10 1 85	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name BOB MACDOUGALL			Signature <i>Bob MacDougall</i>		DATE Month Day Year 0 2 10 1 85	
18. Transporter 2 (Acknowledgement or Receipt of Materials) Printed/Typed Name			Signature		DATE Month Day Year	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name DAVID P JAROSZEWSKI			Signature <i>David Jaroszewski</i>		DATE Month Day Year 10 20 4 85	

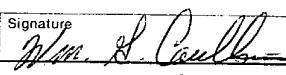

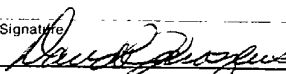
NYA 103619 7

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404, Expires 7-31-86

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-6802 and the N.Y. Department of Transportation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST 1. Generator's US EPA No. <u>NY D 0 0 2 2 0 5 9 8 7 1</u>		Manifest Document No. _____		2. Page 1 of _____ Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address <u>TELEX COMMUNICATIONS INC</u> <u>3750 MONROE AVE</u> <u>ROCHESTER NY</u>			A. State Manifest Document No. <u>NYA 103618 8</u>		
4. Generator's Phone <u>14603</u>			B. State generator's ID <u>SAME</u>		
5. Transporter 1 (Company Name) <u>CESCO INTERNATIONAL</u> <u>2321 KENMORE AVE</u> <u>BUFFALO NY</u>		6. US EPA ID Number <u>NY D 0 8 0 3 3 6 2 4 1</u>		C. State Transporter's ID <u>T65152</u>	
7. Transporter 2 (Company Name) _____			D. Transporter's Phone <u>716 873-4200</u>		
9. Designated Facility Name and Site Address <u>CESCO INTERNATIONAL</u> <u>56th ST & PINE AVE</u> <u>NIAGARA FALLS NY 14304</u>			8. US EPA ID Number <u>NY D 0 8 0 3 3 6 2 4 1</u>		
10. US EPA ID Number _____			E. State Transporter's ID <u>9A-090</u>		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) a. <u>HAZARDOUS WASTE SOLIDS FROM PLATING</u> <u>AREA N.O.S. 7189 ORN-LE</u>			12. Containers No. Type		13. Total Quantity 14. Unit Wt/Vol 15. Waste No.
			b. <u>001CM</u>		c. <u>30 Y</u>
					d. <u>FO08</u>
J. Additional Descriptions for Materials listed Above			K. Handling Codes for Wastes Listed Above		
a. _____			a. <input checked="" type="checkbox"/> L		
b. _____			b. <input type="checkbox"/>		
c. _____			c. <input type="checkbox"/>		
d. _____			d. <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information <u>WORK ORDER 86512</u> <u>PRODUCT CODE 8434001-H</u>					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.					
Printed/Typed Name <u>W.M. G. CAULKINS</u>		Signature 		DATE Month Day Year <u>10 12 85</u>	
17. Transporter 1 (Acknowledgement of Receipt of Materials)					
Printed/Typed Name <u>Bob MacDougall</u>		Signature 		DATE Month Day Year <u>01 29 85</u>	
18. Transporter 2 (Acknowledgement or Receipt of Materials)					
Printed/Typed Name _____		Signature _____		DATE Month Day Year _____	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name <u>DAVID P. JAROSZEWSKI</u>		Signature 		DATE Month Day Year <u>01 29 85</u>	

NYA 103618 8

STATE OF CONNECTICUT
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 Hazardous Waste MANIFEST SECTION, State Office Building, Hartford, CT 06106



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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. N.Y.D.002205987	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but may be required by State law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATIONS INC 3750 MONROE AVE ROCHESTER NY 14615			A. State Manifest Document Number CT A 0020533		B. State Gen. ID	
4. Generator's Phone (716) 586-2020		6. US EPA ID Number		C. State Tran. ID 8547TW		
5. Transporter 1 Company Name D+S TRANSPORTATION Spc. Inc		7. US EPA ID Number NY.D.088.658.64.6		D. Tran. Phone 315-475-5989		
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Tran. ID CT-HW-39		
9. Designated Facility Name and Site Address CELOS TREATMENT CORP 51 BRODRICK RD BRISTOL, CT. 06010		10. US EPA ID Number 1CT.000604488		F. Tran. Phone		G. State Facility's ID
		H. Facility's Phone 203-583-8917				
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.	
a. WASTE CYANIDE SOLUTION N.O.S. UN1835		04DF	200G		F007	
b. WASTE CYANIDE SOLIDS UN1689		04DM	200G		P106	
c.						
d.						
J. Additional Description for Materials Listed Above		K. Handling Codes for Waste Listed Above				
a. POISON B		SOL - T04 chemical oxidation				
b. POISON B		SOL - T04 chemical oxidation				
15. Special Handling Instructions and Additional Information WO# 140723 4 DRUMS OF SOLIDS - 4 DRUMS OF LIQUIDS						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations, and all applicable State laws and regulations.						
Printed/Typed Name GEORGE R. WAITES		Signature <i>George R. Waites</i>		Date 3/26/85		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Larry F. Purdy		Signature <i>Larry F. Purdy</i>		Date 10/31/85		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Date		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19						
Printed/Typed Name JOHN WYNNE		Signature <i>John Wynne</i>		Date 3/27/85		

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1-800-424-8802 FOR SPILLS WITHIN CONNECTICUT, CONTACT CT DEP - OIL AND CHEMICAL SPILLS AT (203)-466-3339.

GENERATOR

TRANSPORTER

FACILITY

COPY 2: GENERATOR STATE - Mailed by TSDf

CT A 0020533

(4/81)

cover sheet
instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

LEASE TYPE

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY **232208 1**

Part A:

GENERATOR NAME Telex Communications, Inc.	PHONE (716) 586-2020	EPA ID NO. NY 0002205987
SITE ADDRESS 3750 Monroe Avenue, Rochester, NY 14603		
TRANSPORTER NO. 1 Cecos International Inc.	PHONE (716) 873-4200	NY 051809952
SITE ADDRESS 2321 Kenmore Avenue, Buffalo, New York 14207		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cecos International Inc.	PHONE (716) 873-4200	NY 051809952
SITE ADDRESS 2321 Kenmore Avenue, Buffalo, New York 14207		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY **232208 1**

To Be TYPED by Generator

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
						NO.	TYPE		
1 Water Soluble Cutting Oil	None Hazard		01	5.5	01	1	01		
2 Waste Cutting Oil	None Hazard		01	8.25	01	1	01		
3 Flammable Liquid N.O.S.	Flammable	UN-1993	01	4.40	01	8	01	I	D001
4 Waste Hazardous Waste	ORM-E	NA-9189	01	5.5	01	1	2	E	D006
5 Liquid N.O.S.									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

Work Order #50644 Prod. Code #1923 - L/D/B/C/

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE

Richard Bacchetta
Please type name also

DATE SHIPPED

02 03 83
Mo. Day Yr.

EXPECTED ARRIVAL DATE

02 03 83
Mo. Day Yr.

TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accounted for transport conforms with the description on this manifest"

Joe Judge

TRANSPORTER NO. 1 PERMIT NUMBER

91090

DATE RECEIVED

2 03 83
Mo. Day Yr.

COPY 1 Disposal State-Mailed by Generator

Tear at this Perforation

48-14-1 (11/80)

See cover sheet for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY **117181 0**

Part A:

GENERATOR NAME SINGER EDUCATION SYSTEMS	PHONE 716-586-2020	EPA ID NO. NYD0002205987
SITE ADDRESS 3750 MONROE AVENUE, ROCHESTER, NY 14603		
TRANSPORTER NO. 1 RELCO SYSTEMS, INC.	PHONE 716-434-8100	NYD0094166873
SITE ADDRESS 7310 CHESTNUT RIDGE ROAD, LOCKPORT, NY 14094		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY <i>Cecos -</i>	PHONE	NYD080336241
SITE ADDRESS <i>Niagara Falls</i>		

THIS FORM IS NO 1 OF A TOTAL OF 1 THE FIRST MANIFEST DOCUMENT NO. IS NY 1171810

To Be TYPED by Generator

	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1	111 Trichloroethane	ORM-A	UN-2831	01	1045	01	19	01	T	F002
2	Flammable Liquid N.O.S.	FLAMMABLE	UN-1993	01	1485	01	27	01	I	D001
3	Waste Cutting Oil	NONE HAZARD		01	1265	01	23	01		
4	Water Soluble Cutting Oil	NONE HAZARD		01	605	01	11	01		
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

WORK ORDER #38980 PROD. CODE #1923 - A/B/C/D

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>William G. Caulkins</i> William G. Caulkins, Fabrication Manager <small>Please type name also</small>	DATE SHIPPED Mo. Day Yr. 02 18 82	EXPECTED ARRIVAL DATE Mo. Day Yr. 02 18 82
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>Stephen L. Johnson</i>	TRANSPORTER NO. 1 PERMIT NUMBER NY99A11312	DATE RECEIVED Mo. Day Yr. 02 18 82

COPY 1 Disposal State - Mailed by Generator

48-14-1 (11/80)

See cover sheet for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY **117186 3**

Part A:

GENERATOR NAME Singer Education Systems	PHONE 716-586-2020	EPA ID NO. NY D 0 0 2 2 0 5 9 8 7
SITE ADDRESS 3750 Monroe Avenue, Rochester, NY 14603		
TRANSPORTER NO. 1 NIW/GW Busenlehner	PHONE	NY T 3 7 0 0 1 2 4 0 3
SITE ADDRESS Royal Avenue, Niagara Falls, NY		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cecos International Inc.	PHONE 716-731-3281	NY D 0 5 1 8 0 9 9 5 2
SITE ADDRESS 56 St. & Pine Avenue, Niagara Falls, NY 14302		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY _____

To Be TYPED by Generator

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS NO.	TYPE	EPA HAZ CODE	EPA WASTE TYPE
1 Waste Benzene	Flammable	UN-1114	01	220	01	4	01	T	U019
2 Waste Nickel	None Hazard		01	550		10	01		
3									
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

Work Order #42543 Prod. Code #1923 B/E

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>William G. Caulkins</i> William G. Caulkins, Manager Plant Services <small>Please type name also</small>	DATE SHIPPED	EXPECTED ARRIVAL DATE
	Mo. Day Yr. 5 27 82	Mo. Day Yr. 5 27 82

TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>Alf Kaymer</i>	TRANSPORTER NO. 1 PERMIT NUMBER 9A-0451	DATE RECEIVED Mo. Day Yr. 5 27 82
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------	--------------------------------------

COPY 1 Disposal State—Mailed by Generator

Teat at this Perforation

48-14-1 (11-20)

See cover sheet for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
HAZARDOUS WASTE MANIFEST

DOCUMENT NO. **NY117182 7**

PLEASE TYPE

Part A:

GENERATOR NAME Singer Education Systems	PHONE 716-586-2020	EPA ID NO. NY 10 02 20 59 87
SITE ADDRESS 3750 Monroe Avenue, Rochester, NY 14603		
TRANSPORTER NO. 1 Cataract Trucking Co.	PHONE 716-284-7837	NY 10 12 19 15 11 19 14 NYD012955734
SITE ADDRESS 2445 Allen Avenue, Niagara Falls, NY 14303		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cecos International Inc.	PHONE 716-731-3281	NY 10 05 11 80 99 52
SITE ADDRESS 56 St. & Pine Avenue, Niagara Falls, NY 14302		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS **NY** _____

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
						NO.	TYPE		
1 Waste Cutting Oil	None Hazard		01	2200 22155	01	40 41	01	TI	M001
2 Water Soluble Cutting Oil	None Hazard		01	275	01	15	01	TI	M001
3 Flammable Liquid N.O.S.	Flammable	UN-1993	01	660	01	12	01	TI	D001
4									
5									
6									

To Be TYPED by Generator

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)
Work Order #42277 Prod. Code #1923-B/C/D

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>William G. Caulkins</i> William G. Caulkins, Manager Plant Services <small>Please type name also</small>	DATE SHIPPED 5 18 82 Mo. Day Yr.	EXPECTED ARRIVAL DATE 5 18 82 Mo. Day Yr.
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>D. King</i>	TRANSPORTER NO. 1 PERMIT NUMBER 9A-10911	DATE RECEIVED 5 18 82 Mo. Day Yr.

COPY 1 Disposal State-Mailed by Generator
Tear at this Perforation

48-14-1 (11/80)

See cover sheet for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

Part A:

DOCUMENT NO. **NY117186 3**

GENERATOR NAME Singer Education Systems		PHONE 716-586-2020	EPA ID NO. NYD002205987
SITE ADDRESS 3750 Monroe Avenue, Rochester, NY 14603			
TRANSPORTER NO. 1 NIW/GW Busenlehner		PHONE	EPA ID NO. NYT370012403
SITE ADDRESS Royal Avenue, Niagara Falls, NY			
TRANSPORTER NO. 2		PHONE	
SITE ADDRESS			
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cecos International Inc.		PHONE 716-731-3281	EPA ID NO. NYD051809952
SITE ADDRESS 56 St. & Pine Avenue, Niagara Falls, NY 14302			

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS **NY** _____

To Be TYPED by Generator

	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1	Waste Benzene	Flammable	UN-1114	01	220	01	4	01	T	U019
2	Waste Nickel	None Hazard		01	350		10	01		
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

Work Order #42543 Prod. Code #1923 B/E

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>William G. Caulkins</i> William G. Caulkins, Manager Plant Services		DATE SHIPPED 5 27 82 Mo. Day Yr.	EXPECTED ARRIVAL DATE 5 27 82 Mo. Day Yr.
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>Cliff Kaymer</i>		TRANSPORTER NO. 1 PERMIT NUMBER 9A-0451	DATE RECEIVED 5 27 82 Mo. Day Yr.

48-14-1 (11-80)

See cover sheet for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

Part A:

DOCUMENT NO. NY 117182 7

GENERATOR NAME Singer Education Systems	PHONE 716-586-2020	EPA ID NO. NYD0002205987
SITE ADDRESS 3750 Monroe Avenue, Rochester, NY 14603		
TRANSPORTER NO. 1 Cataract Trucking Co.	PHONE 716-284-7837	NYD012955134
SITE ADDRESS 2445 Allen Avenue, Niagara Falls, NY 14303		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cecos International Inc.	PHONE 716-731-3281	NYD051809952
SITE ADDRESS 56 St. & Pine Avenue, Niagara Falls, NY 14302		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY _____

To Be TYPED by Generator

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS NO.	TYPE	EPA HAZ CODE	EPA WASTE TYPE
1 Waste Cutting Oil	None Hazard		01	2200 22155	01	40 41	011	T	N001A
2 Water Soluble Cutting Oil	None Hazard		01	1275	01	15	011	T	M001A
3 Flammable Liquid N.O.S.	Flammable	UN-1993	01	1660	01	12	011	T	D0011
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

Work Order #42277 Prod. Code #1923-B/C/D

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Wm. G. Caulkins</i> William G. Caulkins, Manager Plant Services <small>Please type name also</small>	DATE SHIPPED Mo. Day Yr. 5 18 82	EXPECTED ARRIVAL DATE Mo. Day Yr. 5 18 82
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>D. King</i>	TRANSPORTER NO. 1 PERMIT NUMBER 9A-1091	DATE RECEIVED Mo. Day Yr. 5 18 82

COPY 1 Disposal State-Mailed by Generator

Tear at this Perforation

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2000-0404. Expires 7-31-86

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 1010 212105 1918 71010 1010 1	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address TELEX COMMUNICATION, INC. 3750 Monroe Avenue Rochester, New York 14615			A. State Manifest Document No. NYA 110245 5		B. State generator's ID	
4. General Phone () 716-289-1611			C. State Transporter's ID T-63644		D. Transporter's Phone (716) 973-4200	
5. Transporter 1 (Company Name) ECOS International, Inc. 2321 Kenmore Ave. Buffalo, NY 14207			6. US EPA ID Number NY D 080336241		E. State Transporter's ID	
7. Transporter 2 (Company Name)			8. US EPA ID Number		F. Transporter's Phone ()	
9. Designated Facility Name and Site Address NORLITE 628 South Saratoga Cohoes, New York 12047			10. US EPA ID Number NY D 08046191315		G. State Facility's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)			12. Containers		13. Total Quantity	
a. Waste flammable liquid NOS, flammable, UN #1993, I			No. Type		14. Unit Wt/Vol	
			11 11 TTT		11810 G	
b.						
c.						
d.						
J. Additional Descriptions for Materials listed Above			K. Handling Codes for Wastes Listed Above			
a			c		a <input type="checkbox"/> B <input type="checkbox"/> c <input type="checkbox"/>	
b			d		b <input type="checkbox"/> d <input type="checkbox"/>	
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and state laws and regulations.						
Printed/Typed Name W.H.G. CAULKINS			Signature <i>W.H.G. Caulkins</i>		DATE Month Day Year 11 21 1984	
17. Transporter 1 (Acknowledgement of Receipt of Materials)			Printed/Typed Name Doug Barker		Signature <i>Doug Barker</i>	
18. Transporter 2 (Acknowledgement or Receipt of Materials)			Printed/Typed Name		Signature	
19. Discrepancy Indication Space 1735 Gals Received			20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.			
Printed/Typed Name Larry Breedlove			Signature <i>Lawrence A. Breedlove</i>		DATE Month Day Year 12 20 84	

In case of emergency or spill immediately call the National Response Center (800) 424-9802 and the N.Y. Department of Transportation (518) 457-7362.

REMARKS

TRANSPORTER

FACILITY

NYA 110245 5

48-14-1 (4/81)

See cover sheet for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY **276804 9**

Part A:

SINGER

GENERATOR NAME Telex Communications, Inc.	PHONE (716) 586-2020	EPA ID NO. N Y D 0 0 2 2 0 5 9 8 7
SITE ADDRESS 3750 Monroe Avenue, Rochester, NY 14603		
TRANSPORTER NO. 1 D & J Transporters Specialties, Inc.	PHONE (315) 475-5989	N Y D 0 8 8 6 5 8 6 4 6
SITE ADDRESS 107 7th North, Liverpool, NY 13088		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cecos International	PHONE (716) 873-4200	N Y D 0 8 0 3 3 6 2 4 1
SITE ADDRESS 2321 Kenmore Avenue, Buffalo, NY 14207		

THIS FORM IS NO. 1 OF A TOTAL OF 1 THE FIRST MANIFEST DOCUMENT NO. IS NY 2768049

1	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1	Waste Flammable Liquid N.O.S.	Flammable	UN1993	01	440	01	8	01	1	D001
2	Waste Cutting Oil	None Hazard			990	01	8	01		
3	Waste Soluble Cutting Oil	None Hazard			330		6	01		
4										
5										
6										

To Be TYPED by Generator

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)
Cecos Work Order #75397 Product Codes 1923 - B/C/D
Telex P.O. No. 72927

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>Richard W. Bacchetta</i> Please type name also Richard W. Bacchetta	DATE SHIPPED 06 01 84 Mo. Day Yr.	EXPECTED ARRIVAL DATE 06 04 84 Mo. Day Yr.
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>Joseph M. Capria</i>	TRANSPORTER NO. 1 PERMIT NUMBER 7A-1002	DATE RECEIVED 06 01 84 Mo. Day Yr.

COPY 1 Disposal State—Mailed by Generator
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48-14-1 (4/81)

See cover sheet
for instructions
PLEASE TYPE

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY **232202 7**

Part A:

GENERATOR NAME TELEX COMMUNICATIONS, INC. SINGER	PHONE (716) 586-2020	EPA ID NO. NYD002205987
SITE ADDRESS 3750 Monroe Avenue, Rochester, NY 14603		
TRANSPORTER NO. 1 Coastal Well Service	PHONE (814) 486-1054	PA D 9 8 0 7 1 4 8 6 9
SITE ADDRESS P. O. Box 102, Emporium, PA 15834		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY CECOS INTERNATIONAL, INC.	PHONE (716) 873-4200	NYD051809952
SITE ADDRESS 2321 Kenmore Avenue, Buffalo, NY 14207		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY **2322027**

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
						NO.	TYPE		
1 Water Soluble Cutting Oil	None Hazard		01	330	01	6	01		
2 Waste Cutting Oil	None Hazard		01	935	01	17	01		
3 Flammable Liquid N.O.S.	Flammable	UN1993	01	330	01	6	01	I	D001
4 (Solidified Cadmium Solution) Hazardous Waste Solid N.O.S.	ORM-E	NA9189	04	55	01	1	01	E	D006
5 (Solidified Stripper) Hazardous Waste Solid N.O.S.	ORM-E	NA9189	04	55	01	1	01	I	U188
6									

To Be TYPED by Generator

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

Work Order #53287 Product Code 1923 - B/C/D/S/T

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>Richard W. Bacchetta</i>	DATE SHIPPED Mo. Day Yr. 05 19 83	EXPECTED ARRIVAL DATE Mo. Day Yr. 05 19 83
Please type name also Richard W. Bacchetta	TRANSPORTER NO. 1 PERMIT NUMBER PA 045 AH 0098	DATE RECEIVED Mo. Day Yr. 05 19 83
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>R Fride</i>		

COPY 1 Disposal State—Mailed by Generator
Tear at this Perforation

48-14-1 (4/81)

See cover sheet for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY **232203 6**

PLEASE TYPE

Part A: *Singer*

GENERATOR NAME TELEX COMMUNICATIONS, INC.	PHONE (716) 586-2020	EPA ID NO. NY 0102205987
SITE ADDRESS 3750 Monroe Avenue, Rochester, NY 14603		
TRANSPORTER NO. 1 CECOS INTERNATIONAL, INC.	PHONE (716) 873-4200	NY 0102205987 NYD080336241
SITE ADDRESS 2321 Kenmore Avenue, Buffalo, NY 14207		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY CECOS INTERNATIONAL, INC.	PHONE (716) 873-4200	NY 0102205987 NYD080336241
SITE ADDRESS 2321 Kenmore Avenue, Buffalo, NY 14207		

THIS FORM IS NO. *1* OF A TOTAL OF *1* THE FIRST MANIFEST DOCUMENT NO. IS NY *23220361*

To Be TYPED by Generator

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
						NO.	TYPE		
1 Waste Flammable Liquid N.O.S. Flammable	S. Flammable	UN1993	01	275	01	5	01	I	D001
2 Waste Cutting Oil	None Hazard		01	880	01	6	01		
3 Water Soluble Cutting Oil	None Hazard		01	220	01	4	01		
4 Waste Black Oxide Solution	None Hazard		01	165	01	3	01		
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

Work Order #55940 Product Code 1923 - B/C/D/G

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>Richard W. Bacchetta</i> Please type name also Richard W. Bacchetta	DATE SHIPPED 08 22 83 Mo. Day Yr.	EXPECTED ARRIVAL DATE 08 22 83 Mo. Day Yr.
	TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>[Signature]</i>	TRANSPORTER NO. 1 PERMIT NUMBER 9A090

COPY 1 Disposal State—Mailed by Generator
Tear at this Perforation

48-14-1 (11/80)

See cover sheet for instructions

STATE OF NEW YORK DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY 144229 5

Part A:

GENERATOR NAME SINGER EDUCATION SYSTEMS	PHONE 716-586-2020	EPA ID NO. N1400002200000000
SITE ADDRESS 3750 MONROE AVENUE - ROCHESTER, NY 14603		
TRANSPORTER NO. 1 Cataract Trucking Co.	PHONE (716) 284-7837	NYDO 12955134
SITE ADDRESS 2445 Allen Ave./ Niagara Falls NY		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY CECOS INTERNATIONAL, INC.	PHONE 716-731-3281	N1400000000000000
SITE ADDRESS 56TH & PINE AVE. - NIAGARA FALLS, NY 14302		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY 144229 5

To Be TYPED by Generator

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS NO.	TYPE	EPA HAZ CODE	EPA WASTE TYPE
1 FLAMMABLE LIQUID N.O.S.	FLAMMABLE	UN-1993	01	4.40	01	1	LD	1	0001
2 WASTE CUTTING OIL	NONE HAZARD		01	1.00	01	1	LD	1	101011
3 WATER SOLUBLE CURRING OIL	NONE HAZARD		01	1.00	01	1	LD	1	101011
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)
WORK ORDER #44987 PROD. CODE #1923 B/C/D

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>William G. Caulkins</i>	DATE SHIPPED 18 13 82 Mo. Day Yr.	EXPECTED ARRIVAL DATE 18 13 82 Mo. Day Yr.
Please type name also WILLIAM G. CAULKINS-MANAGER PLANT SERVICES	TRANSPORTER NO. 1 PERMIT NUMBER 91A-10911	DATE RECEIVED 18 13 82 Mo. Day Yr.
TRANSPORTER NO. 1 SIGNATURE <i>Paul W. [Signature]</i>	To the best of my knowledge the contents of the shipment have accepted for transport conforms with the description on this manifest.	

COPY 2 Generator State-Mailed by Generator

48-14-1 (11/80)

See cover sheet
for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

Part A:

DOCUMENT NO. NY **144229 5**

GENERATOR NAME SINGER EDUCATION SYSTEMS		PHONE 716-586-2020	EPA ID NO. N Y D 0 0 2 2 0 5 9 8 7
SITE ADDRESS 3750 MONROE AVENUE - ROCHESTER, NY 14603			
TRANSPORTER NO. 1 Cataract Trucking Co.		PHONE (716) 284-7837	NY DO 1 2 9 5 5 1 5 4
SITE ADDRESS 2445 Allen Ave./ Niagara Falls NY			
TRANSPORTER NO. 2		PHONE	
SITE ADDRESS			
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY CECOS INTERNATIONAL, INC.		PHONE 716-731-3281	NY ID N Y D 0 5 1 1 8 0 9 9 5 2
SITE ADDRESS 56TH & PINE AVE. - NIAGARA FALLS, NY 14302			

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY **1-16-14-12-19-16**

To Be TYPED by Generator

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS NO.	TYPE	EPA HAZ CODE	EPA WASTE TYPE
1 FLAMMABLE LIQUID N.O.S.	FLAMMABLE	UN-1993	01	4,40	01	8	011	11	D0011
2 WASTE CUTTING OIL	NONE HAZARD		01	1935	61	17	011	17	W0011
3 WATER SOLUBLE CURRING OIL	NONE HAZARD		01	1330	01	16	011	17	W0011
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

WORK ORDER #44987 PROD. CODE #1923 B/C/D

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Wm. G. Caulkins</i> Please type name also WILLIAM G. CAULKINS-MANAGER PLANT SERVICES	DATE SHIPPED Mo. 12 Day 13 Yr. 82	EXPECTED ARRIVAL DATE Mo. 12 Day 13 Yr. 82
TRANSPORTER NO. 1 SIGNATURE <i>Paul W. [Signature]</i> "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."	TRANSPORTER NO. 1 PERMIT NUMBER 9 A - 0 9 1 	DATE RECEIVED Mo. 12 Day 13 Yr. 82

Copy 1 Disposal State-Mailed by Generator
Tear at this Partition

48-14-1 (11/80)

See cover sheet for instructions

STATE OF NEW YORK DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

Part A:

DOCUMENT NO. NY137555 1

GENERATOR NAME <i>SINGER EDUCATION SYSTEMS</i>	PHONE <i>716-586-2020</i>	EPA ID NO. <i>WV1010102201519182</i>
SITE ADDRESS <i>3750 MONROE AVENUE / ROCHESTER N.Y. 14603</i>		
TRANSPORTER NO. 1 <i>N.I.W</i>	PHONE <i>716-282-5702</i>	EPA ID NO. <i>WV173171010124405</i>
SITE ADDRESS <i>ROYAL AVE NIAGARA FALLS N.Y. 14302</i>		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY <i>CECOS INTERNATIONAL INC.</i>	PHONE <i>716-731-3281</i>	EPA ID NO. <i>WV1010511810191512</i>
SITE ADDRESS <i>56TH & PINE AVE. / NIAGARA FALLS N.Y. 14302</i>		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY *1375551*

To Be TYPED by Generator

	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1	<i>Waste Hazardous Waste Liquid NOS</i>	<i>ORM-E</i>	<i>NA189</i>	<i>01</i>	<i>13800</i>	<i>01</i>	<i>11</i>	<i>2</i>	<i>E</i>	<i>D006</i>
2										
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

WORK ORDER # 44991 PROP. CODE # 1923-L

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Wm. A. Caulkins</i>	DATE SHIPPED Mo. <i>12</i> Day <i>13</i> Yr. <i>82</i>	EXPECTED ARRIVAL DATE Mo. <i>12</i> Day <i>13</i> Yr. <i>82</i>
Please type name also <i>WILLIAM G CAULKINS - MANAGER PLANT SERVICES</i>		
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>John A. Johnson</i>	TRANSPORTER NO. 1 PERMIT NUMBER <i>191A-14451</i>	DATE RECEIVED Mo. <i>12</i> Day <i>13</i> Yr. <i>82</i>

COPY 1 Disposal State--Mailed by Generator
Tear at this Perforation

48-14-1 (11/80)

See cover sheet
for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

Part A:

DOCUMENT NO. NY **137552 4**

GENERATOR NAME Singer Educational Systems	PHONE (716) 586-2020	EPA ID NO. NYD 0 0 2 2 0 5 9 8 7
SITE ADDRESS 3750 Monroe Avenue, Rochester, NY 14603		
TRANSPORTER NO. 1 N.I.W.	PHONE (716) 282-5102	NYT 3 7 0 0 1 2 4 0 3
SITE ADDRESS Royal Avenue, Niagara Falls, NY 14302		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cecos International Inc.	PHONE (716) 731-3281	NYD 0 5 1 8 0 9 9 5 2
SITE ADDRESS 56th & Pine Avenue, Niagara Falls, NY 14302		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY 1375524

To Be TYPED by Generator

	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1	Waste Hazardous Waste Liquid Nos	ORM-E	NA9189	01	3000	01	1	2	E	D006
2										
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

WORK ORDER #45477 PROD. CODE #1923-L

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Wm. G. Caulkins</i> Please type name also William G. Caulkins, Mgr. Plant Services	DATE SHIPPED 08 17 82 Mo. Day Yr.	EXPECTED ARRIVAL DATE 08 17 82 Mo. Day Yr.
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>Thomas Curt</i>	TRANSPORTER NO. 1 PERMIT NUMBER 9A-045	DATE RECEIVED 08 17 82 Mo. Day Yr.

COPY 1 Disposal State—Mailed by Generator

48-14-1 (11/80)

See cover sheet for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. **NY117188 1**

Part A:

GENERATOR NAME SINGER EDUCATION SYSTEMS	PHONE 716-526-2020	EPA ID NO. NY10101220151812
SITE ADDRESS 3750 MONROE AVE. / ROCHESTER N.Y. 14603		
TRANSPORTER NO. 1 N.I.W.	PHONE 716-282-5102	EPA ID NO. NY17371011241013
SITE ADDRESS ROYAL AVE. NIAGARA FALLS N.Y. 14302		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY	PHONE	
SITE ADDRESS CECOS INTERNATIONAL INC. 716-731-3281		
56TH & PINE AVE. NIAGARA FALLS N.Y. 14302		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY ~~117188 1~~

To Be TYPED by Generator

	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1	WASTE HAZARDOUS WASTE LIQUID RES	ORM-E	NA9189	ci	3000	oi	1	2	1E	D10101
2										
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

WORK ORDER # 45459 PROD. CODE # 1923-L

GENERATOR'S CERTIFICATION. This is to certify that the herein 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 and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct to the best of my knowledge.

GENERATOR'S SIGNATURE <i>Wm. G. Faulkner</i>	DATE SHIPPED Mo. 12 Day 14 Yr. 1982	EXPECTED ARRIVAL DATE Mo. 12 Day 14 Yr. 1982
Please type name also WM. G. FAULKNER - MANAGER PLANT SERVICES		
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>Thomas H. Curtis</i>	TRANSPORTER NO. 1 PERMIT NUMBER 91A-10451	DATE RECEIVED Mo. 12 Day 14 Yr. 1982

COPY 1 Disposal State—Mailed by Generator

Tear at this Perforation

Part B: GEN NAME Singer Co. Telex Communications Inc GEN EPA ID# NYD00024015987

Transporter - FILL OUT

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."
Joe Judge WOH 50644 DATE DELIVERED 02 03 83
 Mo. Day Yr.

TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."
 TRANSPORTER NO. 2 PERMIT NUMBER 1923-VARIOUS
 DATE RECEIVED
 Mo. Day Yr.

TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."
 DATE DELIVERED
 Mo. Day Yr.

TSD Facility - FILL OUT

TSD NAME CBOS TSD EPA ID# NYD01810336091 HANDLING METHOD
 TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS

1	7	2	9	2	8	0	1
3	8	0	1	4	7	2	9
5				6			

TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form."
 SIGNATURE *Thomas Beck* DATE RECEIVED 02 03 83
 Please print or type name also Mo. Day Yr.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362. DOCUMENT NO. NY 232208 1

COPY 1 Disposal State-Mailed by TSD Facility

Transporter - FILL OUT	Part B: GEN NAME TELEX		GEN EPA ID# NYD1002205787																	
	TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>Joe Judge</i>		DATE DELIVERED 12 02 83 Mo. Day Yr.																	
	TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conform with the description on this manifest."	TRANSPORTER NO. 2 PERMIT NUMBER	DATE RECEIVED Mo. Day Yr.																	
TSD Facility - FILL OUT	TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." W 04 70653 PC# 1923-DK		DATE DELIVERED Mo. Day Yr.																	
	TSD NAME CRCS	TSD EPA ID # NYD08983624	HANDLING METHOD																	
	TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS		<table border="1"> <tr><td>1</td><td>SD</td><td>1</td><td>T</td><td>2</td><td>9</td></tr> <tr><td>3</td><td>SD</td><td>1</td><td>T</td><td>2</td><td>9</td></tr> <tr><td>5</td><td></td><td></td><td>6</td><td></td><td></td></tr> </table>	1	SD	1	T	2	9	3	SD	1	T	2	9	5			6	
1	SD	1	T	2	9															
3	SD	1	T	2	9															
5			6																	
TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form."		SIGNATURE <i>John Beck</i> Please print or type name also	DATE RECEIVED 12 02 83 Mo. Day Yr.																	
In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.			DOCUMENT NO. NY 276801 3																	

COPY 1 Disposal State-Mailed by TSD Facility

Part B: GEN NAME Telco SINGEX Comm. GEN EPA ID# NY100102205987

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." Joseph M. Capria DATE DELIVERED 10/14/84

TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." PERMIT NUMBER 60475397 DATE RECEIVED

TSD NAME Cecos TSD EPA ID # NY1008033625A HANDLING METHOD

TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS Per 1923-B,C,D

TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form." SIGNATURE [Signature] DATE RECEIVED

In case of emergency or spill immediately call the National Response Center (800) 424-9502 and the N.Y. Department of Transportation (518) 457-7362. DOCUMENT NO. NY 276804 9

CCPY 1 Disposal State—Mailed by TSD Facility

Transporter—FILL OUT

TSD Facility—FILL OUT

Transporter—FILL OUT
TSD Facility—FILL OUT

Part B: *Singel* *2543-1923-B/E* GEN EPA ID# *NY1010012059187*

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>Alban J. Hitt</i>		DATE DELIVERED Mo. <i>10</i> Day <i>12</i> Yr. <i>82</i>
TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."	TRANSPORTER NO. 2 PERMIT NUMBER	DATE RECEIVED Mo. Day Yr.
TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."		DATE DELIVERED Mo. Day Yr.
TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS	HANDLING METHOD	
	1 <i>729</i>	2 <i>729</i>
	3	4
	5	6
TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest, except those discrepancies noted on this form." <i>William Boek</i>	SIGNATURE <i>William Boek</i> Please print or type name also	DATE RECEIVED Mo. <i>10</i> Day <i>12</i> Yr. <i>82</i>
In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.		DOCUMENT NO. <i>NY117186 3</i>

COPY 1 Disposal State—Mailed by TSD Facility

Transporter—FILL OUT

Part B: *Singer Co*
42277-1923-D; B; C GEN EPA ID# *MYD00022021982*

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."
D. King

DATE DELIVERED
Mo. Day Yr.
05 18 82

TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."

TRANSPORTER NO. 2 PERMIT NUMBER
[] [] [] [] [] [] [] [] [] []

DATE RECEIVED
Mo. Day Yr.
[] [] [] [] [] [] [] [] [] []

TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."

DATE DELIVERED
Mo. Day Yr.
[] [] [] [] [] [] [] [] [] []

TSD Facility—FILL OUT

TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS

HANDLING METHOD					
1	5	0	2	1	2
3	7	5	0	4	
5				6	

TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form."

SIGNATURE
Herman Beck
Please print or type name also
Beck

DATE RECEIVED
Mo. Day Yr.
05 18 82

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

DOCUMENT NO. NY117182 7

COPY 1 Disposal State—Mailed by TSD Facility

Part B: 44987-1923 B/E/D Singer GEN EPA ID# NY10100120021987

Transporter—FILL OUT

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>[Signature]</i>		DATE DELIVERED Mo. Day Yr. 08 13 82
TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."	TRANSPORTER NO. 2 PERMIT NUMBER	DATE RECEIVED Mo. Day Yr.
TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."		DATE DELIVERED Mo. Day Yr.

TSD Facility—FILL OUT

TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS	HANDLING METHOD	
	1 T 50	2 T 50
TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form." In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.	SIGNATURE <i>[Signature]</i> Please print or type name also	DATE RECEIVED Mo. Day Yr. 08 13 82
	DOCUMENT NO. NY 144229 5	

Part B: 77-1923-L SINGER GEN EPA ID# NYD10022065987

Transporter—FILL OUT	TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>Thomas Cant</i>	DATE DELIVERED Mo. <u>18</u> Day <u>17</u> Yr. <u>83</u>
	TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>[Signature]</i>	TRANSPORTER NO. 2 PERMIT NUMBER [] [] [] [] [] [] [] [] [] []
TSD Facility—FILL OUT	TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>[Signature]</i>	DATE DELIVERED Mo. [] Day [] Yr. []
	TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS	HANDLING METHOD 1 <u>T</u> 2 <u>29</u> 3 [] 4 [] 5 [] 6 []
	TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form." <i>[Signature]</i>	SIGNATURE <i>Thomas Beck</i> Please print or type name also

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (510) 457-7362.

DOCUMENT NO. **NY137552 4**

COPY 1 Disposal State—Mailed by TSD Facility

Part B:

~~NY 117188~~ 45459-1923-L SINGER GEN EPA ID# NYD1002201912

Transporter—FILL OUT

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."
Thomas Cuta

DATE DELIVERED
18 11 82
Mo. Day Yr.

TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."

TRANSPORTER NO.2 PERMIT NUMBER

DATE RECEIVED
Mo. Day Yr.

TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."

DATE DELIVERED
Mo. Day Yr.

TSD Facility—FILL OUT

TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS

HANDLING METHOD					
1	T	29	2		
3			4		
5			6		

TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form."

SIGNATURE
Thomas Beck
Please print or type name also

DATE RECEIVED
18 11 82
Mo. Day Yr.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (516) 457-7302.

DOCUMENT NO. NY117188 1

COPY 1 Disposal State—Mailed by TSD Facility

Transporter—FILL OUT
TSD Facility—FILL OUT

Part B: GEN NAME *Singer* **TELEX COMMUNICATIONS** EPA ID# **WY00012305987**

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>[Signature]</i>	TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>[Signature]</i>	TRANSPORTER NO. 2 PERMIT NUMBER	DATE DELIVERED 08 23 83 Day Yr.
TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>[Signature]</i>	TRANSPORTER NO. 2 PERMIT NUMBER	DATE RECEIVED Mo. Day Yr.	DATE DELIVERED Mo. Day Yr.
TSD NAME <i>CEOS</i>	TSD EPA ID # <i>WY00012305987</i>	HANDLING METHOD 1 2 3 4 5 6 <i>5 2 9 4 2 9</i>	
TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS	TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form." <i>[Signature]</i>	DATE RECEIVED Mo. Day Yr. <i>08 23 83</i>	

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

DOCUMENT NO. NY 232203 6

COPY 1 Disposal State—Mailed by TSD Facility

Part B: *Singer* ~~2543-1923-B/E~~ GEN EPA ID# *NY10000121259187*

Transporter—FILL OUT	TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>Allen G. Hitt</i>	DATE DELIVERED Mo. <i>12</i> Day <i>12</i> Yr. <i>82</i>	
	TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."	TRANSPORTER NO. 2 PERMIT NUMBER [] [] [] [] [] [] [] [] [] []	DATE RECEIVED Mo. [] Day [] Yr. []
	TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."	DATE DELIVERED Mo. [] Day [] Yr. []	
TSD Facility—FILL OUT	TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS	HANDLING METHOD 1 <i>7</i> 2 <i>29</i> 3 [] 4 [] 5 [] 6 []	
	TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest, except those discrepancies noted on this form." <i>Allen G. Hitt</i>	SIGNATURE <i>Allen G. Hitt</i> Please print or type name also	DATE RECEIVED Mo. <i>12</i> Day <i>12</i> Yr. <i>82</i>

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

DOCUMENT NO. *NY117186 3*

COPY 1 Disposal State—Mailed by TSD Facility

Singer Co

Part B: 42277-1923-D; B; C GEN EPA ID# MYD000221051982

Transporter—FILL OUT	TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>D. King</i>	DATE DELIVERED Mo. <u>05</u> Day <u>18</u> Yr. <u>82</u>																							
	TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>D. King</i>	TRANSPORTER NO. 2 PERMIT NUMBER 	DATE RECEIVED Mo. Day Yr.																						
TSD Facility—FILL OUT	TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>D. King</i>	DATE DELIVERED Mo. Day Yr.																							
	TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS	HANDLING METHOD <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>1</td><td>7</td><td>5</td><td>0</td><td>2</td><td>7</td><td>2</td><td>5</td></tr> <tr><td>3</td><td>7</td><td>5</td><td>0</td><td>4</td><td></td><td></td><td></td></tr> <tr><td>5</td><td></td><td></td><td></td><td></td><td>6</td><td></td><td></td></tr> </table>	1	7	5	0	2	7	2	5	3	7	5	0	4				5					6	
1	7	5	0	2	7	2	5																		
3	7	5	0	4																					
5					6																				
	TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form." <i>Norman Beck</i>	SIGNATURE <i>Norman Beck</i> Please print or type name also	DATE RECEIVED Mo. <u>05</u> Day <u>18</u> Yr. <u>82</u>																						
In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.		DOCUMENT NO.	<u>NY117182 7</u>																						

COPY 1 Disposal State—Mailed by TSD Facility

Transporter - FILL OUT

Part B: GEN NAME Telecom Singer GEN EPA ID# NYD 010221039817

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."
R. Friedl w/ # 53287

TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."
 TRANSPORTER NO. 2 PERMIT NUMBER

DATE DELIVERED
 Mo. 5 Day 19 Yr. 83

DATE RECEIVED
 Mo. Day Yr.

TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."
PC# 1923-LAK 1006

DATE DELIVERED
 Mo. Day Yr.

TSD Facility - FILL OUT

TSD NAME CECOS Int'l, Inc TSD EPA ID # NYD 08103362411

HANDLING METHOD	
1	T 2 9 2 S 0 1
3	S 0 1 4 S 0 1
5	D 8 1 6

TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS

TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form."
 SIGNATURE Jeffrey J. Wells
Print name and type name also Jeffrey J. Wells

DATE RECEIVED
 Mo. 05 Day 19 Yr. 83

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

DOCUMENT NO. NY 232202 7

COPY 1 Disposal State—Mailed by TSD Facility



State of New Jersey Department of Environmental Protection Division of Hazardous Waste Management Manifest Section

2-028-02

CN-028, Trenton, NJ 08625

Form Approved. OMB No. 2050-0039. Expires 9-30-94

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 9 9 1 3 4		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1368524							
4. Generator's Phone (716) 248-1800						B. State Generator's ID SAME							
5. Transporter 1 Company Name SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		C. State ID NYD J5250							
7. Transporter 2 Company Name SAFETY-KLEEN CORP				8. US EPA ID Number ILD 051060408		D. Transporter's Phone (716) 226-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN STREET LINDEN, NJ 07036						10. US EPA ID Number NJ002182897		E. State ID NYD J5250					
						F. Transporter's Phone 609 356 3104		G. State Facility's ID					
						H. Facility's Phone (908) 862-2000							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. X RM WASTE COMB COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA1993 (P005) (ERG#27)						001 DM		00406		P		F 0 0 5	
b. X RM WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG#26)						004 DM		02080		P		D 0 0 1	
c. X RM WASTE ADHES ADHESIVE COMBUSTIBLE LIQUID UN1133 (D001) (ERG#26)						001 DM		00515		P		D 0 0 1	
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a.						a. NY-B							
b.						b. NY-B							
c.						c. NY-B							
d.						d.							
15. Special Handling Instructions and Additional Information						11a) CONTROL# 58880-6 SAMPLE# 100066 0000 45059128 000000 2-028-02-1406 599134							
11b) CONTROL# 58865-5 SAMPLE# 100069						EMERGENCY RESP# 708-888-4660 24HR IF UNDELIVERABLE RETURN TO GENERATOR							
11c) CONTROL# 58943-1 SAMPLE 100065						SKDOT# A B C D							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.						If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name PETER ONOFREY				Signature <i>Peter Onofrey</i>		Month Day Year 1 0 2 8 9 2							
Printed/Typed Name Tim Braymiller				Signature <i>Tim Braymiller</i>		Month Day Year 1 0 2 8 9 2							
Printed/Typed Name ROBIN SAPP				Signature <i>Robin Sapp</i>		Month Day Year 1 0 3 0 9 2							
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.													
Printed/Typed Name Darlene Corp				Signature <i>Darlene Corp</i>		Month Day Year 1 0 3 0 9 2							

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA 1368524



2-028-02

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

Form Approved. OMB No. 2002-0039. Expires 9-30-94

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

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 33208	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534			A. State Manifest Document Number NJA 1434129		
4. Generator's Phone (716 248-1800)			B. State Generator's ID SAME		
5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		NYCJ550	
7. Transporter 2 Company Name Safety Kleen Corp		8. US EPA ID Number ILD051060408		D. Transporter's Phone 716 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN STREET LINDEN, NJ 07036			E. State Trans. ID NJDEPS8690		
10. US EPA ID Number NJD 002182897			F. Transporter's Phone 609 386-3404		
			G. State Facility's ID		
			H. Facility's Phone (908) 862-2000		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM		12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. X RQ WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG#26)		004	DM	02081	P D O O 1
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a.			B 204-BLENDING		
b.					
c.					
d.					
15. Special Handling Instructions and Additional Information					
11a) CONTROL# 0053865-5 0000 43718527 000000 2-028-02-1406 233203					
Ka) NY HANDLING CODE = B SAMPLE# 100069					
EMERGENCY RESP#708-888-4660 24HR IF UNDELIVERABLE RETURN TO GENERATOR					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.					
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name PETER ONOFREY		Signature <i>Peter Onofrey</i>		Month Day Year 100292	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name Jim Braymiller		Signature <i>Jim Braymiller</i>	
Printed/Typed Name AT Shaver		Signature <i>AT Shaver</i>		Month Day Year 1010592	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name Darlene Grier		Signature <i>Darlene Grier</i>		Month Day Year 100672	

NJA 1434129



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039. Expires 9-30-94

Please print or type. Do not Staple.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. N Y D 9 8 1 8 7 7 0 2 0 0 2 2 9 4		Manifest Document No.		2. Page 1 of 2		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING COMPANY 716/248-1800 () 3750 MONROE AVENUE PITTSFORD, NY 14534		A. State Manifest Document No. NY B 489175 2		B. Generator's ID SAME		C. State Transporter's ID 87992Z NY		D. Transporter's Phone (716) 695-6720	
5. Transporter 1 (Company Name) ENVIRONMENTAL SERVICE GROUP (NY) INC		6. US EPA ID Number N Y D 9 8 6 9 0 3 9 0 4		E. State Transporter's ID		F. Transporter's Phone ()		G. State Facility's ID	
7. Transporter 2 (Company Name) Chem met		8. US EPA ID Number M I D P 9 6 9 6 3 1 9 1 1		H. Facility's Phone (912) 244-0474		9. Designated Facility Name and Site Address CHEMICAL CONSERVATION OF GEORGIA 1612 JAMES P. RODGERS CIRCLE VALDOSTA, GA 31601		10. US EPA ID Number G A D 0 9 3 3 8 0 8 1 4	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity		14. Unit		15. Waste No.	
a. (RQ), WASTE FLAMMABLE LIQUID, N.O.S., 3 UN1993 PG II (TOLUENE, METHANOL) (EPA-D001, F005)		No. Type 0 0 1 D M 0 0 0 5 5 G				G		D001	
b.								STATE	
c.								EPA	
d.								STATE	
J. Additional Descriptions for Materials listed Above		K. Handling Codes for Wastes Listed Above		a <input type="checkbox"/>		b <input checked="" type="checkbox"/>		c <input type="checkbox"/>	
a ALSO FITS: F005		b <input type="checkbox"/>		c <input type="checkbox"/>		d <input type="checkbox"/>		d <input type="checkbox"/>	
b ALSO FITS:									
15. Special Handling Instructions and Additional Information		A. SH065654		B. 24 Hour Emergency Contact: INFOTRAC (CALLER MUST ID ESG) 800/535-5053 ()		C. Consult ERG# 27		D. CONTINUATION SHEET PREPARED EXCLUSIVELY FOR TRANSPORTERS 3&4 (IF NEEDED)	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.		Printed/Typed Name Pablo Arenas		Signature <i>Pablo Arenas</i>		Mo. Day Year 07 31 95			
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Printed/Typed Name Michael LeBarrow		Signature <i>Michael LeBarrow</i>		Mo. Day Year 07 31 95			
18. Transporter 2 (Acknowledgement or Receipt of Materials)		Printed/Typed Name Chris Miller Chem et		Signature <i>Chris Miller</i>		Mo. Day Year 08 04 95			
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Printed/Typed Name Mandy Freeman		Signature <i>Mandy Freeman</i>		Mo. Day Year 08 15 95			

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

NY B 489175 2

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039 Expires 9-30-94

Print or type. Do not Staple.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA No. **NY098187702002294** Manifest Document No.

2. Page 1 of 2 Information in the shaded areas is not required by Federal Law.

3. Generator's Name and Mailing Address
SHOREWOOD PACKAGING COMPANY
716/248-1800 ()
3750 MONROE AVENUE
4. Generator's Phone ()
PITTSFORD, NY 14534

A. State Manifest Document No.
NY B 489175 2
B. Generator's ID
SNE

5. Transporter 1 (Company Name)
ENVIRONMENTAL SERVICE GROUP (NY) INC 6. US EPA ID Number
NY0985903904

C. State Transporter's ID
87972Z NY
D. Transporter's Phone
(716) 695-6720

7. Transporter 2 (Company Name)
Chem met 8. US EPA ID Number
MA09072763194

E. State Transporter's ID
F. Transporter's Phone ()

9. Designated Facility Name and Site Address
CHEMICAL CONSERVATION OF GEORGIA
1612 JAMES P. RODGERS CIRCLE
VALDOSTA, GA 31601 10. US EPA ID Number
GA0993388814

G. State Facility's ID
H. Facility's Phone
(912) 244-0474

11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **(RQ), WASTE FLAMMABLE LIQUID, N.O.S.,**
3 UN1993 PB II (TOLUENE, METHANOL)
(EPA-0001, F005)

001 DM 00055 6
EPA **0001**
STATE

b.

EPA
STATE

c.

EPA
STATE

d.

EPA
STATE

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

a. **ALSO FITS: F005**

a. b. c.

b. **ALSO FITS:**

b. d.

15. Special Handling Instructions and Additional Information
A. **SNE05654** 24 Hour Emergency Contact: **INFOTRAC (CALLER MUST ID ESG)**
B. **800/535-5053 ()**
C. **Consult FRG: 27**
D. **CONTINUATION SHEET PREPARED EXCLUSIVELY FOR TRANSPORTERS 384 (IF NEEDED)**

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment, OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name **Rallo Arcinas** Signature *Rallo Arcinas* Mo. Day Year **07/31/95**

17. Transporter 1 (Acknowledgement of Receipt of Materials)
Printed/Typed Name **Michael LeBaron** Signature *Michael LeBaron* Mo. Day Year **07/31/95**

18. Transporter 2 (Acknowledgement or Receipt of Materials)
Printed/Typed Name **Chem met** Signature *Chem met* Mo. Day Year **08/04/95**

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name **Mandy Freeman** Signature *Mandy Freeman* Mo. Day Year **08/15/95**

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

NY B 489175 2



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-94

Please print or type. Do not Staple.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NYD98187702001959		Manifest Document No. 2		2. Page 1 of 2		Information in the shaded areas is not required by Federal Law. p. 2 non-haz			
3. Generator's Name and Mailing Address 716/248-1800 ()		SHOREWOOD PACKAGING COMPANY		A. State Manifest Document No. NY B 498188 7		B. Generator's ID SAME					
4. Generator's Phone ()		3750 MONROE AVENUE		C. State Transporter's ID PP8404 (NY)		D. Transporter's Phone (716) 695-6720					
5. Transporter 1 (Company Name) ENVIRONMENTAL SERVICE GROUP (NY) INC		6. US EPA ID Number NYD986903904		E. State Transporter's ID 87992Z NY		F. Transporter's Phone 716 695 6720		G. State Facility's ID			
7. Transporter 2 (Company Name) Environmental Service (Gop-Ny) Inc		8. US EPA ID Number NYD986903904		H. Facility's Phone (912) 244-0474							
9. Designated Facility Name and Site Address CHEMICAL CONSERVATION OF GEORGIA		10. US EPA ID Number GA D 093380814									
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity		14. Unit		15. Waste No.			
a. (RQ), WASTE FLAMMABLE LIQUID, N.O.S.,		No. Type		Quantity		Unit		EPA Waste No.			
b. 3 UN1993 PG II (TOLUENE, METHANOL)								STATE			
c. (EPA-D001, F005)		0 0 4 D M		0 0 2 2 0		G		EPA STATE			
d.								EPA STATE			
J. Additional Descriptions for Materials listed Above		K. Handling Codes for Wastes Listed Above									
a. ALSO FITS: F005		b. <input type="checkbox"/>		c. <input type="checkbox"/>		d. <input type="checkbox"/>					
b. ALSO FITS:		b. <input type="checkbox"/>		c. <input type="checkbox"/>		d. <input type="checkbox"/>					
15. Special Handling Instructions and Additional Information											
A. SHOG5654 24 Hour Emergency Contact: INFOTRAC (CALLER MUST ID ESG)											
B. 800/535-5053 ()											
C. Consult ERG#: 27											
D. CONTINUATION SHEET PREPARED FOR TRANSPORTERS 3&4 (IF NEEDED).											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.											
If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.											
Printed/Typed Name Thomas Castro				Signature <i>Thomas Castro</i>				Mo. Day Year 03 28 95			
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Printed/Typed Name John Lobdell				Signature <i>John Lobdell</i>		Mo. Day Year 03 28 95	
18. Transporter 2 (Acknowledgement or Receipt of Materials)				Printed/Typed Name Michael LeBaron				Signature <i>Michael LeBaron</i>		Mo. Day Year 04 04 95	
19. Discrepancy Indication Space											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.											
Printed/Typed Name Mandy Freeman				Signature <i>Mandy Freeman</i>				Mo. Day Year 04 21 95			

NY B 498188 7



State of New Jersey
Department of Environmental Protection and Energy
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

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

Form Approved. OMB No. 2050-0033. Expires 9-30-84

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. N Y D 9 8 1 8 7 7 0 2 0		Manifest No. P 3 4 3 0		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING CORPORATION 3720 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJ A 1945302							
4. Generator's Phone (716) 248-1800						B. State Generator's ID-(Gen. Site Address) SAME							
5. Transporter 1 Company Name SAFETY-KLEEN CORP				6. US EPA ID Number I L D 9 8 4 9 0 8 2 0 2		C. State Trans. ID-NJDEPE Decal No. NY RUS213							
7. Transporter 2 Company Name Safety Kleen Corp				8. US EPA ID Number I L D 9 8 4 9 0 8 2 0 2		D. Transporter's Phone (716) 226-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036						E. State Trans. ID-NJDEPE Decal No. 08670 62954 609 386 3404							
10. US EPA ID Number N J D 0 0 2 1 8 2 8 9 7						F. Transporter's Phone (908) 862-2000							
11. US DOT Description (including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)						12. Containers No. Type		13. Total Quantity		14. Unit (Vol)		15. Waste No.	
a. WASTE INK (NOT REGULATED BY USDOT OR USEPA)						003 DM 01560						ED72	
b. X RO WASTE FLAMMABLE LIQUIDS, N.O.S. (TOLUENE AND HEXANE) 3 UN1993 PGLI (F005) (ERG#27)						004 DM 01624		P				F005	
c. WASTE GLUE (NOT REGULATED BY USDOT OR USEPA)						15		11				ED72	
d.													
16. Additional Descriptions for Materials Listed Above (SL)						K. Handling Codes for Wastes Listed Above 004 BLENDING 004 BLENDING 004 BLENDING							
D001 (I, T) (L) 43% TOLUENE 2% WATER 5% SLUDGE 24% HEXS 4% TPA 3% NICH 2% CHEX 9% PENS 8% MIX													
15. Special Handling Instructions and Additional Information 1st Control #58865-5 Sample #100069 EMERGENCY RESP #1-708-888-4660 (24HRS) 2-028-02-1406 SKDOT A:1055 B:2078 C:4055 D: 11 Control #58880-6 Sample #100066 11 Control #58043-1 Sample #100065						PP# 913430							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						74481920							
Printed/Typed Name Paul Phillips				Signature Paul Phillips				Month Day Year 10 25 94					
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name John Jennings				Signature John Jennings				Month Day Year 10 25 94					
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name FRAN R Zapotki				Signature FRAN R Zapotki				Month Day Year 10 25 94					
19. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest, except as noted in item 13. Printed/Typed Name Vicki Joseph				Signature Vicki Joseph				Month Day Year 10 25 94					

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ A 1945302



2-028-02

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039. Expires 9-30-94

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 98975	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392 4. Generator's Phone (716) 248-1800				A. State Manifest Document Number NY C 334655-8		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 984908202		B. Generator's ID SAME		
7. Transporter 2 (Company Name)		8. US EPA ID Number		C. State Transporter's ID NYEP7021		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD BUILDING B AVON, NY 14414		10. US EPA ID Number NYD 980753784		D. Transporter's Phone (716) 226-2411		
				E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RG WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001) (D006, D008, D018, D035, D039, D040) (ERG#27)		001	DM	017	G	EPA D001 STATE D039
b.						EPA STATE
c.						EPA STATE
d.						EPA STATE
J. Additional Descriptions for Materials Listed Above I (A) D018 D006 a (A) D008, D035, D040,				K. Handling Codes for Wastes Listed Above		
				a <input checked="" type="checkbox"/> c <input type="checkbox"/>		
				b <input type="checkbox"/> d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 9446 74429812 198975 2-028-02-1406 40 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 585 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Paul Phillips		Signature <i>Paul Phillips</i>		Mo. Day Year 11/16/94		
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name John Jennings		Signature <i>John Jennings</i>		Mo. Day Year 11/16/94		
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name CELANE MARTIN		Signature <i>Celane Martin</i>		Mo. Day Year 11/16/94		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NY C 334655-8



State of New Jersey
 Department of Environmental Protection and Energy
 Hazardous Waste Regulation Program
 Manifest Section
 CN 421, Trenton, NJ 08625-0421

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

Approved. OMB No. 2001-0001

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest No. 198976	2. P. of	Information
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING CORPORATION 3720 MONROE AVE PITTSFORD NY 14534 716 248-1800				A. State Manifest No. NJA 1945145	
4. Generator's Phone				B. State Generator's ID (Gen. Site Address) SAME	
5. Transporter 1 Company Name SAFETY-KLEEN CORP		6. US EPA ID Number ILD984908202	C. State Trans. ID-NJDEP ADT E 08690 Decal No. NY RVS 213		
7. Transporter 2 Company Name SAFETY KLEEN CORP		8. US EPA ID Number ILD984908202	D. Transporter's Phone 716 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036		10. US EPA ID Number NJD002182897	E. State Trans. ID-NJDEPE 08690 Decal No. 62704		
			F. Transporter's Phone 609 3863409		
			G. State Facility's ID		
			H. Facility's Phone 908 862-2000		
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, HM)		12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. WASTE INK (NOT REGULATED BY USDOT OR USEPA)		003	M 01560		1072
b. X RQ WASTE FLAMMABLE LIQUIDS, N.O.S. (TOLUENE AND HEXANE) 3 UN1993 PGII (F005) (ERG#27)		002	M 00812		F005
c. WASTE GLUE (NOT REGULATED BY USDOT OR USEPA)		001	M 00515		1072
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
a. (SL)		b. (L)			
D001 (L,T) (L) 43% TOLUENE WATERSLUDGE		TO4-BLENDING TO4-BLENDING			
24 HRS 40 TPA 30 TON 24 CHEK 9 SPNS		NY-B NY-B			
15. Special Handling Instructions and Additional Information		c. TO4-BLENDING			
11a Control #58965-5 Sample #100069		2-028-02-1406 PPH 198976			
EMERGENCY RESP #1-708-888-4660 (24HRS)		SKDOT A:1055 B:2078 C:1055 D:			
11b Control #58880-6 Sample #100066		11 CONTROL 458943 1 SAMPLE 100065			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.					
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name Paul Phillips		Signature <i>Paul Phillips</i>		Month Day Year 11/17/94	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>John Jennings</i>		Month Day Year 11/11/94	
Printed/Typed Name JOHN JENNINGS		Signature <i>Matt Amey</i>		Month Day Year 11/11/94	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature <i>Matt Amey</i>		Month Day Year 11/11/94	
Printed/Typed Name MATT AMEY		Signature <i>Darlene Ann</i>		Month Day Year 11/18/94	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name DARLENE ANN		Signature <i>Darlene Ann</i>		Month Day Year 11/18/94	

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ A 1945145



State of New Jersey
Department of Environmental Protection and Energy
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

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

Form Approved OMB No. 2050-0039 Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020		Manifest Document No. 58777		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING CORPORATION 3720 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1926130							
4. Generator's Phone (716) 248-1800						B. State Generator's ID-(Gen. Site Address) SAME							
5. Transporter 1 Company Name SAFETY-KLEEN CORP			6. US EPA ID Number ILD984908202			C. State Trans. ID-NJDEPE Decal No.- NY RV5213							
7. Transporter 2 Company Name Safety Kleen Corp			8. US EPA ID Number ILD984908202			D. Transporter's Phone (716) 226-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036						E. State Trans. ID-NJDEPE Decal No.- 51882		F. Transporter's Phone (609) 384-3404					
						G. State Facility's ID NJD002182897		H. Facility's Phone (908) 862-2000					
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. WASTE INK (NOT REGULATED BY USDOT OR USEPA)						005 DIM		02600		P		ID72	
b. RQ WASTE FLAMMABLE LIQUIDS, N.O.S. (TOLUENE AND HEXANE) 3 UN1993 RGTI (F005) (ERG#27)						005 DIM		02030 GTS		P		F005	
c. WASTE GLUE (NOT REGULATED BY USDOT OR USEPA)						001 DIM		00515		P		ID72	
d.													
J. Additional Descriptions for Materials Listed Above (SL) (L)						K. Handling Codes for Wastes Listed Above TO4-BLENDING TO4-BLENDING NY-B NY-B TO4-BLENDING NY-B							
a. D001 (I,T) (L) 43 WGL 2 WATER 5 SLUDGE													
b. 24 HRS 43 WGL 2 WATER 5 SLUDGE													
15. Special Handling Instructions and Additional Information 8 WGL 2 11 CONTROL #58865-5 Sample #100069 2-028-02-1406 PP# P58777 EMERGENCY RESP #1-708-888-4660 (24HRS) SKDOT A:1055 B:2078 C:1055 D: 11 CONTROL #58880-6 Sample #100066 11 CONTROL #58943-1 SAMPLE #100065													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name Paul Phillips			Signature X Paul Phillips			Month Day Year 10/22/94							
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name John Jennings			Signature X John Jennings			Month Day Year 10/22/94							
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Fran R Zapolski			Signature Fran R Zapolski			Month Day Year 10/26/94							
19. Discrepancy Indication (space) 13b) clerical error correct total is 2030. PIS.													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Denise Owen						Signature Denise Owen			Month Day Year 10/26/94				

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ 1926130



State of New Jersey
 Department of Environmental Protection and Energy
 Hazardous Waste Regulation Program
 Manifest Section
 CN 421, Trenton, NJ 08625-0421

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Form Approved. OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD98187702058777		Manifest Document No. 58777		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING CORPORATION 3720 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1926130									
4. Generator's Phone (716) 248-1800						B. State Generator's ID-(Gen. Site Address) SAME									
5. Transporter 1 Company Name SAFETY-KLEEN CORP			6. US EPA ID Number ILD984908202			C. State Trans. ID-NJDEPE		Decal No.- NY RV5213							
7. Transporter 2 Company Name <i>Safety Kleen Corp</i>			8. US EPA ID Number <i>ILD984908202</i>			D. Transporter's Phone (716) 226-2411		E. State Trans. ID-NJDEPE <i>08690</i>							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036						10. US EPA ID Number NJ D 0 0 2 1 8 2 8 9 7		F. Transporter's Phone (609) 384-3404							
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. WASTE INK (NOT REGULATED BY USDOT OR USEPA)						005 DIM		02600		P		ID72			
b. X RO WASTE FLAMMABLE LIQUIDS, N.O.S. (TOLUENE AND HEXANE) 3 UN1993 PGII (F005)(ERG#27)						005 DIM		02030 GTS		P		F005			
c. WASTE GLUE (NOT REGULATED BY USDOT OR USEPA)						001 DIM		00515		P		ID72			
d.															
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above									
a. (SL)						b. (L)									
D001 (I, T) (L) 43% HCL 2% WATER 5% SLUDGE						TOX-BLENDING TOX-BLENDING									
24% H2S 4% IPA 3% METH 2% CHX 9% DMS						TOX-B									
15. Special Handling Instructions and Additional Information						TOX-B									
84MHC						PP# P58777									
11a Control #58865-5 Sample #100069						2-028-02-1406									
EMERGENCY RESP #1-708-888-4660 (24HRS)						SKDOT A:1055 B:2078 C:1055 D:									
11b Control #58890-6 Sample #100066						11c CONTROL #58943-1 SAMPLE #100065									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.										17. Transporter 1 Acknowledgement of Receipt of Materials					
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.										Printed/Typed Name <i>Paul Phillips</i>		Signature <i>x Paul Phillips</i>		Month Day Year 08/22/94	
										18. Transporter 2 Acknowledgement of Receipt of Materials					
										Printed/Typed Name <i>John Jennings</i>		Signature <i>x John Jennings</i>		Month Day Year 08/22/94	
										Printed/Typed Name <i>Fern R Zepolski</i>		Signature <i>Fern R Zepolski</i>		Month Day Year 08/26/94	
19. Discrepancy Indication Space <i>13b) Critical error correct total is 2030. PPS.</i>										20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
										Printed/Typed Name <i>Denise Dore</i>		Signature <i>Denise Dore</i>		Month Day Year 08/26/94	

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ A 1926130

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 10289	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 291534-6		
4. Generator's Phone (716) 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 984908202		C. State Transporter's ID NYMFG725		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD BUILDING B AVON, NY 14414				10. US EPA ID Number NYD 980753784		
				E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-3367		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers
						No. Type
a. RG WASTE COMBUSTIBLE LIQUID, N. O. S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001, D018, D039) (ERG#27) 6.7LBS/GAL						1 DM
b.						18 G
c.						18 G
d.						18 G
13. Total Quantity						14. Unit Wt/Vol
						18 G
14. Waste No.						D001
						D039
15. Special Handling Instructions and Additional Information EMERGENCY RESP#1-708-888-4660 24HR SKDDT# A: 585 B: C: D:						J. Additional Descriptions for Materials Listed Above I (A) D018
						K. Handling Codes for Wastes Listed Above <input checked="" type="checkbox"/> R <input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Signature		Mo. Day Year		
Printed/Typed Name Paul Phillips		Paul Phillips		03 23 94		
18. Transporter 2 (Acknowledgement of Receipt of Materials)		Signature		Mo. Day Year		
Printed/Typed Name Chris Cardilli		Chris Cardilli		03 23 94		
19. Discrepancy Indication Space Typing error correction ex		Signature		Mo. Day Year		
Printed/Typed Name DIANE E BODINE		Diane Bodine		03 23 94		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NY C 291534-6



State of New Jersey
 Department of Environmental Protection and Energy
 Hazardous Waste Regulation Program
 Manifest Section
 CN 42 Trenton, NJ 08625-0421

Form Approved. OMB No. 2050-0039. Expires 9-30-94

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NY 0198187702017803		Manifest Document No. 17803		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address SOMMERVILLE PACKAGING 3720 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1847544							
4. Generator's Phone (716) 248-1800						B. State Generator's ID (Gen. Site Address) SAME							
5. Transporter 1 Company Name SAFETY-KLEEN CORP				6. US EPA ID Number TID984908202		C. State Trans. ID-NJDEPE Decal No. NY R 15213							
7. Transporter 2 Company Name Safety Kleen Corp				8. US EPA ID Number TID984908202		D. Transporter's Phone (716) 226-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036						E. State Trans. ID-NJDEPE Decal No. 02690 5321-51080 609 366-3400							
10. US EPA ID Number NJ D 002182897						F. Transporter's Phone (908) 862-2000							
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM						12. Containers		13. Total Quantity		14. Unit (Wt/Vol)		15. Waste No.	
a. WASTE INK (NOT REGULATED BY USDOT OR USEPA)						001		00530		DM		IB72	
b. X RQ WASTE FLAMMABLE LIQUIDS NOS (TOLUENE AND HEXANE) 3 UN1993 PGII (F005) (ERG#27)						001		00406		DM		F005	
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a. (SL)						b. TO4-BLENDING							
b. D001 TOLUENE HEXANE PENS98						c. TO4-BLENDING							
c.						d. NY-B IB							
15. HAZARDOUS MATERIALS Additional Information 11a Control #58865-5 Sample #100069 EMERGENCY RESP #1-708-888-4660 (24HRS) 11b Control #58865-5 Sample #100066 2-028-02-1406 SKDOT A:1055 B:2078 C: D: PP# M17855													
16. GENERAL CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. (677) 58488													
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature				Month Day Year					
Printed/Typed Name Harold O'Brien				Signature Harold O'Brien				04/20/94					
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature				Month Day Year					
Printed/Typed Name ART SHAW				Signature Art Shaw				04/25/94					
19. Discrepancy Indication Space 13 for 11a should read 524 Corrected job (M)													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.										Month Day Year			
Printed/Typed Name Dania Cruz				Signature Dania Cruz				04/25/94					

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

GENERATOR
TRANSPORTER
FACILITY

NJA 1847544



State of New Jersey
Department of Environmental Protection and Energy
Hazardous Waste Regulation Program
Manifest Section
CN 028, Trenton, NJ 08625-0028

2-028-02

Form Approved, OMB No. 2050-0039, Expires 9-30-94

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

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. NYD981877020		Manifest Document No. NJA 1761154		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1761154									
4. Generator's Phone (716) 248-1800						B. State Generator's ID SAME									
5. Transporter 1 Company Name SAFETY-KLEEN CORP.						6. US EPA ID Number ILD 964908202									
7. Transporter 2 Company Name Safety Kleen Corp						8. US EPA ID Number ILD 984908202									
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN ST LINDEN NJ 07036						10. US EPA ID Number 0-006-35 NJD 002182897									
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. X RQ WASTE FLAMMABLE LIQUIDS, N.O.S. (TOLUENE AND HEXANE) 3 UN1993 PGII(F005) (ERG#27)						006 DR 02436 P		F005							
b. NOT REGULATED BY USDOT OR USEPA						DR		P		1072					
c.															
d.															
J. Additional Descriptions for Materials Listed TOLUENE 43%, PERMITS 24%, BENS 9%, METHANOL 1%, (I) 8 (T) 0%, DWC 8%, IPA 1%, ETH 2%						K. Handling Codes for Wastes Listed Above T04-BLENDING N1-B									
c. Toluene 43%, PERMITS 9%, PROPYL ALCOHOL 4%, ETHYL ALCOHOL 3%						b. T04-BLENDING									
d. APRONES 2%, MEN ALIPHATIC HYDROCARBONS (C9-C13) 8%, MINERAL SPIRITS ALIPHATIC 5%						N1-B									
15. Special Handling Instructions and Additional Information EMERGENCY # 58888-6-908-888 148866 2-028-02-1406 PP# CONTROL # 58865-5 Sample # 148866															
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this container are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.										Printed/Typed Name HAROLD O'BRIEN		Signature <i>Harold O'Brien</i>		Month Day Year 10/2/93	
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name John Jennings		Signature <i>John Jennings</i>		Month Day Year 11/02/93					
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name ART Stover		Signature <i>Art Stover</i>		Month Day Year 11/02/93					
19. Discrepancy Indication Space Item 1 EPA # corrected NYD981877020 JA added															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Printed/Typed Name Davlene Grier		Signature <i>Davlene Grier</i>		Month Day Year 10/26/93					

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ 1761154



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 86724	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 255345-6		
4. Generator's Phone (716) 248-1800		6. US EPA ID Number ILD 984908202		B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		7. Transporter 2 (Company Name)		C. State Transporter's ID NYMF6725		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON NY 14414		10. US EPA ID Number 2-028-02 NYD 980753784		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RQ WASTE COMBUSTIBLE LIQUID, N. O. S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001) (ERG#27) 6.7 LBS/GAL		1	DM	15	G	EPA D001 STATE SD039
b.						EPA STATE
c.						EPA STATE
d.						EPA STATE
J. Additional Descriptions for Materials Listed Above I (A) D018				K. Handling Codes for Wastes Listed Above		
a.		c.		a. <input checked="" type="checkbox"/>	c. <input type="checkbox"/>	
b.		d.		b. <input type="checkbox"/>	d. <input type="checkbox"/>	
15. Special Handling Instructions and Additional Information 9339 59469619 686724 2-028-02-1406 05 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 585 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name THOMAS CASTER		Signature <i>Thomas Caster</i>		Mo. Day Year 09 28 93		
17. Transporter 1 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name Chris Cardilli		Signature <i>Chris Cardilli</i>		Mo. Day Year 09 28 93		
18. Transporter 2 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name DIANE E BODINE		Signature <i>Diane E Bodine</i>		Mo. Day Year 09 28 93		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

GENERATOR

TRANSPORTER

FACILITY

NY C 255345-6

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020		Manifest Document No. 05130		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.					
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3720 MONROE AVENUE STAMFORD, NY 14534						A. State Manifest Document Number NY C 245062-1							
4. Generator's Phone ()						B. Generator's ID SAME							
5. Transporter 1 (Company Name) 248-1300				6. US EPA ID Number		C. State Transporter's ID NYGJ5250							
SAFETY-KLEEN CORP				ILD 984908202		D. Transporter's Phone (716) 226-2411							
7. Transporter 2 (Company Name)						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone ()							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. STATE HWY 146 NEW CASTLE KY 40050						10. US EPA ID Number 0-006-58 KYD 053348108		G. State Facility's ID					
						H. Facility's Phone (502) 845-2453							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. RO WASTE COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA1993 (F005)(ERG#27)						5 DR		2030		P		EPA F005 STATE	
b.												EPA STATE	
c.												EPA STATE	
d.												EPA STATE	
J. Additional Descriptions for Materials Listed Above D001						K. Handling Codes for Wastes Listed Above B 6017302450 a <input checked="" type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/>							
15. Special Handling Instructions and Additional Information EMERGENCY RESP# 1-708-888-4660 2-028-02- 1406 PP#- 605130 11a) CONTROL#58860-6 SURVBY#100066 SKDOT# A: 1146 B: C: D:													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name Paul Phillips					Signature Paul Phillips					Mo. Day Year 10/9/21/1993			
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Chris Cordilli					Signature Chris Cordilli					Mo. Day Year 09/21/1993			
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name					Signature					Mo. Day Year			
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.													
Printed/Typed Name ANGELA BARNES					Signature Angela Barnes					Mo. Day Year 10/9/21/1993			

In case of emergency or spill immediately call the National Response Center (800) 424-9602 and the N.Y. Department of Environmental Conservation (516) 457-7362.

NY C 245062-1



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 77674	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392 4. Generator's Phone 716 248-1800				A. State Manifest Document Number NYC 233155-1		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 984908202		B. Generator's ID SAME		
7. Transporter 2 (Company Name)		8. US EPA ID Number		C. State Transporter's ID 653250		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON NY 14414		10. US EPA ID Number 2-028-02 NYD 980753784		D. Transporter's Phone 716 226-2411		
				E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone 716 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						I. Waste No.
a. WASTE COMBUSTIBLE LIQUID, N. O. S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001) (ERG#27) 6.7 LBS. /GAL						EPA D001 3039
b.						EPA
c.						STATE
d.						EPA
						STATE
J. Additional Descriptions for Materials Listed Above I(A) D018						K. Handling Codes for Wastes Listed Above
a						<input type="checkbox"/>
b						<input type="checkbox"/>
c						<input type="checkbox"/>
d						<input type="checkbox"/>
15. Special Handling Instructions and Additional Information 9323 54979398 377674 2-028-02-1406 05 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 501 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name HAROLD O'BRIEN			Signature <i>[Signature]</i>		Mo. Day Year 06/11/93	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Chris Cardilli			Signature <i>[Signature]</i>		Mo. Day Year 06/11/93	
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name			Signature		Mo. Day Year	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name Tina L. Love			Signature <i>[Signature]</i>		Mo. Day Year 06/11/93	

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NYC 233155-1



2-028-02

State of New Jersey Department of Environmental Protection Division of Hazardous Waste Management Manifest Section CN 028, Trenton, NJ 08625

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

Form Approved. OMB No. 2050-0039. Expires 9-30-94

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 6189210		2. Page 1 of		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1343148							
4. Generator's Phone (716 248-1800)						B. State Generator's ID SAME							
5. Transporter 1 Company Name SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		C. State Facility's ID NY05250							
7. Transporter 2 Company Name <i>Safety-Kleen Corp</i>				8. US EPA ID Number <i>111051000108</i>		D. Transporter's Phone (716 226-2411)							
9. Generator's Facility Name and Address SAFETY-KLEEN CORP. 1200 SYLVAN STREET LINDEN, NJ 07036				10. US EPA ID Number NJD 002182897		E. Facility's Phone (908 862-2000)							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. X RD WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG#26)						004 DM		02080		P		D 0 0 1	
b. X RD WASTE COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA1993 (FO05) (ERG#27)						004 DM		01624		P		F 0 0 5	
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a.						a. B							
b.						b. B							
c.						c.							
d.						d.							
15. Special Handling Instructions and Additional Information										0000 36201036 000000 2-028-02-1406 368920			
11a) CONTROL# 0058865-5													
11b) NY HANDLING CODE = B SAMPLE# 100069													
EMERGENCY RESP# 708-888-4660 24HR IF UNDETERMINABLE RETURN TO GENERATOR													
11c) CONTROL# 0058880-6 SAMPLE SKDQT# A: B: C: D:													
11d) NY HANDLING CODE = B SAMPLE													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.													
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name PETER ONOFREY				Signature <i>Peter Onofrey</i>				Month Day Year 09 02 92					
Printed/Typed Name DAN SHEEMAN				Signature <i>Daniel R. Sheeman</i>				Month Day Year 09 02 92					
Printed/Typed Name ROBERT APP				Signature <i>Robert App</i>				Month Day Year 09 02 92					
19. Discrepancy Indication Space													
Printed/Typed Name Darlene Cover				Signature <i>Darlene Cover</i>				Month Day Year 09 03 92					

NJA 1343148



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2030-0399. Expires 9-30-95

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 59114	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 184963-4		
4. Generator's Phone (716) 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NY JK692		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON NY 14414				10. US EPA ID Number NYD 980753784		
				E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers	13. Total	14. Unit	I. Waste No.	
		No.	Quantity	Wt/Vol	EPA	
a. WASTE COMBUSTIBLE LIQUID, N. O. S. (MINERAL SPIRITS) NA1993 PGIII (D001) (ERG#27)		1	86	P	D001	
		Type			D039	
					EPA	
					STATE	
					EPA	
					STATE	
					EPA	
					STATE	
J. Additional Descriptions for Materials Listed Above I (A) D01B				K. Handling Codes for Wastes Listed Above		
a				a <input checked="" type="checkbox"/> R		
b				b <input type="checkbox"/>		
c				c <input type="checkbox"/>		
d				d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 9236 43784560 959114 2-028-02-1406 05 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 501 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Paul Phillip		Signature <i>Paul Phillip</i>		Mo. Day Year 09 03 92		
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Signature <i>Ray W Gross</i>		Mo. Day Year 09 03 92		
Printed/Typed Name DERYI Gross		Signature		Mo. Day Year		
18. Transporter 2 (Acknowledgement of Receipt of Materials)		Signature		Mo. Day Year		
Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name TINA LOVE		Signature <i>Tina Love</i>		Mo. Day Year 09 03 92		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NY C 184963-4



State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

2-028-02

Form Approved OMB No. 2030-0039 Expires 5 30 94

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

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

NYD 921577020

Manifest Document No. 10141018

2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address

SOMERVILLE PACKAGING
3750 MONROE AVE
PITTSFORD

NY 14534

4. Generator's Phone (716 248-1800

4. State Manifest Document Number

NJA 1429907

5. State Generator's ID

SAME

5. Transporter 1 Company Name

SAFETY-KLEEN CORP.

6. US EPA ID Number
ILD 051060408

NYC0550

7. Transporter 2 Company Name

SAFETY KLEEN Corp.

8. US EPA ID Number
FL0051060408

9. Transporter's Phone (716 228-2411

NYC0550
PECAL# 19367-1503

9. Transporter 1 Facility Name and Site Address

SAFETY KLEEN CORP.
1200 SYLVAN STREET

10. US EPA ID Number
0-006-35

11. Transporter's Phone (609 388-3444

LINDEN, NJ 07036

10. US EPA ID Number
NJD 002182897

12. Facility's D

13. Facility's Phone (908) 862-2000

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)
HM

12. Containers
No. Type Total Quantity Unit Waste No.

a. X RO WASTE COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA1993 (FO05) (ERG#27)

4 DM 00065 01624 P F O O 5

b. X RO WASTE INK COMBUSTIBLE LIQUID UN1210 (DO01) (ERG#26)

001 DM 00520 P D O O 1

c. X RO WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (DO01) (ERG#26)

001 DM 00516 P D O O 1

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

~~104 BLENDING~~ ~~104 BLENDING~~
B B
~~104 BLENDING~~

15. Special Handling Instructions and Additional Information

11a) CONTROL# 005835-8
11b) NY HANDLING CODE = B SAMPLE# 100067 (11c) CONTROL# 0058943-1 (11d) NY HANDLING CODE = 3
EMERGENCY RESP# 708-888-4660 24HR IF UNDELIVERABLE RETURN TO GENERATOR
11e) CONTROL# 0058865-5 SAMPLE# SKDOT# A: B: C: D:
11f) NY HANDLING CODE = B 100069

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name
PETER ONOFREY

Signature
Peter Onofrey

Month Day Year
08/06/92

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name
DMJ Sherman

Signature
Daniel Sherman

Month Day Year
08/06/92

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name
PAUL SCHULTZ

Signature
Paul Schultz

Month Day Year
08/12/92

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 15.

Printed/Typed Name
Douglas Grier

Signature
Douglas Grier

Month Day Year
08/11/92

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

GENERATOR

TRANSPORTER

FACILITY

NJA 1429907



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0029, Expires 9-30-92

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 01127	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 161003-2		
4. Generator's Phone () 716 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NYNP5797		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone () 716 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number 2-028-02 NYD 980753784		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone 716 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)				1 DM 86		
b.						
c.						
Additional Description						
I (A) D018						R
Special Handling Instructions				9220 39569355 501127 2-028-02-1406 05		
EMERGENCY RESP#1-708-888-4660 24HR				SKDOT# A: 501 B: C: D:		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this transport container are and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport in accordance with all applicable federal, state and local laws and regulations.						
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the extent I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal which will result in the least amount of waste to be sent to human health and the environment. OR, if I am a small quantity generator, I have made every effort to reduce the volume and toxicity of waste generated to the extent I have determined to be economically available to me and that I can afford.						
Printed/Typed Name PETER ONOFREY		Signature <i>Peter Onofrey</i>		Mo. Day Year 05/13/92		
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Printed/Typed Name Scott Hulburt		Signature <i>Scott C Hulburt</i>		Mo. Day Year 05/13/92
18. Transporter 2 (Acknowledgement of Receipt of Materials)		Printed/Typed Name		Signature		Mo. Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 13.						
Printed/Typed Name TINA L Love		Signature <i>Tina L Love</i>		Mo. Day Year 05/13/92		

In case of emergency or spill immediately call the National Response Center (800) 424-9300 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NYC 161003-2



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039. Expires 9-30-92

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 10519	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 197359-7		
4. Generator's Phone (716) 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NYMF6735		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON NY 14414		10. US EPA ID Number 2-028-02 NYD 980753784		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. WASTE COMBUSTIBLE LIQUID, N. O. S. (MINERAL SPIRITS) NA1993 PGIII (D001) (ERG#27)				No. 1	Type DM	86
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above I (A) D018				K. Handling Codes for Wastes Listed Above		
a				a	<input checked="" type="checkbox"/>	c
b				b	<input type="checkbox"/>	d
15. Special Handling Instructions and Additional Information 9252 48148498 410519 2-028-02-1406 05 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 501 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. <small>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.</small>						
Printed/Typed Name <i>Thomas Crouse</i>		Signature <i>[Signature]</i>		Mo. Day Year 1/22/1912		
17. Transporter 1 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name <i>Chris Cardilli</i>		Signature <i>Chris Cardilli</i>		Mo. Day Year 1/22/1912		
18. Transporter 2 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name TINA LLORE		Signature <i>Tina L. Lore</i>		Mo. Day Year 1/22/1912		

NY C 197359-7

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.



2-028-02

State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section
 CN 028, Trenton, NJ 08625

Form Approved OMB No. 2002-0039 Expires 9-30-94

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

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 33208		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1434129							
4. Generator's Phone (716 248-1800)						B. State Generator's ID SAME							
5. Transporter 1 Company Name SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		NYGJ550							
7. Transporter 2 Company Name Safety Kleen Corp				8. US EPA ID Number ILD051060408		D. Transporter's Phone 716 226-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN STREET LINDEN, NJ 07036						10. US EPA ID Number NJD 002182897		E. State Trans. ID NJDEPS8690					
						10. US EPA ID Number 0-006-35		F. Transporter's Phone 609 386-3404					
								G. State Facility's ID					
								H. Facility's Phone 908 862-2000					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. X RQ WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG#26)						004 DM 02081						P D O O 1	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above B 204-BLENDING							
a.						a.		c.					
b.						b.		d.					
15. Special Handling Instructions and Additional Information										0000 43718527 000000 2-028-02-1406 233208			
11a) CONTROL# 0053865-5													
Ka) NY HANDLING CODE = B SAMPLE# 100069													
EMERGENCY RESP#708-888-4660 24HR IF UNDELIVERABLE RETURN TO GENERATOR													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.													
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name PETER ONOFREY					Signature <i>Peter Onofrey</i>					Month Day Year 100292			
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name Jim Braymiller					Signature <i>Jim Braymiller</i>					Month Day Year 100292			
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name AT Shaver					Signature <i>AT Shaver</i>					Month Day Year 1010592			
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name Darlene Grier					Signature <i>Darlene Grier</i>					Month Day Year 100672			

NJ A 1434129



State of New Jersey Department of Environmental Protection Division of Hazardous Waste Management Manifest Section

2-028-02

CN-028, Trenton, NJ 08625

Form Approved. OMB No. 2050-0039. Expires 9-30-94

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 9 9 1 3 4		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1368524							
4. Generator's Phone (716) 248-1800						B. State Generator's ID SAME							
5. Transporter 1 Company Name SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		C. State ID NYD J5250							
7. Transporter 2 Company Name SAFETY KLEEN CORP				8. US EPA ID Number ILD 051060408		D. Transporter's Phone (716) 226-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN STREET LINDEN, NJ 07036						10. US EPA ID Number NJ002182897		E. State ID NYD J5250					
						F. Transporter's Phone 609 356 3104		G. State Facility's ID					
						H. Facility's Phone (908) 862-2000							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. X RM WASTE COMB COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA1993 (P005) (ERG#27)						001 DM		00406		P		F O O 5	
b. X RM WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG#26)						004 DM		02080		P		D O O 1	
c. X RM WASTE ADHES ADHESIVE COMBUSTIBLE LIQUID UN1133 (D001) (ERG#26)						001 DM		00515		P		D O O 1	
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a.						a. NY-B		b. NY-B		c. NY-B		d.	
b.						b. NY-B							
15. Special Handling Instructions and Additional Information						11a) CONTROL# 58880-6 SAMPLE# 100066 0000 45059128 000000 2-028-02-1406 599134							
11b) CONTROL# 58865-5 SAMPLE# 100069						EMERGENCY RESP# 708-888-4660 24HR IF UNDELIVERABLE RETURN TO GENERATOR							
11c) CONTROL# 58943-1 SAMPLE 100065						SKDOT# A B C D							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.						If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name PETER ONOFREY				Signature <i>Peter Onofrey</i>		Month Day Year 1 0 2 8 9 2							
Printed/Typed Name Tim Braymiller				Signature <i>Tim Braymiller</i>		Month Day Year 1 0 2 8 9 2							
Printed/Typed Name ROBIN SAPP				Signature <i>Robin Sapp</i>		Month Day Year 1 0 3 0 9 2							
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.													
Printed/Typed Name Darlene Corp				Signature <i>Darlene Corp</i>		Month Day Year 1 0 3 0 9 2							

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA 1368524



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039. Expires 9-30-96

Please print or type. Do not Staple.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NYD98187702000176		Manifest Document No. 2		2. Page 1 of 2		Information in the shaded areas is not required by Federal Law. P-2 NONHAZ	
3. Generator's Name and Mailing Address 716/248-1800 (831)		SHOREWOOD PACKAGING COMPANY		A. State Manifest Document No. NY B787312 8		B. Generator's ID SNE		C. State Transporter's ID 8722201	
4. Generator's Phone ()		3750 MONROE AVENUE		D. Transporter's Phone (716) 535-5720		E. State Transporter's ID 8722201		F. Transporter's Phone (716) 535-5720	
5. Transporter 1 (Company Name) ENVIRONMENTAL SERVICE GROUP (NY) INC		6. US EPA ID Number NYD986903904		G. State Facility's ID		H. Facility's Phone (912) 244-0474		I. Waste No. EPA-D001	
7. Transporter 2 (Company Name) Environmental Service Group (NY) Inc		8. US EPA ID Number NYA9809039101		9. Designated Facility Name and Site Address CHEMICAL CONSERVATION OF GEORGIA		10. US EPA ID Number GA D093380814		STAT F005	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) a. (RQ), WASTE FLAMMABLE LIQUID, N.O.S., 3 UN1993 PG II (TOLUENE, METHANOL) (EPA-D001, F005)		12. Containers No. Type 0 0 4 D M		13. Total Quantity 0 0 2 2 0		14. Unit Wt/Vol 6		EPA STATE	
J. Additional Descriptions for Materials listed Above a. ALSO FITS: F005		K. Handling Codes for Wastes Listed Above a. <input checked="" type="checkbox"/> b. <input type="checkbox"/> c. <input type="checkbox"/>		b. <input type="checkbox"/> d. <input type="checkbox"/>		EPA STATE		EPA STATE	
15. Special Handling Instructions and Additional Information A. SHOG5654		24 Hour Emergency Contact: INFOTRAC (CALLER MUST ID ESG)		800/535-5053 ()		B. Consult ERG# 27		C. CONTINUATION SHEET PREPARED EXCLUSIVELY FOR TRANSPORTERS 3&4 (IF NEEDED).	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.		Printed/Typed Name Thomas Murray		Signature <i>Thomas Murray</i>		Mo. Day Year 11/10/95		EPA STATE	
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Printed/Typed Name John Lobdell		Signature <i>John Lobdell</i>		Mo. Day Year 11/10/95		EPA STATE	
18. Transporter 2 (Acknowledgement or Receipt of Materials)		Printed/Typed Name Michael LeBaron		Signature <i>Michael LeBaron</i>		Mo. Day Year 11/10/95		EPA STATE	
19. Discrepancy Indication Space		Printed/Typed Name Joan M. Yancey		Signature <i>Joan M. Yancey</i>		Mo. Day Year 11/15/95		EPA STATE	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Printed/Typed Name Joan M. Yancey		Signature <i>Joan M. Yancey</i>		Mo. Day Year 11/15/95		EPA STATE	

In case of emergency or spill immediately call the National Response Center (800) 424-9802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

NY B787312 8

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-94

Please print or type. Do not Staple.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 9 8 1 8 7 7 0 2 0 0 2 0 6 8		Manifest Document No. 2068		2. Page 1 of 2		Information in the shaded areas is not required by Federal Law. p. 2 non-haz	
3. Generator's Name and Mailing Address 716/248-1800 ()		SHOREWOOD PACKAGING COMPANY		A. State Manifest Document No. NY B 489090 6		B. Generator's ID SAME			
4. Generator's Phone ()		3750 MONROE AVENUE		C. State Transporter's ID 87992Z NY		D. Transporter's Phone (716) 695-6720			
5. Transporter 1 (Company Name) ENVIRONMENTAL SERVICE GROUP (NY) INC		6. US EPA ID Number NY D 9 8 6 9 0 3 9 0 4		E. State Transporter's ID		F. Transporter's Phone (313) 282-9250			
7. Transporter 2 (Company Name) CHEM MET SERVICES		8. US EPA ID Number MI D 0 9 6 9 6 3 1 9 4		G. State Facility's ID		H. Facility's Phone (912) 244-0474			
9. Designated Facility Name and Site Address CHEMICAL CONSERVATION OF GEORGIA		10. US EPA ID Number GA D 0 9 3 3 8 0 8 1 4		11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity	
1612 JAMES P. RODGERS CIRCLE		VALDOSTA, GA 31601		a. (RQ), WASTE FLAMMABLE LIQUID, N.O.S., 3 UN1993 PG II (TOLUENE, METHANOL) (EPA-D001, F005)		No. 0 0 3 0 M 0 0 1 6 5		14. Unit G	
				b.				I. Waste No. F005	
				c.				EPA STATE	
				d.				EPA STATE	
J. Additional Descriptions for Materials listed Above		a. ALSO FITS: F005		K. Handling Codes for Wastes Listed Above		a. <input checked="" type="checkbox"/> B		c. <input type="checkbox"/>	
		b. ALSO FITS:		b. <input type="checkbox"/>		d. <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information		A. SH065654		24 Hour Emergency Contact: INFOTRAC (CALLER MUST ID ESG) 800/535-5053 ()		B. Consult ERG# 27		C. CONTINUATION SHEET PREPARED FOR TRANSPORTERS 3&4 (IF NEEDED).	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.		If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.		Printed/Typed Name Paul Phillips		Signature <i>Paul Phillips</i>		Mo. Day Year 05/09/95	
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Printed/Typed Name Michael LeBaron		Signature <i>Michael LeBaron</i>		Mo. Day Year 05/09/95			
18. Transporter 2 (Acknowledgement or Receipt of Materials)		Printed/Typed Name NORMAN WHEELER		Signature <i>N. Wheeler</i>		Mo. Day Year 05/11/95			
19. Discrepancy Indication Space		20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Printed/Typed Name JACK Richards		Signature <i>Jack Richards</i>		Mo. Day Year 05/26/95	

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

GENERATOR

TRANSPORTER

FACILITY

NY B 489090 6

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-94

Please print or type. Do not Staple.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NYD98187702002147		Manifest Document No. 2147		2. Page 1 of 2		Information in the shaded areas is not required by Federal Law. PG 2 Non Htg			
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING COMPANY 716/248-1800 () 3750 MONROE AVENUE PITTSFORD, NY 14534						A. State Manifest Document No. NY B489127 5					
4. Generator's Phone ()						B. Generator's ID SAME					
5. Transporter 1 (Company Name) ENVIRONMENTAL SERVICE GROUP (NY) INC				6. US EPA ID Number NYD986903904		C. State Transporter's ID PP8404(NY)					
7. Transporter 2 (Company Name) ENVIRONMENTAL SERVICE GROUP (NY) INC						8. US EPA ID Number NYD986903904					
9. Designated Facility Name and Site Address CHEMICAL CONSERVATION OF GEORGIA 1612 JAMES P. RODGERS CIRCLE VALDOSTA, GA 31601						10. US EPA ID Number GAD093380814					
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total		14. Unit	
a. (RQ), WASTE FLAMMABLE LIQUID, N.O.S., 3 UN1993 PG II (TOLUENE, METHANOL) (EPA-D001, F005)						No. Type		Quantity		Wt/Vol	
						0 0 5 D M 0 0 2 7 5		G		I. Waste No. EPA D001	
b.										STATE	
c.										EPA	
d.										STATE	
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above					
a ALSO FITS: F005						a		B		c	
b ALSO FITS:						b				d	
15. Special Handling Instructions and Additional Information A. SH065654 24 Hour Emergency Contact: INFOTRAC (CALLER MUST ID ESG) 800/535-5053 () B. C. Consult ERG# 27 D. CONTINUATION SHEET PREPARED FOR TRANSPORTERS 3&4 (IF NEEDED).											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.											
Printed/Typed Name Paul Phillips				Signature <i>Paul Phillips</i>				Mo. Day Year 06 06 95			
17. Transporter 1 (Acknowledgement of Receipt of Materials)											
Printed/Typed Name John Lobbell				Signature <i>John Lobbell</i>				Mo. Day Year 06 06 95			
18. Transporter 2 (Acknowledgement or Receipt of Materials)											
Printed/Typed Name Michael LeBaron				Signature <i>Michael LeBaron</i>				Mo. Day Year 06 12 95			
19. Discrepancy Indication Space											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.											
Printed/Typed Name Mandy Freeman				Signature <i>Mandy Freeman</i>				Mo. Day Year 07 05 95			

NY B 489127 5



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039. Expires 9-30-94

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 11507 13807	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.		
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392		4. Generator's Phone (716) 248-1800	6. US EPA ID Number ILD 984908202	A. State Manifest Document Number NYC 345820-4	B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		7. Transporter 2 (Company Name)	8. US EPA ID Number	C. State Transporter's ID NY EPT021	D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD BUILDING B AVON, NY 14414		10. US EPA ID Number NYD 980753784	E. State Transporter's ID		F. Transporter's Phone ()		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol	1. Waste No.	
a. RQ WASTE COMBUSTIBLE LIQUID, N. O. S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001) (D006, D008, D018, D035, D039, D040) (ERG#27)		No. Type				EPA Waste No. D001 D039	
b.						STATE	
c.						STATE	
d.						STATE	
J. Additional Descriptions for Materials Listed Above I (A) D018 D006 a (A) D008, D035, D040,		K. Handling Codes for Wastes Listed Above		a <input checked="" type="checkbox"/> R c <input type="checkbox"/>			
b d		b <input type="checkbox"/> d <input type="checkbox"/>					
15. Special Handling Instructions and Additional Information EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 585 B: C: D:		9506 77522530 041807-2-028-02-1406-40 113807 8690					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name Pablo Arenas		Signature <i>Pablo Arenas</i>		Mo. Day Year 10 21 13 95			
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Printed/Typed Name John Jennings		Signature <i>John Jennings</i>		Mo. Day Year 02 12 95	
18. Transporter 2 (Acknowledgement of Receipt of Materials)		Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space #1 Manifest Doc No. corrected.							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name Jerri Meys		Signature <i>Jerri Meys</i>		Mo. Day Year 02 11 13 95			

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NYC 345820-4



State of New Jersey
 Department of Environmental Protection and Energy
 Hazardous Waste Regulation Program
 Manifest Section
 CN 421, Trenton, NJ 08625-0421

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

Form Approved. OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD98187702092673		Manifest Document No. 92673		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING CORPORATION 3720 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1957441							
4. Generator's Phone (716) 248-1800						B. State Generator's ID-(Gen. Site Address) SAME							
5. Transporter 1 Company Name SAFETY-KLEEN CORP				6. US EPA ID Number ILD984908202		C. State Trans. ID-NJDEPE Decal No. NY 65550							
7. Transporter 2 Company Name Safety Kleen Corp				8. US EPA ID Number TL0984908202		D. Transporter's Phone (716) 226-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036				10. US EPA ID Number NJD002182897		E. State Trans. ID-NJDEPE Decal No. 08690							
						F. Transporter's Phone (609) 386-3404							
						G. State Facility's ID							
						H. Facility's Phone (908) 862-2000							
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. WASTE INK (NOT REGULATED BY USDOT OR USEPA)						003 D M 01560 P						ID72	
b. X RQ WASTE FLAMMABLE LIQUIDS, N.O.S. (TOLUENE AND HEXANE) 3 UN1993 PGI (F005) (ERG#27)						002 D M 00812 P						F005	
c. WASTE GLUE (NOT REGULATED BY USDOT OR USEPA)						002 D M 01031 P						ID72	
d.													
J. Additional Descriptions for Materials Listed Above (SL)						K. Handling Codes for Wastes Listed Above (L) T04-BLENDING T04-BLENDING W1-B W1-B W1-B							
a. D001 (I,T) (L) 43%TOL2%WATER5%SLUDGE						b. 24%HEXS 4%IPA3%ETOH2%CHEX9%PENS							
15. Handling Instructions and Additional Information MaControl#58865-5 Sample#100069						2-028-02-1406 PP# 492673							
EMERGENCY RESP #1-708-888-4660 (24HRS)						SKDOT A:1055 B:2078 C:1055 D:							
11bControl#58880-6 Sample#100066						11cCONTROL#58943-1 SAMPLE#100065							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name Paul Phillips						Signature <i>Paul Phillips</i>				Month Day Year 12 22 94			
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name John Jennings						Signature <i>John Jennings</i>				Month Day Year 12 22 94			
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name ART Shover						Signature <i>Art Shover</i>				Month Day Year 12 22 94			
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name Denise Dore						Signature <i>Denise Dore</i>				Month Day Year 12 28 94			

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ 1957441



State of New Jersey
Department of Environmental Protection and Energy
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

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

Form Approved, OMB No. 2050-0038 Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 75840	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING CORPORATION 3720 MONROE AVE PITTSFORD NY 14534 716 248-1800				A. State Manifest Document Number NJA 1957534		
4. Generator's Phone				B. State Generator's ID-(Gen. Site Address) SAME		
5. Transporter 1 Company Name SAFETY-KLEEN CORP		6. US EPA ID Number ILD984908202		C. State Trans. ID-NJDEPE Decal No. NY 655250		
7. Transporter 2 Company Name Safety Kleen Corp		8. US EPA ID Number ILD984908202		D. Transporter's Phone 716 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036		10. US EPA ID Number NJDD002182897		E. State Trans. ID-NJDEPE Decal No. 08690 62617		
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) a. WASTE INK (NOT REGULATED BY USDOT OR USEPA)				F. Transporter's Phone 609 386 3404		
b. NO WASTE FLAMMABLE LIQUIDS, N.O.S. (TOLUENE AND HEXANE) 3 UN1993 PGII (F005) (ERG#27)				G. State Facility's ID 908 862-2000		
c. WASTE GLUE (NOT REGULATED BY USDOT OR USEPA)				H. Facility's Phone		
12. Containers				13. Total Quantity		
14. Unit Wt/Vol				15. Waste No.		
a. WASTE INK				003 101 040 P ID72		
b. NO WASTE FLAMMABLE LIQUIDS, N.O.S. (TOLUENE AND HEXANE) 3 UN1993 PGII (F005) (ERG#27)				003 101 210 P F005		
c. WASTE GLUE (NOT REGULATED BY USDOT OR USEPA)				P P P		
J. Additional Descriptions for Materials Listed Above (SL)				K. Handling Codes for Wastes Listed Above T04-BLENDING T04-BLENDING T04-BLENDING T04-BLENDING T04-BLENDING T04-BLENDING		
D001 (I, T) (L) 43% TOL 2% WATER 5% SLUDGE 24% HEXS 4% IPA 3% ETCH 2% CHX 9% PENS 8% MEK				11a Control #58865-5 Sample #100069 EMERGENCY RESP #1-708-888-4660 (24HRS) 11b Control #58880-6 Sample #100066		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.				2-028-02-1406 SKDOT A:1055 B:2078 C:1055 D: PP# 775840		
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.				17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name: John Jennings Signature: John Jennings Month Day Year: 01/11/95		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name: FRANK ZAPOLSKI Signature: Frank Zapolski Month Day Year: 01/25/95				19. Discrepancy Indication Space #70 INCOMPLETE SIGNATURE PR		
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name: Denise Donohue Signature: Denise Donohue Month Day Year: 01/21/95				EPA Form 2700-22 (Rev. 9/88) Previous editions are obsolete. 2 - TSD MAIL TO - GENERATOR STATE		

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (809) 292-7172

NJA 1957534

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 71278	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 325401-6		
4. Generator's Phone (716) 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 984908202		C. State Transporter's ID NY EP 7021		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD BUILDING B AVON, NY 14414		10. US EPA ID Number NYD 980753784		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
a. RG WASTE COMBUSTIBLE LIQUID, N. O. S. (PETROLEUM NAPHTHA) NA1993 PGIII(D001) (D006, D008, D018, D035, D039, D040) (ERG#27)				001	DM	017
b.						c
c.						
d.						
J. Additional Descriptions for Materials Listed Above I (A) D018 D006 a (A) D008, D035, D040				K. Handling Codes for Wastes Listed Above		
a				a <input checked="" type="checkbox"/>		
b				b <input type="checkbox"/>		
c				c <input type="checkbox"/>		
d				d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 9440 72874795 771278 2-028-02-1406 50 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 585 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Paul Phillips		Signature <i>Paul Phillips</i>		Mo. Day Year 10 03 94		
17. Transporter 1 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name John Jennings		Signature <i>John Jennings</i>		Mo. Day Year 10 03 94		
18. Transporter 2 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space Incorrect Signature. PP.						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name BARBARA MARTIN		Signature <i>Barbara Martin</i>		Mo. Day Year 10 03 94		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NY C 325401-6



State of New Jersey
 Department of Environmental Protection and Energy
 Hazardous Waste Regulation Program
 Manifest Section
 CN 421, Trenton, NJ 08625-0421

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

Form Approved, OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 31074	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING CORPORATION 3720 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NJA 1926129			
4. Generator's Phone (716 248-1800)				B. State Generator's ID (Gen. Site Address) SAME			
5. Transporter 1 Company Name SAFETY-KLEEN CORP		6. US EPA ID Number ELD984908202		C. State Trans. ID-NJDEPE		Decal No. NY AV5213	
7. Transporter 2 Company Name <i>Safety Kleen Corp</i>		8. US EPA ID Number <i>ILD9845108202</i>		D. Transporter's Phone (716 226-2411)		E. State Trans. ID-NJDEPE 08690	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036				10. US EPA ID Number NJD002182897		F. Transporter's Phone (609 386 9404)	
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) WASTE INK (NOT REGULATED BY USDOT OR USEPA)				12. Containers No. Type		13. Total Quantity	
a. WASTE INK (NOT REGULATED BY USDOT OR USEPA)				005 DM		226.00	
b. NO WASTE FLAMMABLE LIQUIDS, N.O.S. (TOLUENE AND HEXANE) 3 UN1993 PGLI (P005) (ERG#27)				002 DM		008.12	
c. WASTE GLUE (NOT REGULATED BY USDOT OR USEPA)				002 DM		01.030	
d. WASTE GLUE (NOT REGULATED BY USDOT OR USEPA)				002 DM		01.030	
J. Additional Descriptions for Materials Listed Above (SL) (L)				K. Handling Codes for Wastes (See Above)			
a. D001 (L, T) (L) 43 WOL 2 WATER 54 SLUDGE				T04-BLENDING T04-BLENDING			
b. 248 HXS 48 TPA 38 TON 124 CHEM 08 2001				T04-BLENDING			
15. Special Handling Instructions and Additional Information SWHC 11a Control #58865-5 Sample #100069 EMERGENCY RESP #1-708-888-4660 (24HRS) 11b Control #58880-6 Sample #100066 11c Control #58943-4 Sample #100065				2-028-02-1406 PPH M31074 EMDOT A-1055 B:2078 C:1055 D:			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 73901903							
Printed/Typed Name <i>Paul Phillips</i>				Signature <i>Paul Phillips</i>		Month Day Year 09/19/94	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <i>John Jennings</i>				Signature <i>John Jennings</i>		Month Day Year 09/19/94	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name <i>Fran R Zapolski</i>				Signature <i>Fran R Zapolski</i>		Month Day Year 09/22/94	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name <i>Danise Dore</i>							
Signature <i>Danise Dore</i>				Month Day Year 09/23/94			

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ 1926129



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 27002	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 301649-5		
4. Generator's Phone (716) 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 984908202		C. State Transporter's ID NYMFG 725		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD BUILDING B AVON, NY 14414				10. US EPA ID Number NYD 980753784		E. State Transporter's ID
				F. Transporter's Phone ()		G. State Facility's ID
				H. Facility's Phone 716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers
						No. Type
a. RQ WASTE COMBUSTIBLE LIQUID, N. O. S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001, D018, D039) (ERG#27) 6.7LBS/GAL						1 DM
b.						17 G
c.						17
d.						17
J. Additional Descriptions for Materials Listed Above						13. Total Quantity
I (A) D018 D006, D008, D035, D040						17
						14. Unit Wt/Vol
						G
						I. Waste No.
						D001
						D039
						EPA
						STATE
						EPA
						STATE
						EPA
						STATE
K. Handling Codes for Wastes Listed Above						
a						<input checked="" type="checkbox"/> R
b						<input type="checkbox"/>
c						<input type="checkbox"/>
d						<input type="checkbox"/>
15. Special Handling Instructions and Additional Information 9419 67622266 227002 2-028-02-1406 50 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 585 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name HAROLD O'BRIEN			Signature <i>Harold O'Brien</i>		Mo. Day Year 10/18/94	
17. Transporter 1 (Acknowledgement of Receipt of Materials)			Printed/Typed Name Chris Cardilli		Signature <i>Chris Cardilli</i>	
18. Transporter 2 (Acknowledgement of Receipt of Materials)			Printed/Typed Name		Signature	
19. Discrepancy Indication Space <i>Manifest correction made c.c.</i>						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name DIANE BODINE			Signature <i>Diane Bodine</i>		Mo. Day Year 05/18/94	

In case of emergency or spill immediately call the National Response Center (800) 424-9802 and the N.Y. Department of Environmental Conservation (516) 457-7362.

NY C 301649-5



State of New Jersey
Department of Environmental Protection and Energy
Hazardous Waste Regulation Program
Manifest Section
CN 028, Trenton, NJ 08625-0028

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

Form Approved, OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NY D 9 8 1 8 7 7 0 2	Manifest Document No. 42217	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address SOMMERVILLE PACKAGING 3720 MONROE AVE PITTSFORD NY 14534			A. State Manifest Document Number NJA 1741842		B. State Generator's ID SAME			
4. Generator's Phone (716) 248-1800			C. State Trans. ID NY R15213		D. Transporter's Phone / 716 226-2411			
5. Transporter 1 Company Name SAFETY-KLEEN CORP		6. US EPA ID Number IL D 9 8 4 9 0 8 2 0 2		E. State Trans. ID NY R15213		F. Transporter's Phone 609 3863404		
7. Transporter 2 Company Name SAFETY KLEEN Corp		8. US EPA ID Number IL D 9 8 4 9 0 8 2 0 2		G. State Facility's ID NY R15213		H. Facility's Phone (908 862-2000)		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036			10. US EPA ID Number N J D 0 0 2 1 8 2 8 9 7		I. Waste No. 005 DM 02600		J. Handling Codes for Wastes Listed Above	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM				12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
a. WASTE INK (NOT REGULATED BY USDOT OR USEPA)							005 DM 02600	
b. X RQ WASTE FLAMMABLE LIQUIDS NOS (TOLUENE AND HEXANE) 3 UN1993 PGII (F005)(ERG#27)				001	DM 00406	P	F005	
c. X RQ HAZARDOUS WASTE, LIQUID, N.O.S. 9 NA3082 PG III (D007)(ERG#31)				006	DM 033/2	P	D007	
d.								
J.* Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above				
L a. D001 TOL43% HEX24% PEN9%				88%OIL 8%HEXYLENE GLYCOL DIACRYLATE 4%DIETHYLENE GLYCOLETHYL ACRYLATE (E,L) a. NY-B				
b. MHC8% ALCOHOLS 16%				b. NY-B				
15. Acrylonitrile, Acrylate, and other carbons.				c. NY-B				
11a Control#58865-5 Sample#100069				2-028-02-1406		PP# m42217		
EMERGENCY RESP #1-708-888-4660 (24HRS)				SKDOT A:1055 B:2078 C:1159 D:				
11b Control#58880-6 Sample#100066				11c) CONTROL #201/23-1 SAMPLE #297653				
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.								
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.								
Printed/Typed Name X HAROLD O'BRIEN				Signature <i>Harold O'Brien</i>		Month Day Year 000000		
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name Chris Cardilli		Signature <i>Chris Cardilli</i>		
18. Transporter 2 Acknowledgement of Receipt of Materials				Printed/Typed Name MATT AMEY		Signature <i>Matt Amey</i>		
19. Discrepancy Indication Space				Printed/Typed Name Denise Dale		Signature <i>Denise Dale</i>		
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 13.				Printed/Typed Name Denise Dale		Signature <i>Denise Dale</i>		

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ 1741842



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 85209		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.			
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392						A. State Manifest Document Number NYC 281088-0					
4. Generator's Phone (716) 248-1800						B. Generator's ID SAME					
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 984908202		C. State Transporter's ID NYR05213					
7. Transporter 2 (Company Name)						D. Transporter's Phone (716) 226-2411					
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD BUILDING B AVON, NY 14414						10. US EPA ID Number 2-028-02		E. State Transporter's ID		F. Transporter's Phone ()	
						10. US EPA ID Number NYD 980753784		G. State Facility's ID		H. Facility's Phone (716) 226-3367	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol	
a. RQ WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001) (ERG#27) 6.7 LBS/GAL						No. 1 Type DM		15		G	
b.										EPA Waste No. D001 D059	
c.										EPA STATE	
d.										EPA STATE	
J. Additional Descriptions for Materials Listed Above I (A) D01B						K. Handling Codes for Wastes Listed Above					
a						b		c		d	
b						c		d		e	
15. Special Handling Instructions and Additional Information 9403 63665962 985209 2-028-02-1406 50 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 585 B: C: D:											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.											
Printed/Typed Name Robt Adams				Signature <i>Robt Adams</i>				Mo. Day Year 01/18/94			
17. Transporter 1 (Acknowledgement of Receipt of Materials)											
Printed/Typed Name Chris Cardilli				Signature <i>Chris Cardilli</i>				Mo. Day Year 01/18/94			
18. Transporter 2 (Acknowledgement of Receipt of Materials)											
Printed/Typed Name				Signature				Mo. Day Year			
19. Discrepancy Indication Space											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.											
Printed/Typed Name DIANE E BODINE				Signature <i>Diane Bodine</i>				Mo. Day Year 01/18/94			

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

GENERATOR
TRANSPORTER
FACILITY

NYC 281088-0



State of New Jersey
Department of Environmental Protection and Energy
Hazardous Waste Regulation Program
Manifest Section
CN 028, Trenton, NJ 08625-0028

Please type or print in block letters. (Form designed for use on elite (12-pitch) typewriter.) Form Approved, OMB No. 2050-0039, Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD98187702079993		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address SOMMERVILLE PACKAGING 3720 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NJA 1741843									
4. Generator's Phone (716) 248-1800				B. State Generator's ID SAME									
5. Transporter 1 Company Name SAFETY-KLEEN CORP		6. US EPA ID Number ILD984908202		C. State Trans. ID NY RVS JLS		D. Transporter's Phone (716) 228-2411							
7. Transporter 2 Company Name Safety Kleen Corp		8. US EPA ID Number ILD984908202		E. State Trans. ID NY RVS JLS		F. Transporter's Phone (716) 228-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036				10. US EPA ID Number NJD002182897				G. State Facility's ID 0093863404					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM				12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. HAZARDOUS LIQUID C.C. (NOT RECOMMENDED BY DOT OR DOT OR DOT) C.C. C.C. C.C.				No. 003		Type C.C.		Quantity 01218		Unit Wt/Vol P		Waste No. F005	
b. X RQ WASTE FLAMMABLE LIQUIDS NOS (TOLUENE AND HEXANE) 3 UN1993 PGLI (F005) (ERG#27)													
c.													
d.													
J. Additional Descriptions for Materials Listed Above X C.C.						K. Handling Codes for Wastes Listed Above F01 BLENDING F02 BLENDING F03 BLENDING F04 BLENDING F05 BLENDING F06 BLENDING F07 BLENDING F08 BLENDING F09 BLENDING F10 BLENDING F11 BLENDING F12 BLENDING F13 BLENDING F14 BLENDING F15 BLENDING F16 BLENDING F17 BLENDING F18 BLENDING F19 BLENDING F20 BLENDING F21 BLENDING F22 BLENDING F23 BLENDING F24 BLENDING F25 BLENDING F26 BLENDING F27 BLENDING F28 BLENDING F29 BLENDING F30 BLENDING F31 BLENDING F32 BLENDING F33 BLENDING F34 BLENDING F35 BLENDING F36 BLENDING F37 BLENDING F38 BLENDING F39 BLENDING F40 BLENDING F41 BLENDING F42 BLENDING F43 BLENDING F44 BLENDING F45 BLENDING F46 BLENDING F47 BLENDING F48 BLENDING F49 BLENDING F50 BLENDING F51 BLENDING F52 BLENDING F53 BLENDING F54 BLENDING F55 BLENDING F56 BLENDING F57 BLENDING F58 BLENDING F59 BLENDING F60 BLENDING F61 BLENDING F62 BLENDING F63 BLENDING F64 BLENDING F65 BLENDING F66 BLENDING F67 BLENDING F68 BLENDING F69 BLENDING F70 BLENDING F71 BLENDING F72 BLENDING F73 BLENDING F74 BLENDING F75 BLENDING F76 BLENDING F77 BLENDING F78 BLENDING F79 BLENDING F80 BLENDING F81 BLENDING F82 BLENDING F83 BLENDING F84 BLENDING F85 BLENDING F86 BLENDING F87 BLENDING F88 BLENDING F89 BLENDING F90 BLENDING F91 BLENDING F92 BLENDING F93 BLENDING F94 BLENDING F95 BLENDING F96 BLENDING F97 BLENDING F98 BLENDING F99 BLENDING F00 BLENDING							
15. Special Handling Instructions and Additional Information 11a Control #58865 - 5 Sample #100069 EMERGENCY RESP #1-708-888-4660 (24HRS) 11b Control #58880 - 6 Sample #100066 2-028-02-1406 PP# 919893 SKDOT A:1055 B:2078 C: D:													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 10/23/94													
Printed/Typed Name D HAROLD O'BRIEN				Signature <i>Harold O'Brien</i>				Month Day Year 10/11/94					
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name Chris Cardilli				Signature <i>Chris Cardilli</i>				Month Day Year 10/11/94					
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name Raymond Ward				Signature <i>Raymond Ward</i>				Month Day Year 01/14/94					
19. Discrepancy Indication Space 11a, 11b, 13a, 14a, 14b, 14c, 15a not checked C.C. 1) manifest # added GTS JB added													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name Darlene Grier				Signature <i>Darlene Grier</i>				Month Day Year 01/14/94					

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ 1741843



State of New Jersey
Department of Environmental Protection and Energy
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

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

Form Approved OMB No. 2050-0029 Expires 3-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD98187702031785	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3720 MONROE AVE PITTSFORD NY 14534			A. State Manifest Document Number NJA 1847545		
4. Generator's Phone (716) 248-1800			B. State Generator's ID (Gen. Site Address) SAME		
5. Transporter 1 Company Name SAFETY-KLEEN CORP		6. US EPA ID Number ILD984908202	C. State Trans. ID-NJDEPE Decal No. NYR15213		
7. Transporter 2 Company Name <i>SafetyKleen Corp</i>		8. US EPA ID Number <i>IND984908202</i>	D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036			E. State Trans. ID-NJDEPE Decal No. 53073		
			F. Transporter's Phone (908) 862-2000		
			G. State Facility's ID		
			H. Facility's Phone (908) 862-2000		
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM		12. Containers No.	13. Total Quantity	14. Unit wt/vol	15. Waste No.
a.	WASTE INK (NOT REGULATED BY USDOT OR USEPA)	002	DN01040		ED72
b.	X RQ WASTE FLAMMABLE LIQUIDS NOS (TOLUENE AND HEXANE) 3 UN1993 PGII (F005) (ERG#27)	001	DN010406		F005
c.					
d.					
J. Additional Descriptions for Materials Listed Above (S(L))			K. Handling Codes for Wastes Listed Above F04-BLENDING NY-B F04-BLENDING NY-B B		
a. 0001 TOLUENE 43% (S(L))			a. NY-B		
b. 0002 ALCOHOLS 12% (S(L))			b. NY-B B		
15. Special Handling Instructions and Additional Information 11a Control#58865-5 Sample#100069 EMERGENCY RESP #1-708-888-4660 (24HRS) 11b Control#58880-6 Sample#100066 SKDOT A:1055 B:2078 C: D: PP# 531785					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name X Paul Phillips		Signature <i>Paul Phillips</i>		Month Day Year 03 22 94	
Printed/Typed Name Christopher Cardilli		Signature <i>Christopher Cardilli</i>		Month Day Year 03 22 94	
Printed/Typed Name ROBERT SPAD		Signature <i>Robert Spad</i>		Month Day Year 03 22 94	
19. Discrepancy Indication Space A, JB Corrected JS					
Printed/Typed Name Darlene Grier		Signature <i>Darlene Grier</i>		Month Day Year 03 24 94	

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172



State of New Jersey
Department of Environmental Protection and Energy
Hazardous Waste Regulation Program
Manifest Section
CN 421, Trenton, NJ 08625-0421

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

Form Approved. OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020		Manifest Document No. 56215		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address SOMMERVILLE PACKAGING 3720 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1824624							
4. Generator's Phone (716) 248-1800						B. State Generator's ID-(Gen. Site Address) SAME							
5. Transporter 1 Company Name SAFETY-KLEEN CORP				6. US EPA ID Number ILD984908202		C. State Trans. ID-NJDEPE NY 6572 JB							
7. Transporter 2 Company Name SAFETY KLEEN Corp				8. US EPA ID Number ILD 984908202		D. Transporter's Phone (716 226-2411)							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036						E. State Trans. ID-NJDEPE S-8690							
						F. Decal No.- 51882							
						G. State Facility's ID 609 386 3444							
						H. Facility's Phone (908 862-2000)							
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) HM						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. WASTE INK (NOT REGULATED BY USDOT OR USEPA)						003		01560				1B72	
b. X RQ WASTE FLAMMABLE LIQUIDS NOS (TOLUENE AND HEXANE) 3 UN1993 PGII (F005) (ERG#27)						006		02436				F005	
c.													
d.													
J. Additional Descriptions for Materials Listed Above (SL)						K. Handling Codes for Wastes Listed Above TO4 BLENDING NY-B TO4 BLENDING NY-B							
a. D001 TOLUENE HEXANE BLENDS						c.							
b. MICRO ALCOHOLS 16% (LIT)						d.							
15. Special Handling Instructions and Additional Information 11a Control#58865-5 Sample#100069 2-028-02-1406 PP# 256215 EMERGENCY RESP #1-708-888-4660 (24HRS) SKDOT A:1055 B:2078 C: D: 11b Control#58880-5 Sample#100066													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name HAROLD O'BRIEN						Signature <i>Harold O'Brien</i>			Month Day Year 12/03/93				
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Chris Cardilli						Signature <i>Chris Cardilli</i>			Month Day Year 12/03/93				
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name MATT AMEY						Signature <i>Matt Amey</i>			Month Day Year 12/09/93				
19. Discrepancy Indication Space SA & JB added													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Darlene Grier						Signature <i>Darlene Grier</i>			Month Day Year 12/09/93				

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

NJ A 1824624

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

Please print or type. DO NOT STAPLE.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 37620		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.															
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392						A. State Manifest Document Number NYC 268375 4																	
4. Generator's Phone (716) 248-1800						B. Generator's ID SAME																	
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 984908202		C. State Transporter's ID NYM16725																	
7. Transporter 2 (Company Name)				8. US EPA ID Number		D. Transporter's Phone (716) 226-2411																	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414						10. US EPA ID Number 2-028-02 NYD 980753784		E. State Transporter's ID															
								F. Transporter's Phone ()															
								G. State Facility's ID															
								H. Facility's Phone (716) 226-2411															
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		I. Waste No.											
a. RQ WASTE COMBUSTIBLE LIQUID, N.O.S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001) (ERG#27) 6.7 LBS/GAL						No. 1		Type DM		15		G		EPA D001 STATE D001									
b.												EPA		STATE									
c.												EPA		STATE									
d.												EPA		STATE									
J. Additional Descriptions for Materials Listed Above I (A) D018						K. Handling Codes for Wastes Listed Above																	
a						a <input checked="" type="checkbox"/> R						c <input type="checkbox"/>											
b						b <input type="checkbox"/>						d <input type="checkbox"/>											
15. Special Handling Instructions and Additional Information 9347 61657649 337620 2-028-02-1406 50 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 585 B: C: D:																							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						Printed/Typed Name THOMAS CASTON						Signature <i>Thomas Caston</i>						Mo. Day Year 11 22 93					
17. Transporter 1 (Acknowledgement of Receipt of Materials)						Printed/Typed Name Chris Cardilli						Signature <i>Chris Cardilli</i>						Mo. Day Year 11 22 93					
18. Transporter 2 (Acknowledgement of Receipt of Materials)						Printed/Typed Name						Signature						Mo. Day Year					
19. Discrepancy Indication Space																							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						Printed/Typed Name Linda Gascon						Signature <i>Linda Gascon</i>						Mo. Day Year 11 22 93					

NYC 268375 4



State of New Jersey
 Department of Environmental Protection and Energy
 Hazardous Waste Regulation Program
 Manifest Section
 CN 421, Trenton, NJ 08625-0421

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

Form Approved, OMB No. 2050-0039 Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. N Y D 9 8 1 8 7 7 9 2 0		Manifest Document No. 85268		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.						
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3720 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1841346								
4. Generator's Phone (716) 248-1800						B. State Generator's ID-(Gen. Site Address) SAME								
5. Transporter 1 Company Name SAFETY-KLEEN CORP			6. US EPA ID Number I L D 9 8 4 9 0 8 2 0 2			C. State Trans. ID-NJDEPE Decal No.- NKJ5250								
7. Transporter 2 Company Name SAFETY KLEEN CORP			8. US EPA ID Number I L D 9 8 4 9 0 8 2 0 2			D. Transporter's Phone (716) 226-2411								
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN ST LINDEN NJ 07036						E. Designator ID MSDEPS8690								
10. US EPA ID Number N J D 0 0 2 1 8 2 8 9 7						F. Transporter's Phone (609) 386-3404								
11. US DOT Description (Including Proper Shipping Name, Hazard Class or Division, ID Number and Packing Group) WASTE INK C.C. (NOT REGULATED BY USDOT OR USFRA) X RQ WASTE FLAMMABLE LIQUIDS NOS (TOLUENE AND HEXANE) 3 UN1993 PGII (F005)(ERG#27)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.		
a. CC						c.c. c.c.		c.c. c.c.		c.c.				
b. X						006 DM		02436 P		F005				
J. Additional Descriptions for Materials Listed Above CC						K. Handling Codes for Wastes Listed Above CC TOX-BLENDING TOX-BLENDING								
15. Emergency Response Information and Additional Information 11a Control #58865-5 Sample #100060 EMERGENCY RESP #1-708-888-4660 (24HRS) 11b Control #58865-6 Sample #100066						2-028-02-1406		PP# M85268 B:2078 C: D:						
16. Generator's Certification: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.														
Printed/Typed Name Harold O'Brien					Signature HAROLD O'BRIEN					Month Day Year 11/10/93				
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Chris Cordilli					Signature Chris Cordilli					Month Day Year 11/10/93				
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name MATT AMERY					Signature MATT					Month Day Year 11/12/93				
19. Discrepancy Indication Space 11a Hm checked in encl. GR. Aided JA 11a not needed C.C. 12a, 13a, 14a, 1a, Ja, Ka, 15 not needed C.C.														
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name PAUL MARINI					Signature Paul Mann					Month Day Year 11/11/93				

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection and Energy. (609) 292-7172

GENERATOR
TRANSPORTER
FACILITY



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-91

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 15802		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392						A. State Manifest Document Number NY C 143484-6			
4. Generator's Phone (716) 248-1800						B. Generator's ID SAME			
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		C. State Transporter's ID NYSP5797			
7. Transporter 2 (Company Name)				8. US EPA ID Number		D. Transporter's Phone (716) 226-2411			
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414						10. US EPA ID Number 2-028-02		E. State Transporter's ID	
								F. Transporter's Phone ()	
								G. State Facility's ID	
								H. Facility's Phone (716) 226-2411	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)						1	86	P	D001 D039
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above I(A) D018						K. Handling Codes for Wastes Listed Above			
a							<input checked="" type="checkbox"/>	c	<input type="checkbox"/>
b							<input type="checkbox"/>	d	<input type="checkbox"/>
15. Special Handling Instructions and Additional Information EMERGENCY RESP#1-708-888-4660 24HR SKDDT# A: 501 B: C: D:						9204 35431410 015802 2-028-02-1406 05			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. <small>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.</small>									
Printed/Typed Name STEVE FRIGA				Signature <i>Steve Friga</i>		Mo. Day Year 10 12 92			
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Signature <i>Scott Hulburt</i>		Mo. Day Year 10 12 92			
Printed/Typed Name Scott Hulburt				Signature		Mo. Day Year			
18. Transporter 2 (Acknowledgement of Receipt of Materials)				Signature		Mo. Day Year			
Printed/Typed Name				Signature		Mo. Day Year			
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.									
Printed/Typed Name DIANE E BODINE				Signature <i>Diane E Bodine</i>		Mo. Day Year 10 12 92			

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NYC 143484-6



2-028-02

State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section
 CN 028, Trenton, NJ 08625

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

Form Approved. OME No. 2050-0039. Expires 9-30-94

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 9B1877020		Manifest Document No. 62001		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1331723							
4. Generator's Phone (716 248-1800)						B. State Generator's ID SAME							
5. Transporter 1 Company Name SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		C. NYGJ5250							
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter's Phone (716 226-2411)							
9. SAFETY-KLEEN CORP Address 1200 SYLVAN STREET LINDEN, NJ 07036				10. US EPA ID Number 0-006-35		E. State Trans. ID							
						F. Transporter's Phone (NONE)							
						G. State Facility's ID							
						H. Facility's Phone (908 862-2000)							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
GENERATOR	a.	X	RQ WASTE COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA1993 (FOO5) (ERG#27)			001	DM	00400	P	F O O 5			
	b.	X	RQ WASTE INK COMBUSTIBLE LIQUID UN1210 (DOO1) (ERG#26)			001	DM	00500	P	D O O 1			
	c.	X	RQ WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (DOO1) (ERG#26)			002	DM	01000	P	D O O 1			
	d.												
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a.						TO4-BLENDING							
b.						TO4-BLENDING							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree that is economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						37834389							
17. Transporter 1 Acknowledgement of Receipt of Materials						18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name Peter Onofrey						Signature <i>Peter Onofrey</i>							
Printed/Typed Name Scott Hulburt						Signature <i>Scott Hulburt</i>							
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name Darlene Grier						Signature <i>Darlene Grier</i>							

NJ 1331723



State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section
 CN 028, Trenton, NJ 08625

2-028-02

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

Form Approved. OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 6018103		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.								
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1332508										
4. Generator's Phone (716 248-1800)						B. State Generator's ID SAME										
5. Transporter 1 Company Name SAFETY-KLEEN CORP.			6. US EPA ID Number ILD 051060408			C. State ID NY6J5258										
7. Transporter 2 Company Name			8. US EPA ID Number			D. Transporter's Phone (716 226-2411)										
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN STREET LINDEN, NJ 07036						E. State Trans. ID										
10. US EPA ID Number 0-006-35						F. Transporter's Phone ()										
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.				
a. <input checked="" type="checkbox"/> RQ WASTE INK COMBUSTIBLE LIQUID UN1210 (DOO1) (ERG#26)						002 DM		01040		P		D 0 0 1				
b. <input checked="" type="checkbox"/> RQ WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (DOO1) (ERG#26)						002 DM		01030		P		D 0 0 1				
c.																
d.																
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above										
a.						b. T04-BLENDING										
c.						d. T04-BLENDING										
L. Special Handling Instructions and Additional Information						11a) CONTROL#0058865-5 0000 32952103 000000 2-028-02-1406 760608										
Ka) NY HANDLING CODE = B						Kb) NY HANDLING CODE = B										
EMERGENCY RESP#708-888-4660 24HR						SKDOT# A: B: C: D:										
11b) CONTROL#0058943-1																
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.										36128692						
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.																
Printed/Typed Name STEVE FUGA					Signature <i>Steve Fuga</i>					Month Day Year 0111392						
17. Transporter 1 Acknowledgement of Receipt of Materials					Printed/Typed Name Scott Hulbert					Signature <i>Scott C Hulbert</i>					Month Day Year 0111392	
18. Transporter 2 Acknowledgement of Receipt of Materials					Printed/Typed Name					Signature					Month Day Year	
19. Discrepancy Indication Space																
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.																
Printed/Typed Name Denise Dore					Signature <i>Denise Dore</i>					Month Day Year 012092						

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJ 1332508



2-028-02

State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section

CN 028, Trenton, NJ 08625

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

Form Approved. GMD No. 2050-0039. Expires 9-30-94

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest No. 05-015-00	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NJA 1374383		
4. Generator's Phone (716) 248-1800				B. State Generator's ID SAME		
5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 091060408		C. NY6J5250		
7. Transporter 2 Company Name Hazmat Enviro Group Inc		8. US EPA ID Number NY 0980769947		D. Transporter's Phone (716) 226-2411		
9. Transporter 1 Facility Name and Address SAFETY-KLEEN CORP 1200 SYLVAN STREET LINDEN, NJ 07036		10. US EPA ID Number 0-006-35		E. State Trans. ID 510602		
		10. US EPA ID Number NJD 002182897		F. Transporter's Phone / 716 527 7700		
				G. State Facility's ID NONE		
				H. Facility's Phone (908) 862-2000		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM				12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
a.	X	RO WASTE COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA1993 (FO05)(ERG#27)		002	00800	P F 0 0 5
b.	X	RO WASTE INK COMBUSTIBLE LIQUID UN1210 (DO01) (ERG#26)		001	00520	P D 0 0 1
c.	X	RO WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (ERG#26)		001	00500	P D 0 0 1
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a.		c.		TO4-BLENDING		TO4-BLENDING
b.		d.		TO4-BLENDING		
15. Special Handling Instructions and Additional Information 11a) CONTROL# 0058830-5 0000 34646356 000000 2-028-02-1406 105050 11b) NY HANDLING CODE = B 11c) CONTROL# 0058943-1 11d) NY HANDLING CODE = B 11e) EMERGENCY RESP# 708-888-4660 24HR IF UNDETERMINABLE RETURN TO GENERATOR 11f) CONTROL# 0058863-5 SKDOT# A: B: C: 16986 D: 1279PNY 11g) NY HANDLING CODE = B						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree that is economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 30553252						
Printed/Typed Name STEVE FRIGA				Signature <i>Steve Friga</i>		Month Day Year 10/29/92
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Scott Hulburt				Signature <i>Scott Hulburt</i>		Month Day Year 10/29/92
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name Kirk ADAMS				Signature <i>Kirk Adams</i>		Month Day Year 10/13/1992
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name Darlene Grier				Signature <i>Darlene Grier</i>		Month Day Year 02/10/92

NJ A1374383



2-028-02

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2950-0039. Expires 3-30-92

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 30174	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 152579-2		
4. Generator's Phone (716) 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NYNP5797		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number 2-028-02 NYD 980753784		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)		1	DM	86	P	EPA D001 STATE D039
b.						EPA STATE
c.						EPA STATE
d.						EPA STATE
J. Additional Descriptions for Materials Listed Above I (A) D018				K. Handling Codes for Wastes Listed Above		
a				a <input checked="" type="checkbox"/> R		
b				b <input type="checkbox"/>		
c				c <input type="checkbox"/>		
d				d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 9212 37493574 730174 2-028-02-1406 05 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 501 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name PETER ONOFREY		Signature <i>Peter Onofrey</i>		Mo. Day Year 03/16/92		
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Scott Hulburt		Signature <i>Scott C. Hulburt</i>		Mo. Day Year 03/16/92		
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name Tina L. Love		Signature <i>Tina L. Love</i>		Mo. Day Year 03/16/92		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NYC 152579-2



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 33808	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 243996-6		
4. Generator's Phone (716) 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 984908202		C. State Transporter's ID KVMF6725		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON NY 14414				10. US EPA ID Number 2-028-02 NYD 980753784		E. State Transporter's ID
				F. Transporter's Phone ()		G. State Facility's ID
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. RG WASTE COMBUSTIBLE LIQUID, N. O. S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001) (ERG#27) 6.7 LBS/GAL		1	DM	15	G	EPA D001 STATE D001
b.						EPA STATE
c.						EPA STATE
d.						EPA STATE
J. Additional Descriptions for Materials Listed Above I (A) D018				K. Handling Codes for Wastes Listed Above		
a				a <input checked="" type="checkbox"/> c <input type="checkbox"/>		
b				b <input type="checkbox"/> d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 9331 57266405 033808 2-028-02-1406 05 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 585 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Paul Phillips		Signature <i>Paul Phillips</i>		Mo. Day Year 08 04 93		
17. Transporter 1 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name Chris Cardilli		Signature <i>Chris Cardilli</i>		Mo. Day Year 08 04 93		
18. Transporter 2 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19						
Printed/Typed Name DIANE E BOONE		Signature <i>Diane E Boone</i>		Mo. Day Year 08 04 93		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NY C 243996-6



2-028-02

State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section
 CN 028, Trenton, NJ 08625

Form Approved OMB No. 2050-0039 Expires 9-30-94

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

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 1981B77020		Manifest Document No. 16060		2. Page 1 of 1 Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1546402	
4. Generator's Phone (716 248-1800)						B. State Generator's ID SAME	
5. Transporter 1 Company Name SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		NYG05250	
7. Transporter 2 Company Name Safety Kleen Corp				8. US EPA ID Number ILD 051060408		D. Transporter's Phone (716 226-2411)	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN STREET LINDEN, NJ 07036				10. US EPA ID Number 0-006-35		E. State Trans. ID NJDEPS8890	
						F. Transporter's Phone (609 386-3404)	
						G. State Facility's ID	
						H. Facility's Phone (908 862-2000)	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM						12. Containers No. Type	
a. X RD WASTE INK 3 UN1210 POLI(D001) (ERG#25)						13. Total Quantity	
						14. Unit Wt/Vol	
						I. Waste No.	
						002 D M 01040 P D001	
J. Additional Descriptions for Materials Listed Above						Additional Descriptions for Wastes Listed Above	
a.						a.	
b.						b.	
c.						c.	
d.						d.	
15. Special Handling Instructions and Additional Information 11a) Control #58865-5 SAMPLE#150069 0000 48657886 000000 2-028-02-1406 M16060 EMERGENCY RESP#708-888-4660 24HR IF UNDELIVERABLE RETURN TO GENERATOR SKDOT# A: 1097 B: C: D:							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name HAROLD O'BRIEN				Signature <i>[Signature]</i>		Month Day Year 043093	
17. Transporter 1 Acknowledgement of Receipt of Materials							
Printed/Typed Name Chris Cardilli				Signature <i>[Signature]</i>		Month Day Year 043093	
18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed/Typed Name Art Shover				Signature <i>[Signature]</i>		Month Day Year 050393	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name Marquitta F. Conrad				Signature <i>[Signature]</i>		Month Day Year 050493	

NJ 1546402



2-028-02

State of New Jersey Department of Environmental Protection Division of Hazardous Waste Management Manifest Section

CN 028, Trenton, NJ 08625

5/13

Form Approved. OMB No. 2050-0039. Expires 9-30-94

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981 877 020		Manifest Document No. 24598		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534		4. Generator's Phone (716-248-1800)		5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number LD 051040408		A. State Manifest Document Number NJA 1400517	
7. Transporter 2 Company Name		8. US EPA ID Number		9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1200 SYLVAN STREET LINDEN, NJ 07036		10. US EPA ID Number LD 002182897		B. State Generator's ID NONE	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM		12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. <input checked="" type="checkbox"/> NO WASTE COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA1993 (1005) (REG#27)		003 M		01218				005	
b. <input checked="" type="checkbox"/> NO WASTE INK COMBUSTIBLE LIQUID UN1210 (1001) (REG#26)		001 D		00520				001	
c. <input checked="" type="checkbox"/> NO WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (1001) (REG#26)		002 M		01034				001	
d. <input type="checkbox"/>									
J. Additional Descriptions for Materials Listed Above		K. Handling							
16. Special Handling Instructions and Additional Information NY HANDLING CODE = B.11c) CONTROLLED BY UNDERCITY EMERGENCY RESP#708-886-4660 24HR IT UNDELIVERABLE RETURN TO ORIGINATOR SKDOT# A:1146 B:1097 C:1106									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name PETER ONOFFREY		Signature <i>Peter Onoffrey</i>		Month Day Year 05/10/94					
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name DAN SHEEMAN		Signature <i>Daniel Sheeman</i>		Month Day Year 05/10/94			
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Printed/Typed Name MARBUKITE		Signature <i>Marbukite</i>		Month Day Year 05/11/94			

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-94

Please print or type. DO NOT STAPLE.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 19779		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.					
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392						A. State Manifest Document Number NY C 224022-3							
4. Generator's Phone (716) 248-1800						B. Generator's ID SAME							
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		C. State Transporter's ID NYDE8741							
7. Transporter 2 (Company Name)				8. US EPA ID Number		D. Transporter's Phone (716) 226-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1925 WEST HENRIETTA RD AVON NY 14414						10. US EPA ID Number 2-028-02 NYD 980753784							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. WASTE COMBUSTIBLE LIQUID, N. O. S. (PETROLEUM NAPHTHA) NA1993 PGIII (D001) (ERG#27)						No. 1		Type DM		Quantity 17		Unit G	
b.												EPA D001	
c.												STATE	
d.												EPA	
												STATE	
J. Additional Descriptions for Materials Listed Above I (A) D018						K. Handling Codes for Wastes Listed Above a <input checked="" type="checkbox"/> R b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/>							
15. Special Handling Instructions and Additional Information EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 501 B: C: D:						9315 52710795 719779 2-028-02-1406 05							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. <small>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.</small>													
Printed/Typed Name Paul Phillips						Signature <i>Paul Phillips</i>						Mo. Day Year 04/16/93	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Chris Cardilli						Signature <i>Chris Cardilli</i>						Mo. Day Year 04/16/93	
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name						Signature						Mo. Day Year	
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.													
Printed/Typed Name Tina Lore						Signature <i>Tina Lore</i>						Mo. Day Year 04/16/93	

NY C 224022-3



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039. Expires 9-30-94

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 61043	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NYC 215739-9		
4. Generator's Phone (716) 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NY6J5250		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON NY 14414		10. US EPA ID Number 2-028-02 NYD 980753784		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers No.	13. Total Quantity	14. Unit Wt/Vol
a. WASTE COMBUSTIBLE LIQUID, N. O. S. (MINERAL SPIRITS) NA1993 PGIII (D001) (ERG#27)				1	17	G
b.						EPA Waste No. D001
c.						STATE D009
d.						EPA STATE
J. Additional Descriptions for Materials Listed Above I(A) D018				K. Handling Codes for Wastes Listed Above		
a				b <input checked="" type="checkbox"/>		c <input type="checkbox"/>
b				d <input type="checkbox"/>		e <input type="checkbox"/>
15. Special Handling Instructions and Additional Information 9307 50420967 061043 2-028-02-1406 05 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 501 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Paul Phillipis		Signature <i>Paul Phillipis</i>		Mo. Day Year 10 21 93		
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Gregory B. Smith		Signature <i>Gregory B. Smith</i>		Mo. Day Year 10 21 93		
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name Lina L. Love		Signature <i>Lina L. Love</i>		Mo. Day Year 10 21 93		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (516) 457-7362.

NYC 215739-9



State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

2-028-02

5/13

Form Approved. OMB No. 2050-0039. Expires 9-30-94

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

UNIFORM HAZARDOUS WASTE MANIFEST form with sections for generator information, transporter information, waste description, and signatures. Includes handwritten entries like 'NYD 981877020', 'NYA 1406517', and '003 M 01218 PF 005'.

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)



2-028-02

State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section
 CN 028, Trenton, NJ 08625

Form Approved OMB No. 2050-0039 Expires 9-30-94

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

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 59273	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534					A. State Manifest Document Number NJA 1544243				
4. Generator's Phone (716 248-1800)					B. State Generator's ID SAME				
5. Transporter 1 Company Name SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408					
7. Transporter 2 Company Name Safety KLEEN Corp					8. US EPA ID Number ILD051060408				
9. Designated Facility Name and Site Address SAFETY KLEEN CORP 1200 SYLVAN STREET LINDEN, NJ 07036					10. US EPA ID Number 0-006-35				
					D. Transporter's Phone 716 226-2411		E. State Trans. ID NJDEPS8690		
					F. Transporter's Phone (609 286-3404)		G. State Facility's ID RENE		
					H. Facility's Phone (908) 862-2000				
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM						12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. X RD WASTE DRK 3 UN1210 PG III (D001) (ERG#26)						004	02081	P	D O O 1
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above P04 - H314, H335, H410			
a.						a.		c.	
b.						b.		d.	
14. Special Handling Instructions and Other Information SURVEY# 100069						0000 47573357 000000 2-028-02-1406 659273			
EMERGENCY RESP#708-888-4660 24HR IF UNDELIVERABLE RETURN TO GENERATOR						SKDOT# A: 1097 B: C: D:			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name HAROLD I O'BRIEN					Signature <i>[Signature]</i>			Month Day Year 01 1 593	
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name Kevin Carmichael					Signature <i>[Signature]</i>			Month Day Year 01 1 593	
18. Transporter 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name ART Shaker					Signature <i>[Signature]</i>			Month Day Year 01 1 893	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name Darlene Corrier					Signature <i>[Signature]</i>			Month Day Year 01 1 9 93	

NJ01544243



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-92

Please print or type. DO NOT STAPLE.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 30067	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392			A. State Manifest Document Number NY C 172676-2		B. Generator's ID SAME	
4. Generator's Phone (716) 248-1800		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NY 655250		D. Transporter's Phone (716) 226-2411
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP		7. Transporter 2 (Company Name)		E. State Transporter's ID		F. Transporter's Phone ()
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number 2-028-02		G. State Facility's ID		H. Facility's Phone (716) 226-2411
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)			No. 1	Type DM	86	P
b.						EPA Waste No. D001
c.						D039
d.						EPA STATE
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above			
I (A) D018			a	<input checked="" type="checkbox"/>	c	<input type="checkbox"/>
b			b	<input type="checkbox"/>	d	<input type="checkbox"/>
15. Special Handling Instructions and Additional Information 9228 41659715 230067 2-028-02-1406 05 EMERGENCY RESP#1-708-888-4660 24HR						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name PETER ONOFFREY		Signature <i>Peter Onoffrey</i>		Mo. Day Year 07 09 92		
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Printed/Typed Name DAN SHEPHERD		Signature <i>Daniel Shepherd</i>		Mo. Day Year 07 09 92
18. Transporter 2 (Acknowledgement of Receipt of Materials)		Printed/Typed Name		Signature		Mo. Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name TINA L Lore		Signature <i>Tina L. Lore</i>		Mo. Day Year 07 09 92		

NY C 172676-2



2-028-02

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

Form Approved, OMB No. 2050-0039 Expires 9-30-94

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 13 3 1 6 7		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1463722									
4. Generator's Phone (716 248-1800)						B. State Generator's ID SAME									
5. Transporter 1 Company Name SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		C. State Transp. ID NYGJ550									
7. Transporter 2 Company Name SAFETY KLEEN CORP				8. US EPA ID Number ILD 051060408		D. Transporter's Phone (716 226-2411) NTDPS-8690 19282									
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN STREET LINDEN, NJ 07036						10. US EPA ID Number 0-006-35 NJD 002182897									
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
GENERATOR	a.	X	RQ WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG#26)			003	DM	01561	P	P	0	0	1		
	b.	X	RQ WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (D001) (ERG#26)			003	DM	01547	P	P	0	0	1		
	c.														
	d.														
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above									
a.						a. PO1-BLENDING B									
b.						b. PO1-BLENDING B									
15. Special Handling Instructions and Additional Information 11a) CONTROL# 0058865-5 Ka) NY HANDLING CODE = B SAMPLE# 100069 EMERGENCY RESP# 708-988-4660 24HR IF UNDELIVERABLE RETURN TO GENERATOR 11b) CONTROL# 0058943-1 SAMPLE SKDOT# A: 10 97 B: 11 06 C: D: 16) NY HANDLING CODE = 3100065															
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name PETER ONOFREY						Signature <i>Peter Onofrey</i>			Month Day Year 07 09 92						
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name DAN SHERMAN			Signature <i>Dan Sherman</i>			Month Day Year 07 09 92		
	18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name MATT AMEY			Signature <i>Matt</i>			Month Day Year		
	19. Discrepancy Indication Space														
FACILITY	20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 18.						Printed/Typed Name MARGUERITE COVINO			Signature <i>Marguerite Covino</i>			Month Day Year		

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA 1463722



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039. Expires 9-30-92

Please print or type. DO NOT STAPLE.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 89602	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 192471-6		
4. Generator's Phone (716) 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NYM E6725		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON NY 14414				10. US EPA ID Number 2-028-02 NYD 980753784		E. State Transporter's ID
				F. Transporter's Phone ()		G. State Facility's ID
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers
						No. Type
a. WASTE COMBUSTIBLE LIQUID, N. O. S. (MINERAL SPIRITS) NA1993 PGIII (D001) (ERG#27)						1 DM
b.						86
c.						P
d.						D001 D059
J. Additional Descriptions for Materials Listed Above I(A) D018						K. Handling Codes for Wastes Listed Above
a						<input checked="" type="checkbox"/> R
b						<input type="checkbox"/>
15. Special Handling Instructions and Additional Information 9244 45936176 689602 2-028-02-1406 05 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 501 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Paul C. Phillips		Signature <i>Paul C. Phillips</i>		Mo. Day Year 10 26 92		
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Chris Cardilli		Signature <i>Chris Cardilli</i>		Mo. Day Year 11 02 1992		
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space Item 16 DATE SHOULD READ 10-26-92 corrected						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name DIANE E BOONE		Signature <i>Diane E Boone</i>		Mo. Day Year 10 26 92		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NY C 192471-6



2-028-02

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

Form Approved OMB No. 2050-0039 Expires 9-30-94

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

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No.

NYD 981877020

Manifest Document No.

92378

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
SOMERVILLE PACKAGING
3750 MONROE AVE
PITTSFORD NY 14534

A. State Manifest Document Number
NJ 1442569

4. Generator's Phone (716 248-1800

B. State Generator's ID
SAME

5. Transporter 1 Company Name
SAFETY-KLEEN CORP.

6. US EPA ID Number
ILD 051060408

NY0J5250

7. Transporter 2 Company Name
Safety-Kleen Corp

8. US EPA ID Number
IL 0051060408

D. Transporter's Phone (716 226-2411

9. Transporter 1 Address
SAFETY-KLEEN CORP.
1200 SYLVAN STREET
LINDEN, NJ 07036

10. US EPA ID Number
0-006-35

E. State Trans. ID
NIDEP58690

F. Transporter's Phone (609 366-3404

G. State Facility's ID

H. Facility's Phone (908 862-2000

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)
HM

12. Containers
No. Type

13. Total Quantity

14. Unit Wt/Vol

15. Waste No.

GENERATOR

a. X RQ WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG#26)

003 DM 01500 P D 0 0 1

b. X RQ WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (D001) (ERG#26)

003 DM 01500 P D 0 0 1

J. Additional Descriptions for Materials Listed Above

K. Handling Codes for Wastes Listed Above

a. b.

B
TO4-BLENDING
B
TO4-BLENDING

15. Special Handling Instructions and Additional Information

0000 40299505 000000 2-028-02-1406 592378

11a) CONTROL#0058865-5

Ka) NY HANDLING CODE = B SAMPLE #100069

EMERGENCY RESP#708-888-4660 24HR

IF UNDELIVERABLE RETURN TO GENERATOR

11b) CONTROL#0058943-1

Kb) NY HANDLING CODE = B 100065

SKDOT# A: B: C: D:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

PETER ONOFREY

Signature

Peter Onofrey

Month Day Year

06/04/92

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Scott Hulburt

Signature

Scott Hulburt

Month Day Year

06/04/92

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Art Shaver

Signature

Art Shaver

Month Day Year

06/08/92

FACILITY

19. Discrepancy Indication Space

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

Printed/Typed Name

Vicki Jopek

Signature

Vicki Jopek

Month Day Year

06/09/92

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA 1442569



STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Please print or type. DO NOT STAPLE.

Form Approved OMB No. 2050-0039, Expires 9-30-96

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NY D 9 1 8 1 8 7 7 0 2 0	Manifest Document No. 17664	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address SHOREWOOD PACKAGING 3720 MONROE AVE PITTSFORD, NY 14534				A. State Manifest Document Number NY C 399619-1		
4. Generator's Phone (516) 694-2900				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP		6. US EPA ID Number LD 9 8 4 9 0 8 2 0 2		C. State Transporter's ID NY 835250		
7. Transporter 2 (Company Name) J.B. HUNT SPECIAL COMMODITIES INC		8. US EPA ID Number ARD 1981908551		D. Transporter's Phone (716) 226-2411		
9. Designed Facility Name and Site Address SAFETY-KLEEN CORP 3700 LA GRANGE RD SMITHFIELD KY 40068				E. State Transporter's ID PP 159-380 OK		
				F. Transporter's Phone (800) 369-8537		
				G. State Facility's ID		
				H. Facility's Phone 502 845-2453		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
a. RQ WASTE FLAMMABLE LIQUIDS, N.O.S. (ALIPHATIC AND AROMATIC HYDROCARBONS) 3 UN1993 PGIII (D001) (ERG#27)		No. Type			EPA D001	
		003 DM	01305	P	STATE	
b. RQ WASTE ALCOHOLS, N.O.S. (ALIPHATIC ALCOHOLS) 3 UN1987 PGII (D001) (ERG#26)					EPA D001	
		002 DF	00972	P	STATE	
c.					EPA	
d.					STATE	
J. Additional Descriptions for Materials Listed Above D039 D018				K. Handling Codes for Wastes Listed Above		
a.				S01 S02 T50		
b.				S01 S02 T50		
15. Special Handling Instructions and Additional Information 11A) CONTROL#3502361-9 SAMPLE#641440 2-028-02-9855 PP# M17664 EMERGENCY RESP #1-800-468-1760 (24HRS) SKDOT A:5844 B:1963 11B) CONTROL#3500499-1 SAMPLE#641441						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Thomas Hurysz		Signature Thomas Hurysz		Mo. Day Year 10 3 2 1 9 6		
17. Transporter 1 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name PETCHER GRAY		Signature Petcher Gray		Mo. Day Year 0 3 2 2 1 9 6		
18. Transporter 2 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name STEVE LERCH		Signature Steve Lerch		Mo. Day Year 10 3 2 5 1 9 6		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name Tonya Roberts		Signature Tonya Roberts		Mo. Day Year 10 3 2 6 1 9 6		

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NY C 399619-1



State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section
 CN 028, Trenton, NJ 08625

2-028-02

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

Form Approved. OMB No. 2050-0039. Expires 9-30-94

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 63865		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.							
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NJA 1357154									
4. Generator's Phone (716 248-1800)						B. State Generator's ID SAME									
5. Transporter 1 Company Name SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		NYSD&ES ID NY 6J 5250									
7. Transporter 2 Company Name SAFETY KLEEN CORP				8. US EPA ID Number ILD 051060408		D. Transporter's Phone (716) 226-2411									
9. Generator's Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN STREET LINDEN, NJ 07036				10. US EPA ID Number 0-006-35		NSDEP'S # 615208 41440									
						F. Transporter's Phone 609 386-3404		G. State Facility's ID NONE							
						H. Facility's Phone 908 862-2000									
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
GENERATOR	a.	X RQ Waste Compound Cleaning Liquid Flammable Liquid NA1993 (F005) (ERG#27)				008 DM	03250 P	F005							
	b.	X RQ Waste Ink COMBUSTIBLE LIQUID UN 1210 (D001) (ERG#26)				004 DM	02080 P	D001							
	c.	X RQ Waste ADHESIVE COMBUSTIBLE LIQUID UN 1133 (D001) (ERG#26)				PP DM	PP DM	PP D001							
	d.	X RQ Waste Oil COMBUSTIBLE LIQUID NA 1270 (D001) (ERG#27)				PP PP DM	PP DM	PP D001							
	J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above								
						TOT-BLENDING TOT-BLENDING a. NY-B PP NY-B TOT-BLENDING TOT-BLENDING b. NY-B PP NY-B									
Special Handling Instructions and Additional Information (A) CONTROL # 58880-6 Sample # 100066 (B) CONTROL # 58865-5 Sample # 100069 EMERGENCY RESP # 708-888-4650 24HR IF UNDELIVERABLE RETURN TO GENERATOR (H) CONTROL # 58913-1 Sample # 100065 SKDOT# A.P.P.						0000 46698973 000000 2-028-02-1406 965865									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name Paul Phillips						Signature <i>Paul Phillips</i>			Month Day Year 1/20/92						
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name Gregory B. Smith			Signature <i>Gregory B. Smith</i>			Month Day Year 1/20/92		
	18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name MATT AMEY			Signature <i>Matt Amey</i>			Month Day Year 1/20/92		
	19. Discrepancy Indication Space														
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.															
Printed/Typed Name Denise Donl.						Signature <i>Denise Donl.</i>			Month Day Year 1/20/92						

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJ 1357154

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2060-0039, Expires 9-30-88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981B77020		Manifest Document No. 146659		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.					
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK COR 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NYA 889150-4							
4. Generator's Phone (716) 248-8048						B. Generator's ID							
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.				6. US EPA ID Number ILD031060408		C. State Transporter's ID NYML2372							
7. Transporter 2 (Company Name)						D. Transporter's Phone (716) 226-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414						E. State Transporter's ID							
10. US EPA ID Number NYD980753784						F. Transporter's Phone ()							
						G. State Facility's ID							
						H. Facility's Phone (716) 226-2411							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, D001) 501						001 DM		80 P		D001			
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a						a <input checked="" type="checkbox"/> R							
b						b <input type="checkbox"/>							
c						c <input type="checkbox"/>							
d						d <input type="checkbox"/>							
15. Special Handling Instructions and Additional Information 2-028-02-1406 BPT 146659 TERR 0606 WK 8820													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name X JAMES BEEBE						Signature X [Signature]						Mo. Day Year 05/16/88	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name X DANIEL DEVRIES						Signature X [Signature]						Mo. Day Year 05/16/88	
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name						Signature						Mo. Day Year	
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name IRENE KENNEY													
Signature Irene Kenney						Mo. Day Year 05/16/88							

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

NYA 889150-4



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2650-0039, Expires 9-30-88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 162878	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK COR 3750 MONROE AVE PITTSFORD NY 14534 716 248-8048				A. State Manifest Document Number NYA 884866-4		
4. Generator's Phone		5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD05106040B		C. State Transporter's ID NYML2372
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone 716226-2411		E. State Transporter's ID
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414				10. US EPA ID Number NYD980753784		F. Transporter's Phone ()
				G. State Facility's ID		H. Facility's Phone 716226-2411
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers No. Type
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, D001) 501						13. Total Quantity 80 P
b.						14. Unit Wt/Vol
c.						15. Waste No. D001
d.						
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above
a.						R <input type="checkbox"/>
b.						<input type="checkbox"/>
c.						<input type="checkbox"/>
d.						<input type="checkbox"/>
15. Special Handling Instructions and Additional Information 2-028-02-1406 8PT 462878 TERR 0606 WK 8824						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name			Signature		Mo. Day Year	
* X			X		10/6/88	
17. Transporter 1 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name			Signature		Mo. Day Year	
* X DANIEL DEVRIES			X Daniel Devries		10/11/88	
18. Transporter 2 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name			Signature		Mo. Day Year	
* X JAMES BEEBE			James Beebe			
19. Discrepancy Indication Space #18 * CUSTOMER SIGNED ON WRONG SPACE (SHOULD BE SIGNED AS GENERATOR) #16						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name			Signature		Mo. Day Year	
* IRENE KENNEY			Irene Kenney		06/16/88	

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

NYA 884866-4

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039. Expires 9/30/88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 34827	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.		
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK COR 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NYA 878288-5			
4. Generator's Phone (716) 248-8048				B. Generator's ID			
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD051060408		C. State Transporter's ID NY-LK4594			
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411			
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number NYD980753784		E. State Transporter's ID			
				F. Transporter's Phone ()			
				G. State Facility's ID			
				H. Facility's Phone (716) 226-2411			
GENERATOR	11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
	a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, IGNITABILITY, D001)		001	DM	8.0	P	D001
	b.						
	c.						
	d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above			
a				a <input checked="" type="checkbox"/> R <input type="checkbox"/>			
b				b <input type="checkbox"/> c <input type="checkbox"/>			
c				c <input type="checkbox"/> d <input type="checkbox"/>			
d				d <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information							
2-028-02-1406 8PT 834829 TERR 0606 WK 8816							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name X JAMES BEEBE		Signature James Beebe		Mo. Day Year 04 20 88			
Printed/Typed Name X DANIEL DEVRIES		Signature Daniel Devries		Mo. Day Year 04 20 88			
Printed/Typed Name		Signature		Mo. Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name IRENE KENNEY		Signature Irene Kenney		Mo. Day Year 04 20 88			

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (516) 457-7362.

NYA 878288-5

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039 Expires 9-30-88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 161713	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK COR 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NYA 874861-7		
4. Generator's Phone (716) 248-8048				B. Generator's ID MK		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number TLD051060081		C. State Transporter's ID NY-8-2572		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414				10. US EPA ID Number NYD980753784		E. State Transporter's ID
				F. Transporter's Phone ()		G. State Facility's ID
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, IGNITABILITY, D001)			No. 1	Type DM	80	P D001
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a.				a. <input checked="" type="checkbox"/> R		
b.				b. <input type="checkbox"/>		
b.				c. <input type="checkbox"/>		
b.				d. <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 2-028-02-1406 SPT 512718 TERR 0606 WK 8812						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Jim Beebe		Signature <i>Jim Beebe</i>		Mo. Day Year * 03/21/88		
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name JOHN SANDS		Signature <i>John R Sands</i>		Mo. Day Year 03/21/88		
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space *16 date block not filled in on copies 6, 7 & 8						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 03/21/88		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

NYA 874861-7

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039 Expires 9-30-88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981B77020	Manifest Document No. 10217117	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address RUBEN CLARK-STONE PACH CORP 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NYA 871144-7	
4. Generator's Phone (716) 248-8048				B. Generator's ID	
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP		6. US EPA ID Number ILD051060408		C. State Transporter's ID NY 19346M	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number NYD980753784		E. State Transporter's ID	
				F. Transporter's Phone ()	
				G. State Facility's ID	
				H. Facility's Phone (716) 226-2411	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, IGNITABILITY, D001)			No. Type		1. Waste No.
			001 DM	80 P	D001
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a			a <input checked="" type="checkbox"/> c <input type="checkbox"/>		
b			b <input type="checkbox"/> d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 2-028-02-1406 BPT 202711 TERR 0606 WK 8808					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name X DAVID W. BUSKE		Signature X David W. Buske		Mo. Day Year 02 12 488	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name X DANIEL DEVRIES		Signature X Daniel Devries		Mo. Day Year 10 21 488	
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name IRENE KENNEY					
		Signature Irene Kenney		Mo. Day Year 02 21 488	

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7352.

NYA 871144-7

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2950-0039. Expires 9-30-88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYP9B1877020	Manifest No. 193771	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.		
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK COR 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NYA 865827-9			
4. Generator's Phone (716 248-8048				B. Generator's ID			
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILDQ51060AQB		C. State Transporter's ID NY124594			
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716226-2411			
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number NYD980753784		E. State Transporter's ID			
				F. Transporter's Phone ()			
				G. State Facility's ID			
				H. Facility's Phone (716226-2411			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers	
						No. Type	
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, IGNITABILITY, D001)						13. Total Quantity 001 DM 000.82	
						14. Unit Wt/Vol P	
						15. Waste No. D001	
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above	
a						a	<input checked="" type="checkbox"/>
b						b	<input type="checkbox"/>
c						c	<input type="checkbox"/>
d						d	<input type="checkbox"/>
15. Special Handling Instructions and Additional Information							
2-028-02-1406 BPT 893771 TERR 0606 WK 8804							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name Sonja Gellert				Signature Sonja Gellert		Mo. Day Year 01/29/88	
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Printed/Typed Name BILL LESSORD		Signature Bill Lessord	
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 hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name IRENE KENNEY				Signature Irene Kenney		Mo. Day Year 01/29/88	

In case of emergency or spill immediately call the National Response Center (800) 424-9802 and the N.Y. Department of Transportation (518) 457-7362.

NYA 865827-9

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2709-0033 Expires 9/30/89

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 191427	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address RULPH-CLARK-STONE PACK COR 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NYA 861331-4		
4. Generator's Phone (716) 248-8048				B. Generator's ID		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.			6. US EPA ID Number ILD051060408	C. State Transporter's ID NYDK4594		
7. Transporter 2 (Company Name)			8. US EPA ID Number	D. Transporter's Phone (716) 226-2471		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP 1525 WEST HENRIETTA RD AVON, NY 14414			10. US EPA ID Number NYD980753784	E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, IGNITABILITY, D001)		001 DM	00080	P	D001	
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a.		c.		a.		b.
b.		d.		b.		c.
15. Special Handling Instructions and Additional Information 2-028-02-1406 BPT 591427 TERR 0606 WK 8752						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Debbie Quick		Signature <i>Debbie Quick</i>		Mo. Day Year 01/06/88		
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Bill Lessora		Signature <i>Bill Lessora</i>		Mo. Day Year 01/06/88		
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 01/06/88		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

NYA 861331-4



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2010-0047

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7382.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. N Y D 9 8 1 8 7 7 0 2 0	Manifest Document No. 1	2. Facility's name and address as required by 6 NYCRR 352.1	
3. Generator's Name and Mailing Address Rolph-Clark-Stone Packaging Company 3750 Monroe Avenue - Pittsford, NY 14635		4. Generator's Phone (716) 248-1800		A. State Manifest Document No. NY A741946 5	B. Generator's ID Same
5. Transporter 1 (Company Name) Resource Technology Services, Inc.	6. US EPA ID Number D E D 9 8 1 9 4 6 8 2 5	7. Transporter 2 (Company Name)		C. State Transporter's ID AH 6225 - NY	D. Transporter's Phone (215) 941-6032
9. Designated Facility Name and Site Address Northeast Environmental Services, Inc. Canal Road Wampsville, NY 13163		10. US EPA ID Number N Y D 0 5 7 7 7 0 1 0 9		E. State Transporter's ID	F. Transporter's Phone ()
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol
a. Waste Flammable Liquid, NOS Flammable Liquid UN1993		004 DM		00220	G
b. Waste Flammable Liquid, NOS Flammable Liquid UN1993 (D001)RQ		013 DM		00715	G
c.					
d.					
J. Additional Descriptions for Materials listed Above		K. Handling Codes for Wastes Listed Above			
a Toluene		c		a B	c
b Isopropanol		d		b B	d
15. Special Handling Instructions and Additional Information a) 7519-E-A001 b) 7519-E-A002		e) 7519-E-A008 Waste Glue Non-Hazardous NY HC = L 3 x 55 gal. DM		f) 7519-E-A009 Waste Ink Non-Hazardous NY HC = L 3 x 55 gal. DM	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.		7519-2-88			
Printed/Typed Name PETER ONOFREY		Signature <i>Peter Onofrey</i>		Mo. Day Year 10 4 1 9 8 8	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Allen Snetsinger		Signature <i>Allen Snetsinger</i>		Mo. Day Year 0 4 1 9 8 8	
18. Transporter 2 (Acknowledgement or Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name RALMUND A. GUNDERMANN					
Signature <i>Raimund A. Guderma</i>				Mo. Day Year 10 4 1 9 8 8	

NYA 741946 5



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved: GMB No. 2050-0039. Expires 9-30-88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY 149811877020		Manifest Document No.		2. Page 1 of 1		information in the shaded areas is not required by Federal Law.									
3. Generator's Name and Mailing Address Rolph-Clark-Stone Packaging Company 3750 Monroe Avenue - Pittsford, NY 14635						A. State Manifest Document No. NY A 538154 6											
4. Generator's Phone (716) 248-8113						B. Generator's ID SAME											
5. Transporter 1 (Company Name) Resource Technology Services, Inc.				6. US EPA ID Number DE 984946825		C. State Transporter's ID AH 6225 - NY											
7. Transporter 2 (Company Name)				8. US EPA ID Number		D. Transporter's Phone (215) 687-4592											
9. Designated Facility Name and Site Address Northeast Environmental Services, Inc. Canal Road Wampsville, NY 13163						10. US EPA ID Number NY D Q 5 7 7 0 1 0 9		E. State Transporter's ID									
								F. Transporter's Phone ()									
								G. State Facility's ID									
								H. Facility's Phone (315) 697-3979									
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit (Wt/Vol)		15. Waste No.					
a. Waste Flammable Liquid, NOS Flammable Liquid UN1993						01013 DM		0101165		G		F005					
b. Waste Flammable Liquid, NOS Flammable Liquid UN1993 (D001)RQ						01019 DM		0101495		G		D001					
c. Waste Flammable Liquid, NOS Flammable Liquid UN1993 (D001)RQ						4 01018 DM		220 0101165		G		D001					
d.																	
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above											
a. Toluene						c. Ink						a. <input type="checkbox"/> B		c. <input type="checkbox"/> L			
b. Isopropanol						d.						b. <input type="checkbox"/> B		d. <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information						f) 7519-E-A009						7519-1-88					
a) 7519-E-A001						e) 7519-E-A008											
b) 7519-E-A002						Waste Glue						Non-Hazardous					
c) 7519-E-A005						HC=L - Total Quantity=						HC=L - Total Quantity=					
						6 x 55 gal. drums						4 x 55 gal. drums					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.																	
If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.																	
Printed/Typed Name PETER ONOFREY						Signature <i>Peter Onofrey</i>						Mo. Day Year 0111488					
17. Transporter 1 (Acknowledgement of Receipt of Materials)						Printed/Typed Name ALLEN SAKSING						Signature <i>Allen Saksing</i>		Mo. Day Year 10111488			
18. Transporter 2 (Acknowledgement of Receipt of Materials)						Printed/Typed Name						Signature		Mo. Day Year			
19. Discrepancy Indication Space						Item 12c SHOULD READ 4 DM. Item 13c SHOULD READ 220						Kc = B, L					
Item 4 SHOULD READ (716)-248-1800						Item 15e DRUM QUANTITY SHOULD READ 5 x 55gal DRUMS						GENERATOR WAS NOTIFIED OF THESE CHANGES					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.																	
Printed/Typed Name RAIMUND A. GUNDERMANN						Signature <i>Raimund A. Gundermann</i>						Mo. Day Year 10111488					

In case of emergency or spill immediately call the National Response Center (800) 424-9302 and the N.Y. Department of Transportation (516) 437-7632.

4255 RV-3



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

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

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NY 10981877020		Manifest Document No. 32915		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.					
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK COR 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NYA 668577 3							
4. Generator's Phone (716) 248-8048						B. Generator's ID							
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.				6. US EPA ID Number ILD101018151911		C. State Transporter's ID NY20103-6P							
7. Transporter 2 (Company Name)						D. Transporter's Phone (716) 226-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON NY 14414						8. US EPA ID Number		E. State Transporter's ID					
						10. US EPA ID Number		F. Transporter's Phone ()					
						G. State Facility's ID							
						H. Facility's Phone (716) 226-2411							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA IGNITABILITY D001)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
						001 DM		00080		P		D001	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						K. Handling Codes for Wastes Listed Above							
a						a		R		c		□	
b						b		□		d		□	
15. Special Handling Instructions and Additional Information NY WEEK 20 CUSTOMER 2-028-02-1406 PREPRINT 132915 TERRITORY 02													
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name: Debbie Quick Signature: Debbie Quick Mo. Day Year: 05/21/87													
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name: Bill Lessord Signature: Bill Lessord Mo. Day Year: 05/21/87													
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name: IRENE KENNEY Signature: Irene Kenney Mo. Day Year: 05/21/87													

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

52325RV-3

NYA 668577 3



STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

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

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NY D 9 8 1 8 7 7 0 2	Manifest Document No. 13 55 78	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK CORP 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NYA 666138 3		
4. Generator's Phone (716) 232-6840				B. Generator's ID		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number 1 1 L D 0 0 0 8 0 5 9 1 1		C. State Transporter's ID NY 20103-68		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON NY 14414		10. US EPA ID Number N Y D 9 8 0 7 5 3 7 8 4		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255		01	D, M	2080	P	D001
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a.				R <input type="checkbox"/> c <input type="checkbox"/>		
b.				b <input type="checkbox"/> d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information NY WEEK 16 CUSTOMER 2-028-02-1406 PREPRINT 835578 TERRITORY 02						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Bruce P. Hussar		Signature <i>Bruce P. Hussar</i>		Mo. Day Year 04/23/87		
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Bill Lessord		Signature <i>Bill Lessord</i>		Mo. Day Year 04/23/87		
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name IRENE KENNEY						
Signature <i>Irene Kenney</i>		Mo. Day Year 04/23/87				

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

NYA 666138 3



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-88

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-9302 and the N.Y. Department of Transportation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NYID19181181710121018171612	Manifest Document No. 1	2. Page 1 of 1 Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address Rolph-Clark-Stone Pack Corp. 3759 Monroe Ave., XX Pittsford, N.Y. 14534		6. US EPA ID Number I L D 1 0 1 0 1 8 1 0 1 5 1 9 1 1 1		A. State Manifest Document No. NY A 601005 6	
4. Generator's Phone (716) 248-8048		7. Transporter 1 (Company Name) Safety-Kleen Corp.		B. Generator's ID 3750 Monroe Ave. Pittsford	
5. Transporter 2 (Company Name)		8. US EPA ID Number		C. State Transporter's ID NY 950395	
9. Designated Facility Name and Site Address Safety-Kleen Corp. 1525 W. Henrietta Rd. Avon, N.Y. 14414		10. US EPA ID Number NYID191810171513171814		D. Transporter's Phone (716) 226-2411	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. Waste Petroleum Naphtha Combustible Liquid UN1255		001	DM	00080	P D 0 0 1
b.					
c.					
d.					
J. Additional Descriptions for Materials listed Above		K. Handling Codes for Wastes Listed Above			
a		c		a <input checked="" type="checkbox"/> R <input type="checkbox"/> c <input type="checkbox"/>	
b		d		b <input type="checkbox"/> d <input type="checkbox"/>	
15. Special Handling Instructions and Additional Information Customer #2-028-02-1406 Preprint #687762 Week 8714					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name GEORGE SICHAK		Signature <i>George Sichak</i>		Mo. Day Year 04/10/87	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Mark Burns		Signature <i>Mark Burns</i>		Mo. Day Year 04/10/87	
18. Transporter 2 (Acknowledgement or Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 04/10/87	

601005



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-88

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-9692 and the N.Y. Department of Transportation (516) 457-7382.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. N Y D 9 1 8 1 1 8 1 7 1 0 1 2 1 0		Manifest Document No. 1 2 1 5 1 6 1 8		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.					
3. Generator's Name and Mailing Address Rolph-Clark-Stone Pack. Corp. 3750 Monroe Ave., Pittsford, N.Y. 14534						A. State Manifest Document No. NY A 600994 8							
4. Generator's Phone (716) 248-8048						B. Generator's ID							
5. Transporter 1 (Company Name) Safety-Kleen Corp.						6. US EPA ID Number I L D 1 0 1 0 1 8 1 0 1 5 1 9 1 1 1		C. State Transporter's ID NY 95A365					
7. Transporter 2 (Company Name)						8. US EPA ID Number		D. Transporter's Phone (716) 226-2411					
9. Designated Facility Name and Site Address Safety-Kleen Corp. 1525 W. Henrietta Rd. Avon, N.Y. 14414						10. US EPA ID Number N Y D 9 1 8 1 0 1 7 1 5 1 3 1 7 1 8 1 4		E. State Transporter's ID					
								F. Transporter's Phone ()					
								G. State Facility's ID					
								H. Facility's Phone (716) 226-2411					
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		I. Waste No.	
a. Waste Petroleum Naphtha Combustible Liquid UN1255						001 DM		00080		P		D 0 0 1	
b.													
c.													
d.													
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above							
a						a <input checked="" type="checkbox"/> R c <input type="checkbox"/>							
b						b <input type="checkbox"/> d <input type="checkbox"/>							
15. Special Handling Instructions and Additional Information Customer #2-028-02-1406 Preprint #612568 Week 8713													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name JOHN WIXOM				Signature <i>John Wixom</i>		Mo. Day Year 04 03 87							
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Signature <i>Mark Burns</i>		Mo. Day Year 04 03 87							
Printed/Typed Name MARK BURNS													
18. Transporter 2 (Acknowledgement or Receipt of Materials)				Signature		Mo. Day Year							
Printed/Typed Name													
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name IRENE KENNEY				Signature <i>Irene Kenney</i>		Mo. Day Year 04 03 87							

600994 766009



1406

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY D 9 8 1 8 7 7 0 2 0 8 7 2 6 6		Manifest Document No. 8 7 2 6 6		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.							
3. Generator's Name and Mailing Address Rolph-Clark-Stone Pack. Corp. 3750 Monroe Ave., Pittsford, N.Y. 14534						A. State Manifest Document No. NY A 600989 4									
4. Generator's Phone (716) 248-8113						B. Generator's ID Same									
5. Transporter 1 (Company Name) Safety-Kleen Corp.						C. State Transporter's ID NY 20103-67									
6. US EPA ID Number I L D 0 0 0 8 0 5 9 1 1						D. Transporter's Phone (716) 226-2411									
7. Transporter 2 (Company Name)						E. State Transporter's ID									
8. US EPA ID Number						F. Transporter's Phone ()									
9. Designated Facility Name and Site Address safety-Kleen Corp. 1525 W. Henrietta Rd. Avon, N.Y. 14414						10. US EPA ID Number NY D 9 8 0 7 5 3 7 8 4									
10. US EPA ID Number						G. State Facility's ID									
H. Facility's Phone 716 226-2411															
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. Waste Petroleum Naphtha Combustible Liquid UN1255						001 D, M		00050		P		D 0 0 1			
b.															
c.															
d.															
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above									
a						a <input checked="" type="checkbox"/> R c <input type="checkbox"/>									
b						b <input type="checkbox"/> d <input type="checkbox"/>									
15. Special Handling Instructions and Additional Information															
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name JOHN WIXOM						Signature John Wixom						Mo. Day Year 03 20 87			
17. Transporter 1 (Acknowledgement of Receipt of Materials)						Printed/Typed Name BILL LESSORD						Signature Bill Lessord		Mo. Day Year 03 20 87	
18. Transporter 2 (Acknowledgement of Receipt of Materials)						Printed/Typed Name						Signature		Mo. Day Year	
19. Discrepancy Indication Space															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.															
Printed/Typed Name IRENE KENNEY						Signature Irene Kenney						Mo. Day Year 03 20 87			

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (510) 457-7382.

52325RV-3

600989



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. N Y D 19 8 1 1 8 1 7 1 0 2 1 0 1 8 1 7 1 2 3 1 4	Manifest Document No. 1	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address Rolph-Clark-Stone Pack. Corp. 3750 Monroe Avenue, Rochester, N.Y. 14534				A. State Manifest Document No. NY A 600987 6		
4. Generator's Phone (716) 248-8113				B. Generator's ID Same		
5. Transporter 1 (Company Name) Safety-Kleen Corp.		6. US EPA ID Number I L D 0 1 0 0 8 1 0 5 1 9 1 1 1		C. State Transporter's ID NY20103GP		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address Safety-Kleen Corp. 1525 W. Henrietta Rd. Avon, N.Y. 14414		10. US EPA ID Number N Y D 19 8 1 0 7 1 5 1 3 7 1 8 1 4		E. State Transporter's ID		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol
a. Waste Petroleum Naphtha Combustible Liquid UN1255		001 D M		00080		P
b.						
c.						
d.						
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above		
a				a <input checked="" type="checkbox"/> R <input type="checkbox"/> c <input type="checkbox"/>		
b				b <input type="checkbox"/> d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Martin G. Reeners		Signature Martin G. Reeners		Mo. Day Year 03/13/87		
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Printed/Typed Name William Lessord		Signature William Lessord		Mo. Day Year 03/13/87
18. Transporter 2 (Acknowledgement or Receipt of Materials)		Printed/Typed Name		Signature		Mo. Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name IRENE KENNEY		Signature Irene Kenney		Mo. Day Year 03/13/87		

In case of emergency or spill immediately call the National Response Center (800) 424-9602 and the N.Y. Department of Transportation (518) 457-7982.

52325RV-3

600987



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-88

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. N Y D 9 8 1 1 8 1 7 7 0 2 1 0		Manifest Document No. 6 4 1 6 1 9		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.							
3. Generator's Name and Mailing Address Rolph-Clark-Stone Pack Corp. 3750 Monroe Ave., Pittsford, N.Y. 14534						A. State Manifest Document No. NY A 581691 6									
4. Generator's Phone (716) 248-8048						B. Generator's ID									
5. Transporter 1 (Company Name) Safety-Kleen Corp.			6. US EPA ID Number I L D 0 0 0 8 0 5 1 9 1 1			C. State Transporter's ID NY 9509365									
7. Transporter 2 (Company Name)						D. Transporter's Phone (716) 226-2411									
9. Designated Facility Name and Site Address Safety-Kleen Corp. 1525 W. Henrietta Rd. Avon, N.Y. 14414						E. State Transporter's ID									
10. US EPA ID Number N Y D 9 8 1 0 7 1 5 3 7 8 4						F. Transporter's Phone ()									
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. Waste Petroleum Naphtha Combustible Liquid UN1255						No. Type		Quantity		Unit Wt/Vol		Waste No.			
						001 D M		00080		P		D 0 0 1			
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above									
a						a <input checked="" type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/>									
b						b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/>									
15. Special Handling Instructions and Additional Information Customer #2-028-02-1406 Preprint #764169 Week 8715						*Ka. R									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name Debbie Quick				Signature Debbie Quick				Mo. Day Year 04/15/87							
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Printed/Typed Name Mark Burns				Signature Mark Burns				Mo. Day Year 04/15/87			
18. Transporter 2 (Acknowledgement or Receipt of Materials)				Printed/Typed Name				Signature				Mo. Day Year			
19. Discrepancy Indication Space															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.															
Printed/Typed Name IRENE KENNEY				Signature Irene Kenney				Mo. Day Year 04/15/87							

NY A 581691



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. N Y D 9 8 1 8 7 7 0 2 0 B		Manifest Document No. 12 1 12 4		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.					
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK COR 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document No. NY A 548431 2							
4. Generator's Phone (716) 248-8048						B. Generator's ID							
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.				6. US EPA ID Number I L D 0 0 0 8 0 5 9 1 1		C. State Transporter's ID NY 716-226-2411							
7. Transporter 2 (Company Name)				8. US EPA ID Number		D. Transporter's Phone ()							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON NY 14414				10. US EPA ID Number N Y D 9 8 0 7 5 3 7 8 4		E. State Transporter's ID							
						F. Transporter's Phone ()							
						G. State Facility's ID							
						H. Facility's Phone (716) 226-2411							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA IGNITABILITY D001)						No. Type 001 D		00080		P		D001	
b.													
c.													
d.													
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above							
a						a <input checked="" type="checkbox"/> c <input type="checkbox"/>							
b						b <input type="checkbox"/> d <input type="checkbox"/>							
15. Special Handling Instructions and Additional Information NY WEEK 24 CUSTOMER 2-028-02-1406 PREPRINT 432124 TERRITORY 02													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name Deborah Quick						Signature <i>Deborah Quick</i>				Mo. Day Year 06 23 87			
17. Transporter 1 (Acknowledgement of Receipt of Materials)						Signature <i>Bill Lessard</i>				Mo. Day Year 06 23 87			
Printed/Typed Name Bill Lessard						Signature <i>Bill Lessard</i>				Mo. Day Year 06 23 87			
18. Transporter 2 (Acknowledgement or Receipt of Materials)						Signature				Mo. Day Year			
Printed/Typed Name						Signature				Mo. Day Year			
19. Discrepancy Indication Space * date is 06-23-87													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name IRENE KENNEY						Signature <i>Irene Kenney</i>				Mo. Day Year 06 23 87			

In case of emergency or spill immediately call the National Response Center (800) 424-9302 and the N.Y. Department of Transportation (518) 457-7362.

NY A 548431



STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

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

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 4163/179	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK CDR 3750 MONROE AVE PITTSFORD NY 14534		6. US EPA ID Number ILD051060408		A. State Manifest Document Number NYA 676254-3	
4. Generator's Phone 716 248-8048		7. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		B. Generator's ID	
5. Transporter 2 (Company Name)		8. US EPA ID Number		C. State Transporter's ID NY-1K4574	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number NYD980753784		D. Transporter's Phone 716-226-2111	
				E. State Transporter's ID	
				F. Transporter's Phone ()	
				G. State Facility's ID	
				H. Facility's Phone (716)226-2411	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	13. Total Quantity	14. Unit W/Vol	I. Waste No.
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, IGNITABILITY, D001)		001	DM	0080	P D001
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
a		a <input checked="" type="checkbox"/> c <input type="checkbox"/>			
b		b <input type="checkbox"/> d <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information 2-028-02-1406 8PT 346379 TERR 0606 WK 8736					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Signature		Mo. Day Year	
Deborah Quick		<i>Deborah Quick</i>		09/17/87	
18. Transporter 2 (Acknowledgement of Receipt of Materials)		Signature		Mo. Day Year	
BILL LESSORD		<i>Bill Lessord</i>		09/17/87	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.					
Printed/Typed Name		Signature		Mo. Day Year	
IRENE KENNEY		<i>Irene Kenney</i>		09/17/87	

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

GENERATOR

TRANSPORTER

FACILITY

NYA 676254-3



STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820 Albany, New York 12212

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

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981B77020	Manifest Document No. 38854	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK CORP 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NYA 675786 3	
4. Generator's Phone (714 248-8048)				B. Generator's ID	
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		a. US EPA ID Number ILD000805911		C. State Transporter's ID NYA0103-6P	
7. Transporter 2 (Company Name)		b. US EPA ID Number		D. Transporter's Phone (716226-2411)	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414				E. State Transporter's ID	
10. US EPA ID Number NYD980753784				F. Transporter's Phone ()	
				G. State Facility's ID	
				H. Facility's Phone (716226-2411)	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, IGNITABILITY, D001)			No. 001	Type DM	0080
b.					P D001
c.					
d.					
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a.			a. <input checked="" type="checkbox"/> R		
b.			b. <input type="checkbox"/>		
c.			c. <input type="checkbox"/>		
d.			d. <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 2-028-02-1406 SPT 038854 TERR 0606 WK 8732					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name Deborah Quick		Signature <i>Deborah Quick</i>		Mo. Day Year 08/17/87	
17. Transporter 1 (Acknowledgement of Receipt of Materials)					
Printed/Typed Name BILL LESSORI		Signature <i>Bill Lessori</i>		Mo. Day Year 08/17/87	
18. Transporter 2 (Acknowledgement of Receipt of Materials)					
Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space NOB 50 10 22 11 91					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.					
Printed/Typed Name TRENE KENNEY		Signature <i>Trene Kenney</i>		Mo. Day Year 08/17/87	

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (516) 457-7362.

NYA 675786 3



STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12620, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-85

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981277020	Manifest Document No. B 76874	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK CORP 3750 MONROE AVE PITTSFORD NY 14534		4. Generator's Phone (716) 248-8045		A. State Manifest Document Number NYA 673385 5		B. Generator's ID
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD000805911		C. State Transporter's ID NY 20103-6P		D. Transporter's Phone 716226-2411
7. Transporter 2 (Company Name)		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone ()
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number NYD980753784		G. State Facility's ID		H. Facility's Phone 716226-2411
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers	13. Total Quantity	14. Unit	1. Waste No.	
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255		001 DM	00080	F	D001	
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
a		a <input checked="" type="checkbox"/> c <input type="checkbox"/>				
b		b <input type="checkbox"/> d <input type="checkbox"/>				
15. Special Handling Instructions and Additional Information 2-028-02-1406 BPT 734684 TERR 0202 WK 8728						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Deborah Quick		Signature Deborah Quick		Mo. Day Year 07 23 87		
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Signature Bill Lessard		Mo. Day Year 07 23 87		
18. Transporter 2 (Acknowledgement of Receipt of Materials)		Signature		Mo. Day Year		
19. Discrepancy Indication Space *Additional info added to 11a pursuant to Code of Fed. Regs. 49CFR, Trans. Haz. Mat. (Waste) updated 2/17/87						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name Irene Kenney		Signature Irene Kenney		Mo. Day Year 07 12 31 87		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

NYA 673385 5



STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-89

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 17281210	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PAPER CORP 3750 MONROE AVE PITTSFORD NY 14534			A. State Manifest Document Number NYA 689056-7		
4. Generator's Phone (716) 248-2048			B. Generator's ID		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		8. US EPA ID Number ILL051060408		C. State Transporter's ID NY956965	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number NYD980753784		E. State Transporter's ID	
				F. Transporter's Phone ()	
				G. State Facility's ID	
				H. Facility's Phone (716) 226-2411	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	13. Total Quantity	14. Unit (Wt/Vol)	1. Waste No.
a. WASTE PETROLEUM NAPHTHA. COMBUSTIBLE LIQUID, UN1255 (EPA, IGNITABILITY, D001)		001 DM	00080	P	D001
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a			a <input checked="" type="checkbox"/> R <input type="checkbox"/>		
b			b <input type="checkbox"/> <input type="checkbox"/>		
c			c <input type="checkbox"/>		
d			d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 2-028-02-1406 8PT 372850 TERR 0606 WK 8748					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name JAMES BEEBE		Signature James Beebe		Mo. Day Year 11/20/87	
17. Transporter 1 (Acknowledgement of Receipt of Materials)					
Printed/Typed Name FRANKLYN A. BROOKS JR.		Signature Franklyn A. Brooks Jr.		Mo. Day Year 11/20/87	
18. Transporter 2 (Acknowledgement of Receipt of Materials)					
Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.					
Printed/Typed Name IRENE KENNEY		Signature Irene Kenney		Mo. Day Year 12/03/87	

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (516) 457-7362.

NYA 689056-7



STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

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

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981B77020	Manifest Document No. 1638611	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK COR 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NYA 685607-5		
4. Generator's Phone (716) 248-8048				B. Generator's ID		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD051060408		C. State Transporter's ID NYLK4594		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number NYD980753784		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, IGNITABILITY, D001)		001 DM		0008	P	D001
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a		c		a <input checked="" type="checkbox"/>		c <input type="checkbox"/>
b		d		b <input type="checkbox"/>		d <input type="checkbox"/>
15. Special Handling Instructions and Additional Information 2-028-02-1406 BPT 963666 TERR 0606 WK 8744						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Signature		Mo. Day Year		
Deborah Quick		Deborah Quick		11/05/87		
18. Transporter 2 (Acknowledgement of Receipt of Materials)		Signature		Mo. Day Year		
Bill Lessor		Bill Lessor		11/05/87		
19. Discrepancy Indication Space						
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name		Signature		Mo. Day Year		
IRENE KENNEY		Irene Kenney		11/05/87		

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

NYA 685607-5



STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

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

Please print or type.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7352.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020		Manifest Document No. 614344		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.							
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK CORP 3750 MONROE AVE PITTSFORD NY 14534						A. State Manifest Document Number NYA 681069-3									
4. Generator's Phone 716 248-8048						B. Generator's ID									
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.			6. US EPA ID Number ILD051060408			C. State Transporter's ID NYL2899									
7. Transporter 2 (Company Name)						D. Transporter's Phone 716226-2411									
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414						E. State Transporter's ID									
10. US EPA ID Number NYD980753784						F. Transporter's Phone ()									
						G. State Facility's ID									
						H. Facility's Phone 716226-2411									
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.			
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, IGNITABILITY, D001)						No. 201		Type DM		Quantity 20080		Unit P		Waste No. D001	
b.															
c.															
d.															
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above									
a.						b. <input checked="" type="checkbox"/>		c. <input type="checkbox"/>		d. <input type="checkbox"/>					
b.						c. <input type="checkbox"/>		d. <input type="checkbox"/>							
15. Special Handling Instructions and Additional Information 2-028-02-1406 8PT 654344 TERR 0606 WK 8740															
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.															
17. Transporter 1 (Acknowledgement of Receipt of Materials)						18. Transporter 2 (Acknowledgement of Receipt of Materials)				Signature					
Printed/Typed Name JIM CUSIMANO						Printed/Typed Name BILL LESSORD				Signature <i>James R. Cusimano</i>					
										Mo. Day Year 100687					
19. Discrepancy Indication Space										Mo. Day Year 100687					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.															
Printed/Typed Name IRENE KENNEY						Signature <i>Irene Kenney</i>				Mo. Day Year 100687					

NYA 681069-3



2-028-02

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-91

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 01852	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.		
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 134582-5			
4. Generator's Phone 716 248-1800				B. Generator's ID SAME			
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter's ID SW NYP661820			
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone 716 226-2411			
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414				10. US EPA ID Number NYD 980753784		E. State Transporter's ID	
						F. Transporter's Phone ()	
						G. State Facility's ID	
						H. Facility's Phone 716 226-2411	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)		12. Containers No. 1	Type DM	13. Total Quantity 86	14. Unit Wt/Vol P	I. Waste No. D001 D039	
15. Additional Descriptions for Materials Listed Above I (A) D018		K. Handling Codes for Wastes Listed Above		<input checked="" type="checkbox"/> R <input type="checkbox"/>			
				<input type="checkbox"/> a <input type="checkbox"/> c <input type="checkbox"/>			
				<input type="checkbox"/> b <input type="checkbox"/> d <input type="checkbox"/>			
16. Special Handling Instructions and Additional Information 9148 33466947 301852 2-028-02-1406 05 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 501 B: C: D:							
18. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. <small>If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically achievable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. If I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is economically and technically feasible.</small>							
Printed/Typed Name Marshall Brooks		Signature <i>Marshall Brooks</i>		Mo. Day Year 11/20/91			
Printed/Typed Name Scott Hulburt		Signature <i>Scott Hulburt</i>		Mo. Day Year 11/20/91			
Printed/Typed Name		Signature		Mo. Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 11/20/91			

In case of an emergency call the National Response Center (206) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NYC 134582-5



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0038, Expires 9-30-91

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 92234	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.		
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NYC 124052-5			
4. Generator's Phone (716) 248-1800				B. Generator's ID SAME			
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NY015250			
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411			
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414				10. US EPA ID Number NYD 980753784			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001) (ERG #27)				12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
				1	86	P	D001 D039
16. Additional Descriptions for Materials Listed Above I (A) DQ18				K. Handling Codes for Wastes Listed Above			
				a <input checked="" type="checkbox"/> b <input type="checkbox"/> c <input type="checkbox"/> d <input type="checkbox"/>			
15. Special Handling Instructions and Additional Information 9140 31450125 592234 2-028-02-1406 05 EMERGENCY RESP#1-708-888-4660 24HR SKDDT# A: 501 B: C: D:							
18. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Or, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name Marshall Brooks		Signature <i>Marshall Brooks</i>		Mo. Day Year 10 04 91			
Printed/Typed Name Scott Halbur		Signature <i>Scott C Halbur</i>		Mo. Day Year 10 04 91			
Printed/Typed Name		Signature		Mo. Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 10 04 91			

NYC 124052-5



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-91

Please print or type.

In case of emergency or spill in immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 88466		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392						A. State Manifest Document Number NY C 111807-9			
4. Generator's Phone (716) 248-1800						B. Generator's ID SAME			
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		C. State Transporter's ID NYNPS727			
7. Transporter 2 (Company Name)				8. US EPA ID Number		D. Transporter's Phone (716) 226-2411			
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414						10. US EPA ID Number 2-028-02 NYD 980753784		E. State Transporter's ID	
								F. Transporter's Phone ()	
								G. State Facility's ID	
								H. Facility's Phone 716) 226-2411	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)		No. 1 Type DM		86		P		D001 D039	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above I(A) D01B						K. Handling Codes for Wastes Listed Above			
a		b		c		d		e	
						<input checked="" type="checkbox"/>		<input type="checkbox"/>	
b		c		d		e		f	
						<input type="checkbox"/>		<input type="checkbox"/>	
15. Special Handling Instructions and Additional Information 9132 29618105 888466 2-028-02-1406 05 EMERGENCY RESP#1-708-888-4660 24HR SKDOT# A: 501 B: C: D:									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name Table Arcinas				Signature <i>Table Arcinas</i>		Mo. Day Year 080791			
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Scott Halburt				Signature <i>Scott Halburt</i>		Mo. Day Year 080791			
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name				Signature		Mo. Day Year			
19. Discrepancy indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name IRENE KENNEY									
				Signature <i>Irene Kenney</i>		Mo. Day Year 080791			

NY C 111807-9



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2070-0230, Expires 9-30-91

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 86329	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392		4. Generator's Phone (Area Code) Phone No. 716 248-1800	5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.	6. US EPA ID Number ILD 051060408	7. State Manifest Document Number NYC 101739-3
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number 2-028-02	11. US DOT Description (including Proper Shipping Name, Hazard Class and ID Number) WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001) (ERG #27)	12. Containers No. Type 1 DM	13. Total Quantity 86
15. Special Handling instructions and Additional Information EMERGENCY RESP#1-708-888-4660 24HR		16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this shipment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have adopted the materials listed on treatment, storage, or disposal currently available to me which minimize the present and future risks to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.		14. Unit (Wt/Vol) P	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name: Scott Hulbert Signature: <i>Scott C Hulbert</i> Mo. Day Year: 06 12 91		18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name: _____ Signature: _____ Mo. Day Year: _____		19. Discrepancy Indication Space	
18. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 11) Printed/Typed Name: Tina L. Love Signature: <i>Tina L. Love</i> Mo. Day Year: 06 12 91		19. Discrepancy Indication Space		20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 11)	

In case of emergency or spill, immediately call the National Response Center (800) 424-9802 and the N.Y. Department of Environmental Conservation (516) 457-7362.

GENERATOR

TRANSPORTER

OWNER/OPERATOR

NYC 101739-3



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2150-0039, Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 94377	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Full Street Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD 716 248-1800 NY 14534-1392				A. State Manifest Document Number NYC 089480-2		
4. Generator's Phone		6. US EPA ID Number ILD 051060408		B. Generator's ID SAME		
5. Transporter's (Company Name) SAFETY-KLEEN CORP.		8. US EPA ID Number		C. State Transporter's ID NYGJ5250		
7. Transporter's Full Street Address		10. US EPA ID Number 2-028-02		D. Transporter's Phone 716 226-2411		
9. Transporter's Phone		11. Facility's Name and Full Street Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		E. State Facility's ID		
13. Facility's Phone 716 226-2411		10. US EPA ID Number NYD 980753784		F. Facility's Phone ()		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total		14. Unit
WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)		No. Type		Quantity		Wt/Vol
		1 1 DM		86		P
15. Additional Descriptions for Materials Listed Above I(A) D018		K. Handling Codes for Wastes Listed Above				
		R <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
16. Special Handling Instructions and Additional Information EMERGENCY RESP#1-708-888-4660 24HR		9116 25957192 494377 2-028-02-1406 03				
		SKDOT# A: 501 B: C: D:				
18. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, labeled and coded in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the most protective method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. If I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that is safe.						
17. Transporter's Acknowledgment of Receipt of Materials		Signature Steve Fujita		Mo. Day Year 04 18 91		
19. Transporter's Acknowledgment of Receipt of Materials		Signature Scott C. Hulbert		Mo. Day Year 04 18 91		
19. Discrepancy/Correction Space						
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19						
Printed/Typed Name IRENE KENNEY		Signature Irene Kenney		Mo. Day Year 04 18 91		

In case of emergency call the National Response Center (800) 424-9302 and the N.Y. Department of Environmental Conservation (516) 457-7362.

NYC 089480-2



2-028-02

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039 Expires 9-30-91

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 01278	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392		4. Generator's Phone () 716 248-1800		A. State Manifest Document Number NYC 075214-1		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 05106040B		B. Generator's ID SAME		
7. Transporter 2 (Company Name)		8. US EPA ID Number		C. State Transporter's ID NY-16673		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number NYD 980753784		D. Transporter's Phone () 716 226-2411		
				E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone 716 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)		12. Containers No. 1	Type DM	13. Total Quantity 86	14. Unit P	15. Waste No. D001 D039
16. Additional Descriptions for Materials Listed Above I (A) D018		17. Handling Codes for Wastes Listed Above <input checked="" type="checkbox"/> R <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				
18. Special Handling Instructions and Additional Information EMERGENCY RESP#1-708-888-4660		19. SKDOT# A: 501 B: C: D:				
19. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. If I am a small quantity generator, I have made a good faith effort to minimize my waste generation and used the best waste management method that is practical to prevent the release of waste.						
20. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name RL MAC		Signature <i>RL Mac</i>		Mo. Day Year 02 22 91		
21. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year		
20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name IRENE KENNEY						
		Signature <i>Irene Kenney</i>		Mo. Day Year 02 22 91		

In case of emergency, call the National Response Center (800) 424-9302 and the N.Y. Department of Environmental Conservation, (518) 457-2312

NYC 075214-1



2-028-02

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

Form Approved, OMB No. 2050-0039, Expires 9-30-94

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 1981877020	Manifest Document No. 8261817	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NJA 1336699	
4. Generator's Phone (716 248-1800)				B. State Generator's ID SAME	
5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Trans. ID NY GJ5250	
7. Transporter 2 Company Name HAZMAT ENVIRONMENTAL GROUP		8. US EPA ID Number NYD980769947		D. Transporter's Phone (716 226-2411)	
9. Registered Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN STREET LINDEN, NJ 07036				E. State Trans. ID NSXPS 0600	
10. US EPA ID Number 0-006-35				F. Transporter's Phone (716 827200)	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM				G. State Facility's ID	
12. Containers				H. Facility's Phone (908 862-2000)	
13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
No.		Type			
a		b		c	
X		RO WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (DOO1) (ERG#26)		002 D M 01030 P D 0 0 1	
b		X		RO WASTE INK COMBUSTIBLE LIQUID UN1210 (DOO1) (ERG#26)	
				002 D M 01040 P D 0 0 1	
c		X		RO WASTE COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA1993 (FOO5) (ERG#27)	
				003 D M 01200 P F 0 0 5	
d		X		RO WASTE COMPOUND CLEANING LIQUID COMBUSTIBLE LIQUID NA1993 (DOO1) (ERG#27)	
				001 D M 00500 P D 0 0 1	
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Materials Listed Above	
a.				a. Total Blend	
b.				b. Total Blend	
c.				c. Total Blend	
d.				d. Total Blend	
15. Special Handling, Instructions and Additional Information					
11a) CONTROL#0058943-1 11c) CONTROL#0058860-6 11d) CONTROL#0058858-1					
11b) NY HANDLING CODE = B #9039 0000 31668049 0C0000 2-028-02-1406 682687					
EMERGENCY RESP#708-888-4660 24HR KC) NY HANDLING CODE=B Kd) NY HANDLING CODE = B					
11j) CONTROL#0058865-5 SKDOT# A: B: C: D:					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.					
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name Marshall Brooks		Signature <i>Marshall Brooks</i>		Month Day Year 10/16/91	
Printed/Typed Name Scott Hulbert		Signature <i>Scott Hulbert</i>		Month Day Year 10/16/91	
Printed/Typed Name JERRY WHITE		Signature <i>Jerry White</i>		Month Day Year 10/21/91	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name HARRY DUNBAR		Signature <i>Harry Dunbar</i>		Month Day Year 10/22/91	

In case of an emergency or spill, immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA 1336699



**State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625**

2-028-02

Form Approved OMB No. 2030-0039 Expires 9-30-94

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 951877020	Manifest Document No. 1922113	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NJA 1326028		
4. Generator's Phone (716 248-1800)				B. State Generator's ID		
5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter ID NYGJ5250 NY 6J5250		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (716 226-2411)		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN STREET LINDEN, NJ 07036				E. State Transporter ID		
10. US EPA ID Number 0-006-35				F. Transporter's Phone ()		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				G. State Facility's ID NONE		
12. Containers				H. Facility's Phone (908 862-2000)		
a. X (R) WASTE INK COMBUSTIBLE LIQUID UN1210 (DOO1) (ERG#26)		12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.	
		002	0/1000	P	D O O 1	
b. X (R) WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (DOO1) (ERG#26)		002	0/1000	P	D O O 1	
c.						
d.						
15. Special Handling Instructions and Additional Information				K. Handling Codes for Wastes Listed Above		
11a) CONTROL#0058865-5 0000 33441895 000000 2-028-02-1406 392213 SAMPLE#100069 11b) CONTROL#0058943-1 SAMPLE#100065 EMERGENCY RESP#708-888-4660 24HR Kb) NY HANDLING CODE = B Ka) NY HANDLING CODE = B SKDOT# A: 1097 B: 1106 C: D:				a. D b. D c. d.		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 34599936						
Printed/Typed Name STEVE FRIGA		Signature <i>Steve Friga</i>		Month Day Year 11/20/91		
Printed/Typed Name Scott Hulbert		Signature <i>Scott C Hulbert</i>		Month Day Year 11/20/91		
Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space						
Printed/Typed Name Darlene Greer		Signature <i>Darlene Greer</i>		Month Day Year 12/09/91		

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA 1326028



2-028-02

State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section
 CN 028, Trenton, NJ 08625

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

Form Approved, OMB No. 2050-0039, Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 316131612		2. Page 1 of 1 Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NJA 1225975			
4. Generator's Phone (716) 248-1800				B. State Generator's ID SAME			
5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 05106040B		C. State Trans. ID NY 6J 5230			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411			
9. Transporter 1 Name and Address SAFETY-KLEEN CORP 1200 SYLVAN STREET LINDEN, NJ 07036		10. US EPA ID Number NJD 002182897		E. State Trans. ID			
				F. Transporter's Phone ()			
				G. State Facility's ID			
				H. Facility's Phone (908) 862-2000			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers	
HM						No. Type	
a. 24 5H HAZARDOUS COMBUSTIBLE LIQUID UN1193 (DOO1) (REG 26) 5H						5H 5H 5H 5H 5H	
b. 002 01040 0001						002 01040 0001	
c. 001 00515 0001						001 00515 0001	
d.							
13. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above	
						5H TOY JH Gendens	
15. Special Handling Instructions and Additional Information (a) NY HANDLING CODE = B (b) NY HANDLING CODE = B EMERGENCY RESP#708-888-4660 24HR(11c) CONTROL#0058943-1 (c) CONTROL#0058943-1 11(d) CONTROL#0058365-5 SKDOT# A: 1097 B: 1097 C: 1106 D:							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects fit for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name STEVE FRIGA				Signature <i>Steve Friga</i>		Month Day Year 11/06/91	
17. Transporter 1 Acknowledgment of Receipt of Materials				Signature <i>Scott Hulbert</i>		Month Day Year 11/06/91	
18. Transporter 2 Acknowledgment of Receipt of Materials				Signature		Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.				Signature <i>Marguerite Corio</i>		Month Day Year 11/11/91	

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA 1225975



2-02B-02

State of New Jersey Department of Environmental Protection Division of Hazardous Waste Management Manifest Section

CN 02B, Trenton, NJ 08625

Form Approved, OMB No. 2050-0039, Expires 9-30-91

Please type or print in block letters. (Form designed for use on 12-inch typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 218171217	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NJA 1224003	
4. Generator's Phone (716) 248-1800				B. State Generator's ID SAME	
5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Trans. ID NY GJS250	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411	
9. Transporter 1 Facility Name and Address SAFETY-KLEEN CORP. 1200 SYLVAN STREET LINDEN, NJ 07036		10. US EPA ID Number O-006-35 NJD 002182897		E. State Trans. ID	
				F. Transporter's Phone ()	
				G. State Facility's ID	
				H. Facility's Phone (908) 862-2000	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM		12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.
a. X RO WASTE COMPOUND CLEANING LIQUID COMBUSTIBLE LIQUID NA1993 (D001) (ERG#27)		007 D M	03500	P	D O O 1
b. X RO WASTE INK COMBUSTIBLE LIQUID UN1219 (D001) (ERG#25)		003 D M	01650	P	D O O 1
c.					
d.					
16. Additional Descriptions for Materials Listed Above		17. Handling Codes for Wastes Listed Above			
a.		b. <i>TOX</i>			
c.		c. <i>HAZ</i>			
d.		d. <i>FLAM</i>			
15. Special Handling Instructions and Additional Information					
11a) CONTROL#0058853-1		0000 00000000 000000 2-02B-02-1406		328727	
11b) CONTROL#0058855-5		SKDDT# A: 1147 B: 1097 C: 31500232		D:	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name STEVE FRIGA JR		Signature <i>Steve Friga</i>		Month Day Year 09/12/91	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Scott Hulburt		Signature <i>Scott Hulburt</i>		Month Day Year 08/13/91	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Darlene Grier					
		Signature <i>Darlene Grier</i>		Month Day Year 07/16/91	

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA 1224003



2-028-02

State of New Jersey Department of Environmental Protection Division of Hazardous Waste Management Manifest Section CN 028, Trenton, NJ 08625

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

Form Approved, OMB No. 2050-0039, Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 978749	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NJA 1219182	
4. Generator's Phone () 716 248-1800				B. State Generator's ID SAME	
5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Trans. ID NY 615250	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone () 716 228-2411	
9. Transporter 1 Facility Name and Address SAFETY-KLEEN CORP. 1200 SYLVAN ST LINDEN NJ 07036		10. US EPA ID Number 0-006-35		E. State Trans. ID	
		10. US EPA ID Number NJD 002182897		F. Transporter's Phone () 2009C1	
				G. State Facility's ID	
				H. Facility's Phone () 908 862-2000	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) HM		12. Containers No.	13. Total Quantity	14. Unit W/Vol	1. Waste No.
a. X RQ WASTE COMPOUND CLEANING LIQUID COMBUSTIBLE LIQUID NA1993 (D001) (ERG#27)		004	02026	P	D 0 0 1
b. X RQ WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG#26)		002	01040	P	D 0 0 1
c. X RQ WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (D001) (ERG#26)		002	01031	P	D 0 0 1
d.					
j. Additional Descriptions for Materials Listed Above		k. Handling Codes for Wastes Listed Above To Y B Handling			
a.		c.			
b.		d.			
h.		To Y B Handling			
11a. Special Handling Instructions and Additional Information CONTROL# 0058855-1 9133 29905353 978749 2-028-02-1406 05 EMERG RESP# 708-888-4660 24HR CONTROL# 0058855-5 SKDOT# A: B: C: D: NY HANDLING CODE = B NY HANDLING CODE = 3					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 30622 518					
Printed/Typed Name STEVE FRIGA		Signature <i>Steve Friga</i>		Month Day Year 08/15/91	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name DAN SHEEMAN		Signature <i>Dan Sheeman</i>		Month Day Year 08/15/91	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Darlene Crier		Signature <i>Darlene Crier</i>		Month Day Year 08/19/91	

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA 1219182



2-028-02

State of New Jersey Department of Environmental Protection Division of Hazardous Waste Management - Manifest Section CN 028, Trenton, NJ 08625

Form Approved. OMB No. 2050-0039. Expires 9-30-91

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

UNIFORM HAZARDOUS WASTE MANIFEST. Includes fields for Generator's Name (SOMERVILLE PACKAGING), Transporter (SAFETY-KLEEN CORP.), Facility Name (SAFETY-KLEEN CORP.), and waste descriptions (e.g., RO WASTE COMPOUND CLEANING LIQUID). Includes signature lines for Steve Friska and Scott Halburn.

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection, (609) 292-5560 (Day), (609) 292-7172 (Night)

NJA 1143898



State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
PO Box 028, Trenton, NJ 08625

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

Form Approved, OMB No. 2050-0039. Expires 9-30-91

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NJDP98187702087037	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3720 MONROE AVE, PITTSFORD NY 14534			A. State Manifest Document Number NJA 1142805		
4. Generator's Phone (716) 248-1800			B. State Generator's ID SAME		
5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number ILD051060408		C. State Trans. ID NY GJ5250	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 716 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 0-006-35 1200 SYLVAN ST LUDEN NY 07036			10. US EPA ID Number NJD0021182817		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM			12. Containers No.	13. Total Quantity	14. Unit W/Vol
a. X RO WASTE OIL COMBUSTIBLE LIQUID NA1270 (D001) (ERG#27)			005	DM	02250
b.					
c.					
d.					
15. Special Handling Instructions and Additional Information 11a) CONTROL#0058363-1 Ka) NY HANDLING CODE = B 2-028-02-1406 M37037 EMERGENCY RESP #1-708-388-4660			K. Handling Code for Waste Listed Above 184 B Receiving		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.			A. 1038 28024487		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Marshall Brooks		Signature Marshall Brooks		Month Day Year 05 22 91	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Scott Hulburt		Signature Scott Hulburt		Month Day Year 05 22 91	
19. Discrepancy Indication Space					
20. Facility Owner or Operator, Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Darlene Greer		Signature Darlene Greer		Month Day Year 05 22 91	

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

GENERATOR STATE

NJA 1142805



2-028-02

State of New Jersey Department of Environmental Protection Division of Hazardous Waste Management Manifest Section CN 028, Trenton, NJ 08625

Form Approved, OMB No. 2050-0039, Expires 9-30-

Please type or print in block letters. (Form designed for use on ellipse (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST. Generator: SOMERVILLE PACKAGING, PITTSFORD NY. Transporter: SAFETY-KLEEN CORP. LINDEN, NJ. Hazardous waste descriptions include RQ WASTE COMPOUND CLEANING LIQUID COMBUSTIBLE and RQ WASTE INK COMBUSTIBLE LIQUID.

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)



State of New Jersey Department of Environmental Protection Division of Hazardous Waste Management Manifest Section CN 028, Trenton, NJ 08625

2-028-02

Form Approved. OMB No. 2050-0039. Expires 9-30-91

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

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 282-5560 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020		Manifest Document No. 25729		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.													
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392						A. State Manifest Document Number NJA 1121463															
4. Generator's Phone (716 248-1800)						B. State Generator's ID SAME															
5. Transporter 1 Company Name SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408		C. State Trans. ID NY GJ51250		D. Transporter's Phone (716 226-2411)													
7. Transporter 2 Company Name						E. State Trans. ID															
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN ST LINDEN NJ 07036						10. US EPA ID Number 0-006-35															
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.									
a. X RO WASTE COMPOUND CLEANING LIQUID COMBUSTIBLE LIQUID NA1993 (D001) (ERG#27)						002		01000		P		D 0 0 1									
b. X RO WASTE COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA1993 (F005) (ERG#27)						003		01200		P		F 0 0 5									
c. X RO WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG#26)						002		01040		P		D 0 0 1									
d. X RO WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (D001) (ERG#26)						002		01030		P		D 0 0 1									
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above															
c.						To4 Blending B To4 Blending B															
d.						To4 Blending B To4 Blending B															
15. Special Handling Instructions and Additional Information										9121 27147388 925729 2-028-02-1406 03											
11a) CONTROL#0058858-1										11b) CONTROL#0058855-5RC											
EMERG RESP#708-888-4660 24HR110										CONTROL#0058943-1											
11c) CONTROL#0058880-2										SKDD# A: 1147 B: 1146 C: 1047 D: 1106											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.										28024461											
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.																					
Printed/Typed Name Marshall Brooks					Signature <i>Marshall Brooks</i>					Month Day Year 10/1/81											
17. Transporter 1 Acknowledgement of Receipt of Materials					Printed/Typed Name Scott Hulburt					Signature <i>Scott Hulburt</i>					Month Day Year 10/1/81						
18. Transporter 2 Acknowledgement of Receipt of Materials					Printed/Typed Name					Signature					Month Day Year						
19. Discrepancy Indication Space																					
20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted in item 13.										Printed/Typed Name Darlene Orner				Signature <i>Darlene Orner</i>				Month Day Year 10/5/81			

NJA 1121463



2-028-02

State of New Jersey Department of Environmental Protection Division of Hazardous Waste Management Manifest Section ON 028, Trenton, NJ 08625

Form Approved. OMB No. 2050-0039. Expires 9-30-91

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

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5566 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NJD 981877020	Manifest Document No. 41414	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NJA 1071743		
4. Generator's Phone () 716 248-1800		5. Transporter 1 Company Name SAFETY-KLEEN CORP.		B. State Generator's ID SAME		
		6. US EPA ID Number ILD 05104040B		C. State Trans. ID NY 6JS250		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone () 716 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN ST LINDEN NJ 07036		10. US EPA ID Number 0-006-35		E. State Trans. ID		
		11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) HM		F. Transporter's Phone () 2009C1		
		12. Containers No. Type		G. State Facility's ID 201-862-2000		
		13. Total Quantity		H. Facility's Phone ()		
		14. Unit Wt/Vol		I. Waste No.		
GENERATOR	a.	X RQ WASTE COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA1993 (P005) (ERG#27)	001	D M	00356	P F O O 5
	b.	X RQ WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG#26)	002	D M	01040	P D O O 1
	c.	X RQ WASTE COMPOUND CLEANING LIQUID COMBUSTIBLE LIQUID NA1993 (D001) (ERG#27)	002	D M	01012	P D O O 1
	d.	X RQ WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (D001) (ERG#26)	002	D M	01030	P D O O 1
	e.	Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above		
19. Special Handling Instructions and Additional Information 11a) CONTROL# 0053858-5 9105 23484025 541414 2-028-02-1406 03 11b) NY HANDLING CODE = B 11c) CONTROL# 0053858-1 11d) NY HANDLING CODE = B EMERG RESP# 709-888-4660 24HR 11e) CONTROL# 0053943-1 11f) NY HANDLING CODE = B 11g) CONTROL# 00153495-2 11h) SKDOT# A: 1146 B: 1097 C: 1147 D: 1106 11i) NY HANDLING CODE = B 34938996						
16. Generator's Certification: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport in conformity with applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be commercially practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.		Printed/Typed Name STEVE FRUGA		Signature <i>Steve Fruga</i>		Month Day Year 02 20 91
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name Scott Hulbert		Signature <i>Scott C Hulbert</i>		Month Day Year 02 20 91
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature		Month Day Year
19. Discrepancy Notation Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name MARQUETTE CORNO		Signature <i>Marquette Cornio</i>		Month Day Year 02 05 91		

NJA 1071743



2-028-02

State of New Jersey Department of Environmental Protection Division of Hazardous Waste Management Manifest Section CN 028, Trenton, NJ 08625

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

Form Approved. OMB No. 2050-0039. Expires 9-30-91

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5580 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST			1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 89421	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.													
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392					A. State Manifest Document Number NJA 1064151														
4. Generator's Phone 716 248-1800					B. State Generator's ID SAME														
5. Transporter 1 Company Name SAFETY-KLEEN CORP.					C. State Trans. ID NY GJS250														
6. Transporter 1 US EPA ID Number ILD 051060408					D. Transporter's Phone 716 226-2411														
7. Transporter 2 Company Name SAFETY-KLEEN CORP.					E. State Trans. ID														
8. Transporter 2 US EPA ID Number 0-006-35					F. Transporter's Phone 200961														
9. Transporter 2 Address LINDEN NJ 07036					G. State Facility's ID NJD 002182897														
10. Transporter 2 US EPA ID Number 0-006-35					H. Facility's Phone 201 862-2000														
GENERATOR	11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM		12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.													
	a. X RO WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (DOO1) (ERG#26)		SH 003 DM 001	SH 315 01345	P	D O O 1													
	b. X RO WASTE COMPOUND CLEANING LIQUID COMBUSTIBLE LIQUID NA1993 (DOO1) (ERG#27)		SH 003 DM 002	SH 1518 01012	P	D O O 1													
	c. X RO WASTE INK COMBUSTIBLE LIQUID UN1210 (DOO1) (ERG#26)		001 DM	00520	P	D O O 1													
	d. X RO WASTE COMPOUND CLEANING LIQUID FLAMMABLE LIQUID NA1993 (FOO5) (ERG#27)		SH 002 DM 003	00816	P	F O O 5													
16. Additional Descriptions for Materials Listed Above			17. Handling Codes for Waste Listed Above																
			<table border="0"> <tr> <td>a. P</td> <td>b. T</td> <td>c. S</td> <td>d. I</td> </tr> <tr> <td colspan="2">P handling</td> <td colspan="2">T handling</td> </tr> <tr> <td colspan="2">T handling</td> <td colspan="2">T handling</td> </tr> </table>					a. P	b. T	c. S	d. I	P handling		T handling		T handling		T handling	
a. P	b. T	c. S	d. I																
P handling		T handling																	
T handling		T handling																	
18. Special Handling Instructions and Additional Information 9109 24423071 889421 2-028-02-1406 03 CONTROL# 0058943-1 EMERG RESP# 708-888-4660 24HR 112 CONTROL# 0058955-5 CONTROL# 0058853-1 SKDDT# A: 1106 B: 1147 C: 1097 D: 1146																			
19. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport in highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Or, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 25839236																			
Printed/Typed Name STEVE FRIGA			Signature <i>Steve Friga</i>		Month Day Year 03 21 91														
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Scott Hulbert			Signature <i>Scott Hulbert</i>		Month Day Year 03 21 91														
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name			Signature		Month Day Year														
19. Discrepancy Indication Space																			
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Maeburke Kevin																			
Signature <i>Maeburke Kevin</i>			Signature <i>Marguerite Greco</i>		Month Day Year 03 25 91														

NJA 1064151



2-028-02

State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section
 CN 026, Trenton, NJ 08625

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

Form Approved. OMB No. 2050-0039 Expires 9-30-91

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981977020	Manifest Document No. 08647	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NJA 1046593	
4. Generator's Phone (716 248-1800)				B. State Generator's ID SAME	
5. Transporter 1 Company Name SAFETY-KLEEN CORP.				6. US EPA ID Number ILD 051060408	
7. Transporter 2 Company Name				C. State Trans ID NY 645250	
8. Transporter 2 Address SAFETY-KLEEN CORP. 1200 SYLVAN ST LINDEN NJ 07036				D. Transporter's Phone (716 226-2411)	
9. Transporter 2 US EPA ID Number 0-006-35				E. State Trans ID	
10. Transporter 2 US EPA ID Number 0-006-35				F. Transporter's Phone (200961)	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) HM				12. Containers	
		No.	Type	13. Total Quantity	14. Unit Wt/Vol
a.	X	RO WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (DOO1) (ERG/26)	SH 3 002	SH 1545 00848	P D O O 1
b.	X	RO WASTE INK COMBUSTIBLE LIQUID UN1210 (DOO1) (ERG/26)	001	SH 0520 0520	P D O O 1
c.	X	RO WASTE COMPOUND, CLEANING LIQUID FLAMMABLE LIQUID NA1993 (FOO5) (ERG/27)	002	00812	P F O O 5
d.	X	RO WASTE COMPOUND CLEANING LIQUID COMBUSTIBLE LIQUID NA1993 (DOO1) (ERG/27)	SH 3 002	SH 1518 07042	P D O O 1
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Waste Listed Above		
a.			a. TOX Handling		
c.			c. TOX Handling		
b.			b. TOX Handling		
d.			d. TOX Handling		
15. Special Handling Instructions and Additional Information (a) NY HANDLING CODE = B 11c) CONTROL# 0058830-6 (c) NY HANDLING CODE = B EMERGENCY RESP# 1-708-888-4660 11c) CONTROL# 0058853-1 (d) NY HANDLING CODE = B 11b) CONTROL# 0058865-5 SKDOT# A: 1106 B: 1097 C: 1146 D: 1117 (e) NY HANDLING CODE = B					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 23989122					
Printed/Typed Name STEVE FRIGA		Signature <i>Steve Friga</i>		Month Day Year 01 21 91	
Printed/Typed Name Scott Hulburt		Signature <i>Scott Hulburt</i>		Month Day Year 01 21 91	
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space					
Printed/Typed Name <i>Maureenite Conno</i>		Signature <i>Maureenite Conno</i>		Month Day Year 01 21 91	

NJ 1046593



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2053-0053 Expires 9/30/93

Please print or type.

In case of emergency or spill, immediately call the National Response Center (800) 424-0802 and the N.Y. Department of Environmental Conservation (516) 457-7332.

-UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 30169	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 065523-3		
4. Generator's Phone 716 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NY NP5777		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone 716 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number NYD 980753784		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone 716 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001) (ERG #27)				No. 1	Type DM	86
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above I (A) D018				K. Handling Codes for Wastes Listed Above		
a				R <input type="checkbox"/>		
b				<input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 9052 22313258 130169 2-028-02-1406 03 EMERGENCY RESP#1-708-888-4660 SKDOT# A: 501 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Robo Arenas		Signature <i>Robo Arenas</i>		Mo. Day Year 12 26 90		
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Scott Hulbert		Signature <i>Scott Hulbert</i>		Mo. Day Year 12 26 90		
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 18						
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 12 26 90		

NY C 065523-3



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCE REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0030, Expires 10/91

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 13658	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NYC 056796-6	
4. Generator's Phone 716 248-1800		5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		B. Generator's ID SAME	
		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NYNR5771	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone 716 226-2411	
		9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		E. State Transporter's ID	
		10. US EPA ID Number NYD 980753784		F. Transporter's Phone ()	
				G. State Facility's ID	
				H. Facility's Phone (716) 226-2411	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	13. Unit Type	14. Total Quantity	15. Unit Wt/Vol
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)		1	DM	86	P
b.					
c.					
d.					
16. Additional Descriptions for Materials Listed Above I(A) D018		17. Handling Codes for Wastes Listed Above			
a		b <input checked="" type="checkbox"/> R <input type="checkbox"/>			
c		d <input type="checkbox"/>			
18. Special Handling Instructions and Additional Information EMERGENCY RESP#1-708-888-4660		19. SKDOT# A: 501 B: C: D:			
20. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name DAVID BUSKE		Signature <i>David Buske</i>		Mo Day Year 10 29 90	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name SCOTT HULBERG		Signature <i>Scott C. Hulberg</i>		Mo Day Year 10 29 90	
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19					
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo Day Year 10 29 90	

In case of emergency or spill, immediately call the National Response Center (202) 424-8802 and the N.Y. Department of Environmental Conservation (516) 657-7332.

NYC 056796-6



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0053, Expires 9-30-91

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 94366	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY C 047222-8	
4. Generator's Phone 716 248-1800				B. Generator's ID SAME	
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NYGUS250	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414				E. State Transporter's ID	
10. US EPA ID Number NYD 980753784				F. Transporter's Phone ()	
				G. State Facility's ID	
				H. Facility's Phone (716) 226-2411	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001) (ERG #27)			No. 1 Type DM	86	P
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a.			R <input type="checkbox"/>		
b.			c. <input type="checkbox"/>		
d.			d. <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 9036 18957795 694366 2-028-02-1406 03 EMERGENCY RESP#1-708-888-4660 SKDOT# A: 501 B: C: D:					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name STEVE FRIGA		Signature <i>Steve Friga</i>		Mo. Day Year 09 07 90	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Scott Hulbur		Signature <i>Scott C Hulbur</i>		Mo. Day Year 09 07 90	
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19					
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 09 07 90	

In case of emergency, or spill, immediately call the National Response Center (800) 424-6302 and the N.Y. Department of Environmental Conservation (516) 457-7052.

NY C 047222-8



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCE REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2024-003 Expires 03/31/91

Please print or type.

In case of emergency or spill, immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7322.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 96408	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NYC 036861-6		
4. Generator's Phone (716) 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NY GJS250		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number 2-028-02		E. State Transporter's ID		
		10. US EPA ID Number NYD 980753784		F. Transporter's Phone ()		
				G. State Facility's ID (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt/Vol	15. Waste No.	
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001) (ERG #27)		No. 1 Type DM	86	P	D001	
b.						
c.						
d.						
NOTICE: IN ACCORDANCE WITH 40 CFR 268.7, THE GENERATOR PROVIDES NOTICE THAT THE WASTE DESCRIBED AS 'WASTE PETROLEUM NAPHTHA' IS A RESTRICTED WASTE. THE WASTE CONTAINS THE FOLLOWING CONSTITUENTS WHOSE TREATMENT STANDARDS ARE NOTED: TOTAL HALOGENATED ORGANIC COMPOUNDS (1000 MG/L).				K. Handling Codes for Wastes Listed Above		
				a. <input checked="" type="checkbox"/>	b. <input type="checkbox"/>	c. <input type="checkbox"/>
				d. <input type="checkbox"/>	e. <input type="checkbox"/>	f. <input type="checkbox"/>
15. Special Handling Instructions and Additional Information 9028 17274366 986408 2-028-02-1406 03 EMERGENCY RESP#1-708-888-4660 SKDOT# A: 501 B: C: D:						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name MARK POE		Signature <i>Mark Poe</i>		Mo. Day Year 07 09 90		
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Scott Hulburg		Signature <i>Scott Hulburg</i>		Mo. Day Year 07 09 90		
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 18.						
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 07 09 90		

NYC 036861-6

UNIFORM HAZARDOUS WASTE MANIFEST



2-028-02

State of New Jersey Department of Environmental Protection Division of Hazardous Waste Management Manifest Section CN 028, Trenton, NJ 08625

Form Approved, OMB No. 2050-0039, Expires 9-30-91

Please type or print in block letters. (Form designed for use on 60/12 (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No NYD 981877020	Manifest Document No. 84163	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.																																																																								
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392			A. State Manifest Document Number NJ 1100191																																																																										
4. Generator's Phone () 716 248-1800		5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 05106040B																																																																									
7. Transporter 2 Company Name SAFETY-KLEEN CORP.		8. US EPA ID Number ILV05106040B		9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN ST LINDEN NJ 07036																																																																									
10. US EPA ID Number 0-006-35		11. US EPA ID Number NJD 002182897		12. State Trans ID NY 6JS 250																																																																									
13. State Trans ID NJ 058690		14. Transporter's Phone () 609 835-2370		15. State Facility's ID 2009C1																																																																									
16. Facility's Phone () 201 862-2000																																																																													
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)																																																																													
<table border="1"> <thead> <tr> <th>a.</th> <th>b.</th> <th>c.</th> <th>d.</th> <th>e.</th> <th>f.</th> <th>g.</th> <th>h.</th> <th>i.</th> </tr> <tr> <th>RM</th> <th>UN</th> <th>HAZ</th> <th>PL</th> <th>PK</th> <th>PG</th> <th>PO</th> <th>PT</th> <th>PU</th> </tr> </thead> <tbody> <tr> <td>X</td> <td>RM</td> <td>UN1133</td> <td>HAZ</td> <td>PL</td> <td>PK</td> <td>PO</td> <td>PT</td> <td>PU</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>X</td> <td>RM</td> <td>UN1210</td> <td>HAZ</td> <td>PL</td> <td>PK</td> <td>PO</td> <td>PT</td> <td>PU</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>X</td> <td>RM</td> <td>UN1993</td> <td>HAZ</td> <td>PL</td> <td>PK</td> <td>PO</td> <td>PT</td> <td>PU</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						a.	b.	c.	d.	e.	f.	g.	h.	i.	RM	UN	HAZ	PL	PK	PG	PO	PT	PU	X	RM	UN1133	HAZ	PL	PK	PO	PT	PU										X	RM	UN1210	HAZ	PL	PK	PO	PT	PU										X	RM	UN1993	HAZ	PL	PK	PO	PT	PU									
a.	b.	c.	d.	e.	f.	g.	h.	i.																																																																					
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X	RM	UN1133	HAZ	PL	PK	PO	PT	PU																																																																					
X	RM	UN1210	HAZ	PL	PK	PO	PT	PU																																																																					
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12. Containers																																																																													
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17. Additional Descriptions for Materials Listed Above																																																																													
18. Emergency Response Information																																																																													
19. Generator's Certification																																																																													
20. Facility Owner or Operator Certification																																																																													

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection, (609) 292-5560 (Day) (609) 292-7172 (Night)

2 - TSD MAIL TO - GENERATOR STATE

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

NJA 1100191



2-028-02

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

Form Approved. OMB No. 2000-0320. Expires 9-30-01

Please type or print in block letters. (Form designed for use on either 12-inch typewriter.)

Main form body containing sections: 1. Generator's Name and Mailing Address (SOMERVILLE PACKAGING), 2. Generator's Phone (716 248-1800), 3. Transporter 1 Company Name (SAFETY-KLEEN CORP.), 4. Transporter 2 Company Name (SAFETY-KLEEN CORP.), 5. US DOT Description (RQ WASTE COMPOUND, CLEANING LIQUID COMBUSTIBLE), 6. Containers (12), 7. Additional Descriptions, 8. Generator's Certification, 9. Facility Owner/Operator (MARIONERITE COVINO).

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA 1090905



State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section
 CN 028, Trenton, NJ 08625

2-028-02

Form Approved, OMB No. 2060-0030, Expires 9-30-91

Please type or print in block letters. (Form designed for use on cello (12-pitch) typewriter.)

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5500 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 47065	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONRDE AVE PITTSFORD NY 14534-1392			A. State Manifest Document Number NJA 1078015		
4. Generator's Phone (716) 248-1800			B. State Generator's ID SAME		
5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Trans ID NY GJ3250	
7. Transporter 2 Company Name Schneider Tank Lines		8. US EPA ID Number LD 98109041712		D. Transporter's Phone (716) 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN ST LINDEN NJ 07036			E. State Trans ID NJDCPS 12149		
10. US EPA ID Number 0-006-35			F. Transporter's Phone 800 558-5091		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM			G. State Facility's ID 2009C1		
12. Containers			H. Facility's Phone (201) 862-2000		
13. Total Quantity			I. Unit Wt/Vol		
14. Waste No			15. Special Handling Instructions and Additional Information		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.			17. Transporter 1 Acknowledgement of Receipt of Materials		
18. Transporter 2 Acknowledgement of Receipt of Materials			19. Discrepancy Indication Space		
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 18.			21. Additional Descriptions for Materials Listed Above		
22. Handling Codes for Waste Listed Above			23. Additional Descriptions for Materials Listed Above		

2 - TSD MAIL TO - GENERATOR STATE

NJ 1078015



2-028-02

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

Form Approved, OMB No. 2050-0029, Expires 9-30-91

Please type or print in block letters. (Form designed for use on a 12-pitch typewriter.)

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NJD 981877020	Manifest Document No. 02222	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392			A. State Manifest Document Number NJA 1069048		B. State Generator's ID SAME
4. Generator's Phone (716) 248-1800		5. Transporter 1 Company Name SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 05106040B	
7. Transporter 2 Company Name		8. US EPA ID Number		C. State Trans. ID NY GJIS2150	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN ST LINDEN NJ 07036			10. US EPA ID Number 0-006-35		D. Transporter's Phone (716) 226-2411
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) HM			12. Containers No. Type		13. Total Quantity
a. X RQ WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG#26)			001 DM		00520 P D O O 1
b. X RQ WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (D001) (ERG#26)			002 DM		01030 P D O O 1
c. X RQ WASTE COMPOUND, CLEANING LIQUID FLAMMABLE LIQUID NA1993 (F005) (ERG#27)			001 DM		00406 P F O O 5
d.					
J. Additional Descriptions for Materials Listed Above			K. Packaging Codes for Wastes Listed Above		
a.			a. 104 Blending		
b.			b. 104 Blending		
c.			c. 104 Blending		
d.			d. 104 Blending		
15. Special Handling Instructions and Additional Information 11a) CONTROL#0058865-5 9045 20878922 502222 2-028-02-1406 03 Ka) NY HANDLING CODE =B EMERGENCY RESP#1-708-888-4660 11c) CONTROL#0058880-5 Kc) NY HANDLING CODE =B 11b) CONTROL#0058943-1 SKDOT# (A: 1097) (B: 1106) (C: 9746) D:					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated and the degree to which I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 874387025					
Printed/Typed Name STEVE FRIGA			Signature <i>Steve Friga</i>		Month Day Year 11/20/90
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name SCOTT HULBURT			Signature <i>Scott Hulburt</i>		Month Day Year 11/20/90
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name			Signature		Month Day Year
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name MARLENE COVINO			Signature <i>Marlene Covino</i>		Month Day Year 12/10/90

2 - TSD MAIL TO - GENERATOR STATE

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

NJA 1069048



2-028-02

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Trenton, NJ 08625

Form Approved, OMB No. 2050-0029, Expires 9-20-91

Please type or print in block letters. (Form designed for use on cello (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST
1. Generator's US EPA ID No. NYD 981877020
2. Page 1 of 1
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING
4. Generator's Phone 716 248-1800
5. Transporter 1 Company Name SAFETY-KLEEN CORP.
6. US EPA ID Number ILLD 051060408
7. Transporter 2 Company Name NAPP Trucking Corp
8. US EPA ID Number NJD 000813497
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP.
10. US EPA ID Number 0-006-35
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)
12. Containers No. Type
13. Total Quantity
14. Unit Wt/Vol
15. Waste No.
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway...

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

NJA 0930078



State of New Jersey
 Department of Environmental Protection
 Division of Hazardous Waste Management
 Manifest Section
 CN 023, Trenton, NJ 08625

2-028-02

Please type or print in black letters. (Form designed for use on cello (12-pt) typewriter) Form Approved, OMB No. 2040-0030, Expires 9-30-87

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 921877020	Manifest Document No. 07904	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392			A. State Manifest Document Number NJ 0916575		
4. Generator's Phone (716 248-1800		6. US EPA ID Number SAME		B. State Generator's ID	
5. Transporter 1 Company Name SAFETY-KLEEN CORP.		7. US EPA ID Number 11D 051040408		C. State Trans. ID NY GJS1250	
7. Transporter 2 Company Name NAPPI TRUCKING CORP		8. US EPA ID Number NJ D000813497		D. Transporter's Phone (716 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN ST LINDEN NJ 07036		10. US EPA ID Number 0-006-35 NJD 002182697		E. State Trans. ID NJ GJS10342	
		F. Transporter's Phone 201 566 3000		G. State Facility's ID 2007C1	
		H. Facility's Phone (201 562-2000			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit We/Vol	15. Waste No.
a. X RQ WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG #27)		2 DM	11040	P	D 0 0 1
b. X RQ WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (D001) (ERG #26)		2 DM	1031	P	D 0 0 1
c. X RQ WASTE COMPOUND, CLEANING LIQUID COMBUSTIBLE LIQUID NA 1993 (8004) (ERG #27) FLAMMABLE SH		3 DM	12118	P	D 0 0 5 SH
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
a.		Tox Handling Tox Handling			
b.		Tox Handling			
15. Special Handling Instructions and Additional Information		9025 16603649 707904 2-028-02-1406 03			
11a) 0058665-5					
11b) CONTROL #0058943-1 EMERGENCY RESP #1-708-888-4660 005860-4 SH		SKDDT# A: 1097 B: 1106 C: 1146 D:			
11c) CONTROL #0058943-1 SH		17999962			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the greatest extent economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name STEVE FRIGA		Signature <i>Steve Friga</i>		Month Day Year 07 09 90	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>Scott Hulbert</i>		Month Day Year 07 09 90	
Printed/Typed Name SCOTT HULBERT					
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature <i>Fred Waters</i>		Month Day Year 07 11 90	
Printed/Typed Name FRED WATERS					
19. Discrepancy Indication Space Change Item 11c From COMBUSTIBLE TO FLAMMABLE BASED UPON ANALYSIS					
23. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted in item 13.					
Printed/Typed Name HARRY DUNBAR		Signature <i>Harry Dunbar</i>		Month Day Year 07 09 90	

2 - TSD MAIL TO - GENERATOR STATE

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

NJ 0916575



2-028-02

State of New Jersey
Department of Environmental Protection
Division of Hazardous Waste Management
Manifest Section
CN 028, Tronton, NJ 08625

Form Approved OMB No. 2050-0039 Expires 9-30-91

Please type or print in block letters. (Form designed for use on cills (12-pitch) typewriter.)

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5560 (Day) (609) 292-7172 (Night)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 25334	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NJA 0913633	
4. Generator's Phone (716) 248-1800		6. US EPA ID Number SAME		B. State Generator's ID	
5. Transporter 1 Company Name SAFETY-KLEEN CORP.		8. US EPA ID Number 11D 10510A0408		C. State Trans. ID NY 615250	
7. Transporter 2 Company Name NAPPZ Trucking Corp		9. US EPA ID Number NJD 0100013427		D. Transporter's Phone (716) 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1200 SYLVAN ST LINDEN NJ 07036		10. US EPA ID Number 0-006-35		E. State Trans. ID DEP 510342	
		10. US EPA ID Number NJD 002182897		F. Transporter's Phone (201) 566-3000	
				G. State Facility's ID 200961	
				H. Facility's Phone (201) 862-2000	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. X RQ WASTE COMPOUND, CLEANING LIQUID FLAMMABLE LIQUID NA1993 (FO05)(ERG#27)			No. Type		
			0101 D M	010406	P F 0 0 5
b. X RQ WASTE INK COMBUSTIBLE LIQUID UN1210 (DO01) (ERG#26)			003 D M	01560	P D 0 0 1
c. X RQ WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (DO01) (ERG#26)			002 D M	01032	P D 0 0 1
d.					
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a.			a. TOY Handling		
b.			b. BY blending		
c.			c. TOY blending		
d.			d.		
15. Special Handling Instructions and Additional Information 11a) CONTROL# 0058880-5 9033 18399840 425336 2-028-02-1406 03 11b) NY HANDLING CODE = B 11c) CONTROL# 0058943-1 11d) NY HANDLING CODE = B EMERGENCY RESP# 1-708-888-4880 SKDOT# A: 1146 B: 1097 C: 1106 D: 11e) CONTROL# 0058865-5 11f) NY HANDLING CODE = B					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. 19804091					
Printed/Typed Name STEVE FRIGA		Signature <i>Steve Friga</i>		Month Day Year 10 9 1990	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name SCOTT HULBURT		Signature <i>Scott C Hulbert</i>	
				Month Day Year 10 9 1990	
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name RICHARD HOENYAK		Signature <i>RD Hzy</i>	
				Month Day Year 09 1 1990	
19. Discrepancy Indication Space					
20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name ARKENO GRER		Signature <i>Ark Grer</i>		Month Day Year 09 11 1990	

NJA 0913633

2 - TSD MAIL TO - GENERATOR STATE

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

2-028-02



HAZARDOUS WASTE MANIFEST

Please print or type

UNIFORM HAZARDOUS WASTE MANIFEST
 Generator's EPA ID No. NYD 981877020 76642 1
 Generator's Name and Mailing Address: SOMERVILLE PACKAGING, 3750 MONROE AVE, PITTSFORD NY 14534-1392
 Generator's Phone: 716 248-1800
 Transporter's Company Name: SAFETY-KLEEN CORP. ILD 051060408
 Transporter's Company Phone: 716 226-2411
 Designated Facility Name and Site Address: SAFETY-KLEEN CORP., 1525 WEST HENRIETTA RD, AVON, NY 14414
 Designated Facility Phone: 716 226-2411
 US DOT Description (including Proper Shipping Name, Hazard Class and ID Number): WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)
 Handling Codes for Wastes Listed Above: DM 86 P D001
 Special Handling Instructions and Additional Information: 9020 15533490 276642 2-028-02-1406 07
 EMERGENCY RESP#1-708-888-4660
 SKDDT# A: 501 B: C: D:
 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, labeled and loaded, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.
 If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have adopted the preferable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.
 Printed/Typed Name: DAVID BUSKE Signature: D. Buske Mo. Day Year: 05 18 90
 Printed/Typed Name: SEAN HULBERT Signature: Sean Hulbert Mo. Day Year: 05 18 90
 Printed/Typed Name: IRENE KENNEY Signature: Irene Kenney Mo. Day Year: 05 18 90

In case of emergency or spill immediately call the National Response Center (800) 424-6802 and the N.Y. Department of Environmental Conservation (516) 457-7362.

COMBUSTIBLE LIQUID

TRANSPORTER

RECEIVER

NYC 027046-1

2-028-02



Please print or type

HAZARDOUS WASTE MANIFEST

1. Generator's Name and Mailing Address
UNIFORM HAZARDOUS WASTE MANIFEST
 2. Generator's Name and Mailing Address
SOMERVILLE PACKAGING
3750 MONROE AVE
PITTSFORD
 3. Generator's Phone: **716 248-1800**
 4. Transporter 1 (Company Name)
SAFETY-KLEEN CORP.
 5. Transporter 1 (Contract No.)
ILD 051060408
 6. Transporter 2 (Company Name)
 7. Designated Facility Name and Site Address
SAFETY-KLEEN CORP.
1525 WEST HENRIETTA RD
AVON, NY 14414
 8. Facility ID Number
2-028-02
 9. Facility Phone
716 226-2411
 10. US DOT Description (including Proper Shipping Name, Hazard Class and ID Number)
WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)

1
 NY C **018546-6**
 SAME
NYMC2373
716 226-2411

GENERATOR'S RECORD	a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001)(ERG #27)	1	DM	86	P	D001
	b.					
	c.					
	d.					

NOTICE: IN ACCORDANCE WITH 40 CFR 268.7, THE GENERATOR PROVIDES NOTICE THAT THE WASTE DESCRIBED AS 'WASTE PETROLEUM NAPHTHA' IS A RESTRICTED WASTE. THE WASTE CONTAINS THE FOLLOWING CONSTITUENTS WHOSE TREATMENT STANDARDS ARE NOTED: TOTAL HALOGENATED ORGANIC COMPOUNDS (1000 MG/L).

15. Special Handling Instructions and Additional Information: **9013 14156970 726007 2-028-02-1406 07**
EMERGENCY RESP#1-708-888-4660
 SKDQT# A: 501 B: C: D:

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway, according to applicable international and national government regulations and state laws and regulations.

17. Transporter 1 (Acknowledgement of Receipt of Materials)
 Printed/Typed Name: **Marshall Brooks** Signature: *Marshall Brooks* Mo. Day Year: **03/19/90**
 18. Transporter 2 (Acknowledgement of Receipt of Materials)
 Printed/Typed Name: **DAN SHERMAN** Signature: *Dan Sherman* Mo. Day Year: **03/19/90**

19. Discrepancy Indication Space
 20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
 Printed/Typed Name: **IRENE KENNEY** Signature: *Irene Kenney* Mo. Day Year: **03/19/90**

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (516) 457-7362.

NYC 018546-6



2-028-02

HAZARDOUS WASTE MANIFEST

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST NYD 981877020 40894 1

3. Generator's Name and Mailing Address
SOMERVILLE PACKAGING
3750 MONROE AVE
PITTSFORD NY 14534-1392
 716 248-1800

NYC 011229-6

4. Generator's Phone
 716 248-1800

5. Transporter's Name
SAFETY-KLEEN CORP.
 716 226-2411

6. Transporter's License No.
 ILD 051060408

7. Transporter's Office Name
 SAME

8. Designated Party Name and Street Address
SAFETY-KLEEN CORP.
1525 WEST HENRIETTA RD
AVON, NY 14414
 716 226-2411

9. NYD 980753784

10. US DOT Description (Including Proper Shipping Name, Hazard Class, and Division)

1	WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255(D001) (ERG #27)	01	DM	86	P	D001
2						
3						

NOTICE: IN ACCORDANCE WITH 40 CFR 268.7, THE GENERATOR PROVIDES NOTICE THAT THE WASTE DESCRIBED AS 'WASTE PETROLEUM NAPHTHA' IS A RESTRICTED WASTE. THE WASTE CONTAINS THE FOLLOWING CONSTITUENTS WHOSE TREATMENT STANDARDS ARE NOTED: TOTAL HALOGENATED ORGANIC COMPOUNDS (1000 MG/L); LEAD (500 MG/L)

9008 13185046 340894 2-028-02-1406 07

18. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this document are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and are in all respects in proper condition for transport by properly securing to applicable international and national government regulations and state laws and regulations.

19. SKDOT# A: 501 B: C: D:

17. Transporter 1's Acknowledgment of Receipt of Materials

Printed/Typed Name: **STEVE FLORA** Signature: *Steve Flora* Mo. Day Year: 02 23 90

18. Transporter 2's Acknowledgment of Receipt of Materials

Printed/Typed Name: **T. RYAN** Signature: *T. Ryan* Mo. Day Year: 02 23 90

19. Facility Owner or Operator's Certification of receipt of hazardous materials covered by this manifest (except as noted in item 18)

Printed/Typed Name: **IRENE KENNEY** Signature: *Irene Kenney* Mo. Day Year: 02 23 90

In case of emergency, call the National Response Center (800) 424-6802 and the N.Y. Department of Environmental Conservation (516) 457-7362.

NYC 011229-6

2-028-02

Please print or type

HAZARDOUS WASTE MANIFEST
P.O. Box 12620 Albany, New York 12212

UNIFORM HAZARDOUS WASTE MANIFEST NYD 981877020 33374 1

Generator's Name and Site Address
SOMERVILLE PACKAGING
3750 MONROE AVE
PITTSFORD NY 14534-1392
 Telephone Number 716 248-1800

Transporter's Name and Address
SAFETY-KLEEN CORP. ILD 051060408
 Telephone Number 716 226-2411

Disposer's Name and Site Address
SAFETY-KLEEN CORP. 2-028-02
1525 WEST HENRIETTA RD NYD 980753784
AVON, NY 14414 716 226-2411

US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001)

01 DM 0086 P D001

NOTICE: IN ACCORDANCE WITH 40 CFR 268.7, THE GENERATOR PROVIDES NOTICE THAT THE WASTE DESCRIBED AS 'WASTE PETROLEUM NAPHTHA' IS A RESTRICTED WASTE. THE WASTE CONTAINS THE FOLLOWING CONSTITUENTS WHOSE TREATMENT STANDARDS ARE NOTED: TOTAL HALOGENATED ORGANIC COMPOUNDS (1000 MG/L); LEAD (500 MG/L)

Special Handling Instructions and Additional Information 9004 12386447 033374 2-028-02-1406 07

SKDDOT# A: 501 B: C: D:

GENERATOR'S CERTIFICATION: I hereby certify that the contents of this manifest are fully and accurately described above by proper ownership name and are classified and assigned the appropriate hazard class and hazard identification number according to applicable international and national government regulations and state laws and regulations.

Printed/Typed Name: **SOMERVILLE PACKAGING** Signature: *Marshall Brooks* Mo. Day Year: 01 29 90

Printed/Typed Name: **ROGER R. FANTON** Signature: *Roger R. Fanton* Mo. Day Year: 01 29 90

Printed/Typed Name: Signature: Mo. Day Year:

Discrepancy Indication Boxes

Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 10

Printed/Typed Name: **IRENE KENNEY** Signature: *Irene Kenney* Mo. Day Year: 01 29 90

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (516) 457-7362.

SO-DATA-0

RECEIVED

FACILITY

NY C 006342-6

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 1050-0339, Expires 9-30-91

Please print or type. Do not Staple.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7382.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. N. Y. D. 9 8 1 8 7 7 0 2 0		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.							
3. Generator's Name and Mailing Address Sommerville Packaging 3750 Monroe Ave.- Pittsford, NY 14635						A. State Manifest Document No. NY B 125422 2									
4. Generator's Phone (716) 248-1827						B. Generator's ID Same									
5. Transporter 1 (Company Name) Northeast Environmental Services, Inc.				6. US EPA ID Number N. Y. D. 0 5 7 7 7 0 1 0 9		C. State Transporter's ID NY (AP) PB6024									
7. Transporter 2 (Company Name)						D. Transporter's Phone (315) 697-3979									
9. Designated Facility Name and Site Address Northeast Environmental Services, Inc. Canal Road Wampsville, NY 13163						E. State Transporter's ID									
10. US EPA ID Number N Y D 0 5 7 7 7 0 1 0 9						F. Transporter's Phone ()									
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						G. State Facility's ID									
12. Containers						H. Facility's Phone (315) 697-3979									
a. Waste Flammable Liquid, N.O.S. Flammable Liquid UN 1993						No. 001		Type D M		Quantity 00055		Unit G		Waste No. EPA F005 STATE	
b. Waste Flammable Liquid, N.O.S. Flammable Liquid UN 1993 (D001)RQ						No. 006		Type D M		Quantity 00330		Unit G		Waste No. EPA D001 STATE	
c.														EPA	
d.														STATE	
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above									
a. Toluene						B <input type="checkbox"/>									
b. Isopropanol						T <input checked="" type="checkbox"/>									
15. Special Handling Instructions and Additional Information a) 7519-E-A001 b) 7519-E-A002						7519-1-90									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.															
Printed/Typed Name STEVE FRIGA				Signature <i>Steve Friga</i>				Mo. Day Year 02 27 90							
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name Allen Smet-Singer				Signature <i>Allen Smet-Singer</i>				Mo. Day Year 02 27 90							
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name				Signature				Mo. Day Year							
19. Discrepancy Indication Space Kb=T															
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name David J Chmielewski															
Signature <i>David Chmielewski</i>				Mo. Day Year 02 27 90											

EPA Form 8700-22 (Rev. 9-88) Previous editions are obsolete.

COPY 1—Disposer State—Mailed by TSD Facility

NY B 125422 2

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-4660 (Day) (609) 292-7172 (Night)

NYD98187702002575

NJA 0810328

SOMERVILLE PACKAGING
3750 MONROE AVE.
PITTSFORD

716 248-1800 NY 14534-1392

SAME

SAFETY-KLEEN CORP. I L D 0 5 1 0 6 0 4 0 8

NY GJ 5 2 5 0
716 226-2411

Safety Kleen Corp. I L D 0 5 1 0 6 0 4 0 8

NJDP S 8 6 9 0
#44698
609 825-2370

SAFETY-KLEEN CORP. 0-006-35
1200 SYLVAN ST
LINDEN NJ 07036

N J D 0 0 2 1 8 2 8 9 7

2009C1
201 362-2000

X RQ WASTE COMPOUND, CLEANING, LIQUID FLAMMABLE
LIQUID NA 1993 (F005) (ERG #27)

005 D M 2036 P F 0 0 5

Handwritten signature

EMERGENCY RESP #1-708-888-4660

9017 15004112 036926 2-028-02-1406 07

1602115

SECTION A: *1146* B: C: 0058880-6 D:

Marshall A. Brooks

Marshall A. Brooks

Month Day Year
05 04 90

Scott Hulbert

Scott Hulbert

Month Day Year
05 04 90

Paul Schmitt

Paul Schmitt

Month Day Year
05 01 90

Tom Hulbert

Tom Hulbert

Month Day Year
05 04 90

SPA Form 6700-01 (Rev. 11-89) Previous editions are obsolete.

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

2 - TSD MAIL TO - GENERATOR STATE

NJA 0810328

2-028-02

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-5600 (Day) (609) 292-7172 (Night)

NYD 981877020 64856 1

SOMERVILLE PACKAGING
3750 MONROE AVE
PITTSFORD NY 14534-1392
716 248-1800

NJA 0801573

SAFETY-KLEEN CORP. ILD 051060408 NY GJ5250
716 226-2411

Nappi Trucking Corporation NJD 000813477 NJD 000813477
SAFETY-KLEEN CORP. 0-006-35 201 566-3000
1200 SYLVAN ST NJD 002182897 200901

LINDEN NJ 07036 201 862-2000

No.	Type	Quantity	HAZ
X	RQ WASTE COMPOUND, CLEANING, LIQUID FLAMMABLE LIQUID NA1993 (F005) (ERG #27)	1 DM 40.7	P F 0 0 5
X	RQ WASTE INK COMBUSTIBLE LIQUID UN1210 (D001) (ERG #27)	3 DM 156.0	P D 0 0 1
X	RQ WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (D001) (ERG #25)	2 DM 103.1	P D 0 0 1

450 for Blending
450 for Blending
450 for Blending

9021 15803562 364856 2-028-02-1406 07

11a) CONTROL #0058860-6 11b) CONTROL #0058865-5 11c) CONTROL #0058865-5
EMERGENCY RESP #1-708-888-4660
NJ DEP DECAT #31781 SKDDT# A: 1146 B: 1097 C: 1106 D:

18. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this assignment are fully and accurately described above by waste shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable, and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat of contaminants to the environment. Or, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and selected the practicable management method that is available to me and that I can afford.

16886525

19. Signature of Generator: **STEVE FRIGA** X *Steve Friga* Month/Day/Year: 06/04/90

20. Signature of Carrier: **SCOTT HULBERT** *Scott C Hulbert* Month/Day/Year: 06/04/90

Signature of Receiver: **WILLIAM O'KEEFE** *William O'Keefe* Month/Day/Year: 06/13/90

Signature of Operator: **ROBERT CELLA** *Robert Cella* Month/Day/Year: 06/13/90

NJA 0801573

2-028-02

Please type in block letters, and use the following instructions:

SCMERVILLE PACKAGING
3750 MONROE AVE
PITTSFORD NY 14534-1392
716 248-1800

NYD 981877020 36926

NJA 0702575

SAME

SAFETY-KLEEN CORP. ILD 051060408

NY GJ5250
716 226-2411

Safety Kleen Corp. ILD051060408

NJDPS 8690
44608
6/22/88 2370
2009C1

SAFETY-KLEEN CORP. 0-006-35

1200 SYLVAN ST NJD 002182897

LINDEN NJ 07036 201 862-2000

X RQ WASTE ADHESIVE COMBUSTIBLE LIQUID UN1133 (D001) (ERG #26) 005 DM 2989 P D 0 0 1

X RQ WASTE OIL COMBUSTIBLE LIQUID NA1270 (D001) (ERG #27) 009 DM 6237 P D 0 0 1

X RQ WASTE COMPOUND, CLEANING, LIQUID COMBUSTIBLE LIQUID NA 1993 (D001) (ERG #27) 004 DM 2026 P D 0 0 1

X RQ WASTE LK COMBUSTIBLE LIQUID UN 1210 (D001) (ERG #27) 005 DM 2601 P D 0 0 1

TOY Blinding TOY Blinding TOY Blinding TOY Blinding

9017 15004112 036926 2-028-02-1406 07

EMERGENCY RESP#1-708-868-4660

16019333

SKDOT# A: 1106

B: 1038

11A - 0058943-1 c. 1147
11B - 0058863-1
11C - C0058838-1 D: 1047
11D - 0058865-5

Marshall A. Brooks

Marshall A. Brooks

Month Day Year
05 04 90

Scott Halbur

Scott Halbur

Month Day Year
05 04 90

Paul Schertz

Paul Schertz

Month Day Year
05 04 90

Facility Owner or Operator Certification of Inventory Control and Release of this manifest must be signed in Part 19

Paul Schertz

Paul Schertz

Month Day Year
05 11 90

SIGNATURE AND INFORMATION MUST BE LEGIBLE ON ALL COPIES

2 - TSD MAIL TO - GENERATOR STATE

In case of an emergency or spill immediately call the state the emergency occurred in and the N.J. Dept. of Environmental Protection. (609) 292-6600 (Day) (609) 292-7173 (Night)

NJA 0702575

48-14-1 (02/01)

2-028-02



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS WASTE MANAGEMENT
HAZARDOUS WASTE MANIFEST
P.O. Box 12020, Albany, New York 12212

Please print or type.

NYSDOT Form 136 (Rev. 02/02) Expires 1/10/04

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 38115	2. State of origin in the shaded areas is not required by Federal Law. 1	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392		4. Generator's Phone 716 248-1800		5. State Manifest Document Number NYC 002080-1	
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		7. State Transporter's ID NYM 2372	
7. Transporter 2 (Company Name)		8. US EPA ID Number		8. Transporter's Phone 716 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number 2-028-02 NYD 980753784		9. State Facility's ID 716 226-2411	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Handling Codes for Waste Listed Above	
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001)		No. 1	Type DM	Quantity 86	Unit P
b.					
c.					
d.					
NOTICE: IN ACCORDANCE WITH 40 CFR 268.7, THE GENERATOR PROVIDES NOTICE THAT THE WASTE DESCRIBED AS 'WASTE PETROLEUM NAPHTHA' IS A RESTRICTED WASTE. THE WASTE CONTAINS THE FOLLOWING CONSTITUENTS WHOSE TREATMENT STANDARDS ARE NOTED: TOTAL HALOGENATED ORGANIC COMPOUNDS (1000 MG/L); LEAD (500 MG/L).				R <input type="checkbox"/>	
14. Special Handling Instructions and Additional Information 8952 11656634 738115 2-028-02-1406 07					
15. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this certification are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway, according to applicable federal, state and national governmental regulations and codes and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Or, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.		SKDOT# A: 501 B: 501 C: 501 D: 501			
17. Transporter 1 (Acknowledgement of Receipt of Materials)		Signature <i>Marshall Brook</i>		Mo. Day Year 12 28 89	
18. Transporter 2 (Acknowledgement of Receipt of Materials)		Signature <i>Alan Whitman</i>		Mo. Day Year 12 28 89	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of Receipt of Hazardous Materials Covered by this Manifest except as noted in item 19.		Signature <i>Irene Kenney</i>		Mo. Day Year 12 28 89	

In case of emergency or spill immediately call the National Response Center (800) 424-9322 and the N.Y. Department of Environmental Conservation (518) 457-7502.

NYC 002080-1



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Please print or type. Do not Staple.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Dept. of Environmental Conservation (518) 457-7362.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. N Y D 9 8 1 8 7 7 0 2 0 0 0 0 1		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.					
3. Generator's Name and Mailing Address Somerville Packaging 3750 Monroe Avenue - Pittsford, NY 14635						A. State Manifest Document No. NY B 174809 7							
4. Generator's Phone (716) 248-1800						B. Generator's ID Same							
5. Transporter 1 (Company Name) Northeast Environmental Services, Inc.				6. US EPA ID Number N Y D 0 5 7 7 7 0 1 0 9		C. State Transporter's ID (AP) PB6024							
7. Transporter 2 (Company Name)						D. Transporter's Phone (315) 697-3979							
9. Designated Facility Name and Site Address Northeast Environmental Services, Inc. Canal Road Wampsville, NY 13163						10. US EPA ID Number N Y D 0 5 7 7 7 0 1 0 9		E. State Transporter's ID					
						F. Transporter's Phone ()							
						G. State Facility's ID							
						H. Facility's Phone (315) 697-3979							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		13. Total Unit Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993 (D001)RQ						0115 D M		0,0825		G		EPA D001 STATE	
b. Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993						0104 D M		0,0220		G		EPA F005 STATE	
c. Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993 (D001)RQ						0103 D M		0,0165		G		EPA D001 STATE	
d.												EPA STATE	
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above							
a Isopropanol						c Ink		a		B		c B	
b Toluene						d		b		B		d	
15. Special Handling Instructions and Additional Information						7519--3-89							
a) 7519-E-A002 c) 7519-E-A005						b) 7519-E-A001							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations.						If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name M. Luft				Signature <i>M. Luft</i>		Mo. Day Year 08 12 89							
17. Transporter 1 (Acknowledgement of Receipt of Materials)													
Printed/Typed Name Allen Snetsinger				Signature <i>Allen Snetsinger</i>		Mo. Day Year 10 8 21 89							
18. Transporter 2 (Acknowledgement of Receipt of Materials)													
Printed/Typed Name				Signature		Mo. Day Year							
19. Discrepancy Indication Space Ka=T													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name David J Chmielewski				Signature <i>David J Chmielewski</i>		Mo. Day Year 08 21 89							

NY B 174809 7



30728

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0039. Expires 9-30-91

Please print or type. Do not Staple.

In case of emergency or spill, immediately call the National Response Center (800) 424-9302 and the N.Y. Dept. of Environmental Conservation (518) 457-7382.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. NY 0191811817101210		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.			
3. Generator's Name and Mailing Address Somerville Packaging Company (Formerly Rolph-Clark Stone) 3750 Monroe Ave., Pittsford, NY 14534						A. State Manifest Document No. NY B 144716 4					
4. Generator's Phone (716) 248-1800						B. Generator's ID SAME					
5. Transporter 1 (Company Name) Franks Vacuum Truck Service						C. State Transporter's ID 803841 NY					
6. US EPA ID Number NY ID 19 18 12 17 19 12 18 11 14						D. Transporter's Phone 76 244 2132					
7. Transporter 2 (Company Name)						E. State Transporter's ID					
8. US EPA ID Number						F. Transporter's Phone ()					
9. Designated Facility Name and Site Address Frontier Chemical Waste Process Inc. 4626 Royal Ave. Niagara Falls, NY 14303						G. State Facility's ID					
10. US EPA ID Number NY ID 04 3 8 1 5 1 7 0 1 3						H. Facility's Phone (716) 265-2208					
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers		14. Unit		I. Waste No.	
a. Waste Flammable Liquid, N.O.S. Flammable Liquid UN1993 (D001)						No. Type		Total Quantity		EPA STATE	
						0 0 14 DIM		0 10 12 10		D001	
b. Waste Flammable Liquide, N.O.S. Flammable Liquide UN 1993 (D001)						0 0 1 DIM		0 0 10 5 5		D001	
c. Waste Flammable Liquide, N.O.S. Flammable Liquid UN 1993 (D001)						0 1 4 DIM		0 0 7 7 0		D001	
d.										STATE	
J. Additional Descriptions for Materials listed Above						K. Handling Codes for Wastes Listed Above					
a Toluene						c Isopropanol		a B		c B	
b Ink						d		b B		d	
15. Special Handling Instructions and Additional Information A) 1849-01 5 Drums Non Harzardous Ink 1849-09 B) 1849-05 10 Drums Non Harzardous Waste Glue 1844-08 C) 1849-02											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment, OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.											
Printed/Typed Name Todd Cappiello						Signature <i>Todd Cappiello</i>		Mo. Day Year 11 28 89			
17. Transporter 1 (Acknowledgement of Receipt of Materials)						Printed/Typed Name Gary Stahl		Signature <i>Gary Stahl</i>		Mo. Day Year 11 28 89	
18. Transporter 2 (Acknowledgement of Receipt of Materials)						Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space MANIFEST DOCUMENT NUMBER LEFT BLANK BY GENERATOR. FRONTIER CHEMICAL, INC.											
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Printed/Typed Name Mike McCormick		Signature <i>Mike McCormick</i>		Mo. Day Year 11 28 89	

NY B 144716 4



2-028-02

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0029 Expires 9-30-91

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 19056	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY A 983654-8	
4. Generator's Phone (716 248-1800)				B. Generator's ID SAME	
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number IL D051060408		C. State Transporter's ID NYM42373	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716 226-2411)	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414				E. State Transporter's ID	
10. US EPA ID Number 2-028-02				F. Transporter's Phone ()	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001) 501				G. State Facility's ID	
12. Containers				H. Facility's Phone (716) 226-2411	
a. 001 DM 0006 P D001					
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above	
				R <input type="checkbox"/>	
15. Special Handling Instructions and Additional Information 8936 08758013 519056 2-028-02-1406 07					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. (If I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.)					
Printed/Typed Name STEVE FRIGA		Signature <i>Steve Friga</i>		Mo. Day Year 09 06 89	
17. Transporter 1 (Acknowledgement of Receipt of Materials)					
Printed/Typed Name DAN SHERMAN		Signature <i>Daniel R. Sherman</i>		Mo. Day Year 09 06 89	
18. Transporter 2 (Acknowledgement of Receipt of Materials)					
Printed/Typed Name S.		Signature		Mo. Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.					
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 09 06 89	

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Environmental Conservation (518) 457-7362.

NY A 983654-8

2-028-02



STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2059-0039, Expires 9-30-91

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981B77020	Manifest Document No. 24482	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NYA 979829-8	
4. Generator's Phone 716 248-1800		6. US EPA ID Number ILD 051060408		B. Generator's ID SAME	
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		8. US EPA ID Number		C. State Transporter's ID NYM62372	
7. Transporter 2 (Company Name)		10. US EPA ID Number		D. Transporter's Phone 716) 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414				E. State Transporter's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001)				F. Transporter's Phone ()	
12. Containers				G. State Facility's ID	
13. Handling Codes for Wastes Listed Above				H. Facility's Phone 716) 226-2411	
14. Special Handling Instructions and Additional Information 8948 10911048 424482 2-028-02-1406 07				I. Waste No.	
15. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Or, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.				K. Handling Codes for Wastes Listed Above	
16. Generator's Name and Mailing Address STEVE FRIGA				a. <input checked="" type="checkbox"/> R	
17. Transporter 1 (Acknowledgement of Receipt of Materials) DAN SHERMAN				c. <input type="checkbox"/>	
18. Transporter 2 (Acknowledgement of Receipt of Materials)				b. <input type="checkbox"/>	
19. Discrepancy Indication Space				d. <input type="checkbox"/>	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Elaine Frank				Mo. Day Year	

In case of emergency or spill immediately call the National Response Center (800) 424-9302 and the N.Y. Department of Environmental Conservation (518) 457-7362.

GENERATOR

TRANSPORTER

FACILITY

NYA 979829-8

2-028-02



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-91

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 17693	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392			A. State Manifest Document Number NY A 975704-5		
4. Generator's Phone (716) 248-1800			B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD051060408		C. State Transporter's ID NYM62372	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414			10. US EPA ID Number NYD980753784		E. State Transporter's ID
			11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		F. Transporter's Phone ()
			12. Containers		G. State Facility's ID
			No.	Type	H. Facility's Phone
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001) 501			001	DM	716) 226-2411
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a			a <input checked="" type="checkbox"/> c <input type="checkbox"/>		
b			b <input type="checkbox"/> d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 8932 08072514 217693 2-028-02-1406 07					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Or, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name MARSHALL BROOKS		Signature <i>M. Brooks</i>		Mo. Day Year 080789	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name DAN SHERMAN		Signature <i>Daniel R. Sherman</i>		Mo. Day Year 0810789	
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name IRENE KENNEY					
		Signature <i>Irene Kenney</i>		Mo. Day Year 080789	

in case of emergency or spill, immediately call the National Response Center (800) 424-2302 and the N.Y. Department of Environmental Conservation (518) 457-7352.

NY A 975704-5



2-028-02

STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-91

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 1981877020	Manifest Document No. 20232	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.		
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392			A. State Manifest Document Number NY A 976385-2				
4. Generator's Phone 714 248-1800		6. US EPA ID Number		B. Generator's ID SAME			
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		7. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		C. State Transporter's ID NYML2732			
7. Transporter 2 (Company Name)		8. US EPA ID Number ILD 051060408		D. Transporter's Phone (716) 226-2411			
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number 2-028-02 NYD 980753784		E. State Transporter's ID			
				F. Transporter's Phone ()			
				G. State Facility's ID			
				H. Facility's Phone (716) 226-2411			
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	13. Type	14. Quantity	15. Unit (Wt/Vol)	16. Waste No.	
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001)		001	DM	0008.6	P	D001	
b.							
c.							
d.							
NOTICE IN ACCORDANCE WITH 40 CFR 268.7, THE GENERATOR PROVIDES NOTICE THAT THE WASTE DESCRIBED AS 'WASTE PETROLEUM NAPHTHA' IS A RESTRICTED WASTE. THE WASTE CONTAINS THE FOLLOWING CONSTITUENTS WHOSE TREATMENT STANDARDS ARE NOTED: TOTAL HALOGENATED ORGANIC COMPOUNDS (1000 MG/L); LEAD (300 MG/L)				K. Handling Codes for Wastes Listed Above			
				a.	<input checked="" type="checkbox"/>	c.	<input type="checkbox"/>
				b.	<input type="checkbox"/>	d.	<input type="checkbox"/>
14. Special Handling Instructions and Additional Information 8944 10189041 120232 2-028-02-1406 07							
15. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.							
Printed/Typed Name THOMAS CASTER		Signature <i>Thomas Caster</i>		Mo. Day Year 10 03 1989			
Printed/Typed Name DAN SHEPMAN		Signature <i>Dan Shepman</i>		Mo. Day Year 10 30 1989			
Printed/Typed Name		Signature		Mo. Day Year			
19. Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.							
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 10 30 1989			

In case of emergency or spill immediately call the National Response Center (800) 424-9802 and the N.Y. Department of Environmental Conservation (518) 485-2222.

GENERATOR

TRANSPORTER

FACILITY

NYA 976385-2



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0032, Expires 9/30/91

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD 981877020	Manifest Document No. 19400	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NYA 968364-9	
4. Generator's Phone (716) 248-1800				E. Generator's ID SAME	
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD 051060408		C. State Transporter's ID NYML2373	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414				10. US EPA ID Number NYD 980753784	
11. US DOT Description (including Proper Shipping Name, Hazard Class and ID Number)				12. Containers	
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001)				13. Quantity (Gross Weight)	
				14. Waste No.	
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above	
15. Special Handling Instructions and Additional Information: 8940 09457599 819400 2-028-02-1406 07				SKDOT# A: 501 B: C: D:	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Or, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.				Printed/Typed Name STEVE FRIGA	
17. Transporter 1 (Acknowledgement of Receipt of Materials)				Signature <i>Steve Friga</i>	
18. Transporter 2 (Acknowledgement of Receipt of Materials)				Signature <i>Dan Sherman</i>	
19. Discrepancy Indication Space				Mo. Day Year 10/02/89	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.				Signature <i>Irene Kenney</i>	
				Mo. Day Year 10/02/89	

In case of emergency or spill immediately call the National Response Center (800) 721-6302 and the N.Y. Department of Environmental Conservation (518) 457-7332.

GENERATOR

TRANSPORTER

FACILITY

NYA 968364-9



2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF HAZARDOUS SUBSTANCES REGULATION
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0030, Expires 9/30/91

Please print or type.

In case of emergency or spill immediately call the National Response Center: (800) 424-9302 and the N.Y. Department of Environmental Conservation (518) 457-7352.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981B77020	Manifest Document No. 19793	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY A 957311-8		
4. Generator's Phone 716 248-1800				B. Generator's ID SAME		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD051060408		C. State Transporter's ID NYML2773		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone 716 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number 2-028-02		E. State Transporter's ID		
		10. US EPA ID Number NYD980753784		F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone 716 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		I. Waste No.		
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001) 501		No.	Type	Quantity	Unit Wt/Vol	Waste No.
		001	DM	0.0086	P	D001
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
				<input checked="" type="checkbox"/> R <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> B <input type="checkbox"/> E <input type="checkbox"/> F		
15. Special Handling Instructions and Additional Information		8928 07407455 919793 2-028-02-1406 07				
16. GENERATOR'S CERTIFICATION: I, hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. If, I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name STEVE FRIGA		Signature <i>Steve Friga</i>		Mo. Day Year 07/1/89		
17. Transporter 1 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name DAN SHEPHERD		Signature <i>Daniel R Sherman</i>		Mo. Day Year 07/1/89		
18. Transporter 2 (Acknowledgement of Receipt of Materials)						
Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 07/2/89		

NYA 957311-8

2-028-02

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0279 Expires 9-30-91

Please print or type

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Mandatory Document No. 23360	2. Page 1 of 1 1	Information in the shaded areas not required by Federal Law
SOMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD 716 248-1800		SOMERVILLE NY 14534-1392		A. State Manifest Document Number NY A 952003-1	
SAFETY-KLEEN CORP.		ILD051060408		SAME NYA 9373 716 226-2411	
SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		2-028-02 NYD980753784		716 226-2411	
WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001) 501		001 DM 00086 P D001			

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FORM 351 (REVISED 1-82) USE PREVIOUS EDITIONS

HAZARDOUS WASTE MANIFEST

P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-91

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877Q20	Manifest Document No. 25782	2. Page 1 of 1	Information in the shaded areas not required by Federal Law.
3. Generator's Name and Mailing Address SUMMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NY A 946523-2	
4. Generator's Phone 716 248-1800				B. Generator's ID SAME	
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD051060408		C. State Transporter's ID NY ML2375	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone 716 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1325 WEST HENRIETTA RD AVON, NY 14414				E. State Facility's ID NYD980753784	
10. DOT Description (Use Adoptive Exemption Number if Applicable) WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001) 501				F. Facility's Phone 716 226-2411	
				G. Waste No. D001	
				H. Manifest Type DM	
				I. Manifest Number 001 00086	

NY State Department of Transportation (516) 457-7382

NY STATE DEPARTMENT OF TRANSPORTATION

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NY STATE DEPARTMENT OF TRANSPORTATION

DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039 Expires 9-30-91

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UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No.	Page 1 of 1	Information in the shaded areas is not required by Federal Law.
	NYD981877020	32701		
3. Generator's Name and Mailing Address			A. State Manifest Document Number	
SUPERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392 716 248-1800			NYA 941759-8	
4. Generator's Phone	5. Transporter 1 (Company Name)		SAME	
716 248-1800	SAFETY-KLEEN CORP.		NYML2373 716 226-2411	
7. Transporter 1 (Company Name)				
9. Designated Facility Name and Site Address				
SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414			2-028-02 NYD980753784 716 226-2411	
WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001) 501				
001 DM P D001 00086				

N.Y. Department of Transportation (518) 457-7382

R

CALL (518) 457-7382 FOR ASSISTANCE

2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No.	Manifest No.	1
Generator's Name and Mailing Address		NYD981877020	02927	NY A 937012-4
SUMMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD		NY 14534-1392		
Telephone: Phone	716 248-1800			SAME
Transporter's Name and Address				NYML 2373 716 226-2411
SAFETY-KLEEN CORP.		ILD051060408		
SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD	2-028-02	NYD980753784		716 226-2411
AVON, NY	14414			
WASTE PETROLEUM NAPHTHA. LIQUID UN1255 (EPA D001)	COMBUSTIBLE 501			001 DM 00080 P D001

Form HWM-101 (Rev. 10/80) 157-7362



STATE OF NEW YORK
 DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
 P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0025 Expires 9/30/91

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UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 73717	2. State 1 <small>Information in the shaded areas is not required by Federal Law</small>
3. Generator's Name and Mailing Address SUMMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD		NY 14534-1392	NY A 932582-2
4. Generator's Telephone Number 716 248-1800	SAFETY-KLEEN CORP.	ILD051060408	SAME NYLV6673 716 226-2411
SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY	14414	2-028-02 NYD980753784	716 226-2411
WASTE PETROLEUM NAPHTHA, LIQUID UN1255 (EPA D001)	COMBUSTIBLE 501	DM	P D001 001 00080

10-607-7482



2-028-02

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039 Expires 9-30-88

9/30/91

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UNIFORM HAZARDOUS WASTE MANIFEST	Generator's US EPA ID No NYD981877020	Manifest No. 46331	Page 1	Operation in the shaded areas not required by Federal Law.
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SUMMERVILLE PACKAGING
3750 MONROE AVE
PITTSFORD 716 248-1800

NY 14534-1392

NY A 926348-5

SAFETY-KLEEN CORP.

ILD051060408

NYLV6673
716 226-2411

SAFETY-KLEEN CORP.
1525 WEST HENRIETTA RD
AVON, NY 14414

2-028-02

NYD980753784

716 226-2411

WASTE PETROLEUM NAPHTHA,
LIQUID UN1255 (EPA D001)

COMBUSTIBLE
501

DM P D001
001 0008

716 226-2411

020342-1

Somerville

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039 Expires 9-30-88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. N Y D 9 8 1 8 7 7 0 2 0 1	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address Somerville Packaging 3750 Monroe Avenue - Pittsford, NY 14635 716 248-1800		A. State Manifest Document No. NY A740423 7		B. Generator's ID Same	
Northeast Environmental Services NY D 0 5 7 7 7 0 1 0 9		NY - AH6225		315 697-3979	
Northeast Environmental Services, Inc. Canal Road Wampsville, NY 13163		NY D 0 5 7 7 7 0 1 0 9		315 697-3979	
Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993	(D001)RQ	006 D M 00330	G	D001	
Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993		001 D M 00055	G	F005	
Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993	(D001)RQ	000 D M 00000	G	D001	
Isopropanol	Ink		B	B	
Toluene			B		
a) 7519-D-A002	c) 7519-E-A005			7519-2-89	
b) 7519-F-A001					

457-7362

Alfred...
Alfred...
05/839
05/839
USIPA

NY A 740423 7

DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039 Expires 9-30-86

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. N Y D 9 8 1 8 7 7 0 2 0	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address Somerville Packaging 3750 Monroe Avenue - Pittsford, NY 14635				A. State Manifest Document No. NY A721999 8	
4. Generator's Phone: 716 248-1800				B. Generator's ID Same	
5. Transporter's Company Name Northeast Environmental Services		EPA ID Number N Y D 0 5 7 7 7 0 1 0 9		C. State Transporter's ID NY - AH6225	
6. Transporter's Address and Service Location Northeast Environmental Services, Inc. Canal Road Wampsville, NY 13163		EPA ID Number N Y D 0 5 7 7 7 0 1 0 9		F. Transporter's Phone: 315 697-3979	
Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993		(D001)RQ	013 D M 00715 G	D001	
Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993			005 D M 00275 G	F005	
Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993		(D001)RQ	001 D M 00255 G	D001	
Isopropanol		Ink		B B	
Toluene				B	
a) 7519-E-A002 c) 7519-E-A005				7519-1-89	
b) 7519-E-A001					

NY A 721999 8

Thomas J. Conradi
William J. Conradi

Sharon Smith
Allen Sutanga

32287
032289

David J. Conradi

David J. Conradi

032289

Form Approved OMB No. 2050-0039 and the NY Department of Transportation (518) 457-7362

2-028-02



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

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

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981477020	Manifest Document No. 286071	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address SUMMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392			A. State Manifest Document Number NY A 921339-9		
4. Generator's Phone (716) 248-1800			B. Generator's ID		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD0510604081		C. State Transporter's ID NYM02372	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1325 WEST HENRIETTA RD AVON, NY 14414			10. US EPA ID Number 2-028-02		E. State Transporter's ID
			11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		F. Transporter's Phone ()
			12. Containers No. Type		G. State Facility's ID
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001) 501			13. Total Quantity 001 00080		H. Facility's Phone (716) 226-2411
			14. Unit Wt/Vol P		I. Waste No. D001
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a			a <input checked="" type="checkbox"/> R		
b			b <input type="checkbox"/>		
c			c <input type="checkbox"/>		
d			d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 8852 02983450 728607 2-028-02-1406 06					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name D. Buske		Signature D.W. Buske		Mo. Day Year 11 22 1988	
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name DAN SHERMAN		Signature Daniel Sherman		Mo. Day Year 11 22 1988	
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.					
Printed/Typed Name IRENE KENNEY		Signature Irene Kenney		Mo. Day Year 11 22 1988	

In case of emergency or spill immediately call the National Response Center (NRC) 424-8802 and the N.Y. Department of Transportation (609) 457-7332.

NYA 921339-9

2-028-02



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

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

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020		Manifest Document No. 021588		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.					
3. Generator's Name and Mailing Address SUMMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392						A. State Manifest Document Number NYA 920072-2							
4. Generator's Phone 716 248-1800						B. Generator's ID							
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.				6. US EPA ID Number ILD051060408		C. State Transporter's ID NYML2372							
7. Transporter 2 (Company Name)				8. US EPA ID Number		D. Transporter's Phone (716) 226-2411							
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414						10. US EPA ID Number NYD980753784		E. State Transporter's ID					
						10. US EPA ID Number		F. Transporter's Phone ()					
								G. State Facility's ID					
						H. Facility's Phone 716) 226-2411							
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001)						501 001 DM		00080		P		D001	
b.													
c.													
d.													
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
a						b <input checked="" type="checkbox"/> R <input type="checkbox"/>							
b						c <input type="checkbox"/> <input type="checkbox"/>							
15. Special Handling Instructions and Additional Information						8848 C0000000 402588 2-028-02-1406 06							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name STEVE FRIGA				Signature Steve Friga				Mo. Day Year 12 20 88					
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name DAN SHARMAN				Signature Daniel R. Sharman				Mo. Day Year 12 20 88					
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name				Signature				Mo. Day Year					
19. Discrepancy Indication Space													
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 15. Printed/Typed Name IRENE KENNEY													
Signature Irene Kenney				Mo. Day Year 12 20 88									

In case of emergency or spill immediately call the National Response Center (800) 424-6802 and the N.Y. Department of Transportation (516) 457-7662.

NYA 920072-2

2-028-02

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

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

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020		Manifest Document No. 178067		2. Page 1 of 1		Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address SUMMERVILLE PACKAGING 3750 MONROE AVE. PITTSFORD NY 14534-1392				4. Generator's Phone 716 248-8048		5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD051060408	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414				10. US EPA ID Number NYD980753784		7. Transporter 2 (Company Name)		8. US EPA ID Number	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers		13. Total Quantity		14. Unit Wt/Vol	
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID (EPA D001)				No. 501		Type DM		Waste No. D001	
b.									
c.									
d.									
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		a. <input checked="" type="checkbox"/>		c. <input type="checkbox"/>	
b.				d.		b. <input type="checkbox"/>		d. <input type="checkbox"/>	
15. Special Handling Instructions and Additional Information				8844 C000000 078067 2-028-02-1406 06					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name S. FRIGA				Signature <i>S. Friga</i>		Mo. Day Year 11/10/88			
17. Transporter 1 (Acknowledgment of Receipt of Materials)				Printed/Typed Name VAN SHERMAN		Signature <i>Daniel R Sherman</i>		Mo. Day Year 11/10/88	
18. Transporter 2 (Acknowledgment of Receipt of Materials)				Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.									
Printed/Typed Name IRENE KENNEY				Signature <i>Irene Kenney</i>		Mo. Day Year 11/10/88			

In case of emergency or spill immediately call the National Response Center (800) 424-6332 and the N.Y. Department of Transportation (516) 457-7362.

NYA 910871-88

48-14-1 (9/86)

2-028-02



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

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

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NY0681477024	Manifest Document No. 15164157	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address WASTE BLACK STONE PACK CORP SUMMERVILLE PACKAGING 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NYA 905899-4		
4. Generator's Phone (716) 248-8848 1800				B. Generator's ID		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP		6. US EPA ID Number 11 DQ810604081		C. State Transporter's ID NYLV6673		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1925 WEST HENRIETTA RD AUBURN NY 14414		10. US EPA ID Number NYD980793784		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone 716 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)			12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001)			501	001 DM	00080	P D001
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a.				a <input checked="" type="checkbox"/> c <input type="checkbox"/>		
b.				b <input type="checkbox"/> d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 8840 00000000 756457 2-028-02-1406 06						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name JAMES BEEBE		Signature <i>James Beebe</i>		Mo. Day Year 11 05 88		
17. Transporter 1 (Acknowledgment of Receipt of Materials) Printed/Typed Name T. RYAN		Signature <i>T. Ryan</i>		Mo. Day Year 11 05 88		
18. Transporter 2 (Acknowledgment of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name IRENE KENNEY						
		Signature <i>Irene Kenney</i>		Mo. Day Year 11 05 88		

In case of emergency or spill immediately call the National Response Center (800) 424-9302 and the N.Y. Department of Transportation (516) 457-7392.

In case of emergency or spill immediately call the National Response Center (800) 424-9302 and the N.Y. Department of Transportation (516) 457-7392.

NYA 905899-4

2-028-02



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-89

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 131718187	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK COR 3750 MONROE AVE PITTSFORD NY 14534-1392				A. State Manifest Document Number NYA 903250-1		
4. Generator's Phone (716) 248-8048				B. Generator's ID		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD051060408		C. State Transporter's ID 44145272		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number NYD980753784		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.	
a. WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID (EPA D001)		501	001	DM	P	D001
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a.				R		
b.				c		
c.				d		
d.						
15. Special Handling Instructions and Additional Information 8836 C0000000 434884 2-028-02-1406 06						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and collect the best waste management method that is available to me and that I can afford.						
Printed/Typed Name JAMES BEEBE		Signature <i>James Beebe</i>		Mo. Day Year *10/11/3/88		
17. Transporter 1 (Acknowledgement of Receipt of Materials) Printed/Typed Name THOMAS L WALKER		Signature <i>Thomas L Walker</i>		Mo. Day Year 2/9/13/88		
18. Transporter 2 (Acknowledgement of Receipt of Materials) Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space *16 Generator date not on copies 6, 7 + 8						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name IRENE KENNEY						
Signature <i>Irene Kenney</i>		Mo. Day Year 09/13/88				

In case of emergency or spill, immediately call the National Response Center (800) 424-9302 and the N.Y. Department of Transportation (516) 457-7362.

In case of emergency or spill, immediately call the National Response Center (800) 424-9302 and the N.Y. Department of Transportation (516) 457-7362.

NYA 903250-1



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved OMB No. 2050-0039, Expires 9-30-89

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 105485	2. Page 1 of 1	information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK COR 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NYA 898462-1		
4. Generator's Phone (716) 248-8048				B. Generator's ID		
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD051060408		C. State Transporter's ID NY 126673		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411		
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number NYD980753784		E. State Transporter's ID		
				F. Transporter's Phone ()		
				G. State Facility's ID		
				H. Facility's Phone (716) 226-2411		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number) WASTE PETROLEUM NAPHTHA COMBUSTIBLE LIQUID UN1255 (EPA D001) 501				12. Containers No. 001	13. Total Quantity DM 00080	14. Unit Wt/Vol P
				1. Waste No. D001		
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a				a <input checked="" type="checkbox"/> R <input type="checkbox"/>		
b				b <input type="checkbox"/> c <input type="checkbox"/>		
c				c <input type="checkbox"/> d <input type="checkbox"/>		
d				d <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information 8832 0259298 105485 2-028-02-1406 06						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name Fab. Arenas		Signature <i>Fab. Arenas</i>		Mo. Day Year 08/12/88		
Printed/Typed Name TRYAN		Signature <i>Tryan</i>		Mo. Day Year 08/12/88		
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 08/12/88		

GENERATOR

TRANSPORTER

FACILITY

NYA 898462-1

In case of emergency or spill, immediately call the National Response Center (800) 424-9602 and the N.Y. Department of Transportation (618) 457-7362.
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Please print or type.

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. NYD981877020	Manifest Document No. 180767	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address ROLPH-CLARK-STONE PACK CORP 3750 MONROE AVE PITTSFORD NY 14534				A. State Manifest Document Number NYA 897138-9	
4. Generator's Phone (716) 248-8048				B. Generator's ID	
5. Transporter 1 (Company Name) SAFETY-KLEEN CORP.		6. US EPA ID Number ILD051060408		C. State Transporter's ID UYML2372	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (716) 226-2411	
9. Designated Facility Name and Site Address SAFETY-KLEEN CORP. 1525 WEST HENRIETTA RD AVON, NY 14414		10. US EPA ID Number NYD980753784		E. State Transporter's ID	
				F. Transporter's Phone ()	
				G. State Facility's ID	
				H. Facility's Phone (716) 226-2411	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. WASTE PETROLEUM NAPHTHA, COMBUSTIBLE LIQUID, UN1255 (EPA, D001) 501			No. Type		
			01 DM	501	P
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above		
a.			a. <input checked="" type="checkbox"/> R		
b.			b. <input type="checkbox"/>		
b. 2-028-02-1406 BPT 780767 TERR 0606 WK 8828			c. <input type="checkbox"/>		
15. Special Handling Instructions and Additional Information			d. <input type="checkbox"/>		
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name X JAMES BEEBE		Signature <i>James Beebe</i>		Mo. Day Year 12/1/88	
17. Transporter 1 (Acknowledgment of Receipt of Materials)					
Printed/Typed Name X DANIEL DEVRIES		Signature <i>Daniel Devries</i>		Mo. Day Year 12/1/88	
18. Transporter 2 (Acknowledgment of Receipt of Materials)					
Printed/Typed Name X JANE		Signature		Mo. Day Year	
19. Discrepancy Indication Space *Box 18 - CUSTOMER SIGNED IN WORK SPACE					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.					
Printed/Typed Name IRENE KENNEY		Signature <i>Irene Kenney</i>		Mo. Day Year 12/1/88	

EPA Form 8700-22 (Rev. 9-86) Previous edition is obsolete.

COPY 1-Disposer State-Mailed by TSD Facility

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STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMB No. 2050-0059. Expires 9-30-88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. N Y D 9 8 1 1 8 7 7 0 2 0	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.	
3. Generator's Name and Mailing Address Rolph-Clark-Stone Packaging Company 3750 Monroe Avenue - Pittsford, NY 14635				A. State Manifest Document No. NY A741762 9		
4. Generator's Phone (716) 248-1800				B. Generator's ID Same		
5. Transporter 1 (Company Name) Northeast Environmental Services		6. US EPA ID Number N Y D 0 5 7 7 7 0 1 0 9		C. State Transporter's ID NY - AH6225		
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (315) 697-3979		
9. Designated Facility Name and Site Address Northeast Environmental Services, Inc. Canal Road Wampsville, NY 13163				10. US EPA ID Number N Y D 0 5 7 7 7 0 1 0 9		E. State Transporter's ID
				F. Transporter's Phone ()		G. State Facility's ID
				H. Facility's Phone (315) 697-3979		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity	14. Unit	15. Waste No.
a. Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993 (D001)RQ		0017 D M		00385	G	D001
b. Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993 (D001)RQ		002 D M		00110	G	D001
c. Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993		005 D M		00220	G	F005
d.						
J. Additional Descriptions for Materials listed Above				K. Handling Codes for Wastes Listed Above		
a. Isopropanol		c. Toluene		B B		
b. Ink		d.		L		
15. Special Handling Instructions and Additional Information e) 7519-E-A009 Waste Ink Non-Hazardous NY HC = L 5 x 55 gal. DM				f) 7519-E-A008 Waste Glue Non-Hazardous NY HC = L 5 x 55 gal. DM 7519-3-88		
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Printed/Typed Name MARSHALL A. BAKER		Signature Marshall A. Baker		Mo. Day Year 10 7 15 88		
17. Transporter 1 (Acknowledgment of Receipt of Materials)				Signature Allen Snetsinger		
Printed/Typed Name Allen Snetsinger		Signature Allen Snetsinger		Mo. Day Year 10 7 15 88		
18. Transporter 2 (Acknowledgment of Receipt of Materials)				Signature		
Printed/Typed Name		Signature		Mo. Day Year		
19. Discrepancy Indication Space K6 = B						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name KIMMUND A. GUNDERMAN		Signature Kimmund A. Gunderman		Mo. Day Year 10 7 15 88		

In case of emergency or spill immediately call the National Response Center (800) 424-6802 and the N.Y. Department of Transportation (516) 457-7352.

NY A 741762 9



STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE
HAZARDOUS WASTE MANIFEST
P.O. Box 12820, Albany, New York 12212

Form Approved. OMD No. 2050-0039. Expires 9-30-88

Please print or type.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA No. N Y D 9 1 8 1 8 7 7 0 2 0	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law.
3. Generator's Name and Mailing Address Somerville Packaging Company (Formerly Rolph-Clark Stone) 3750 Monroe Avenue Pittsford, NY 14635 Pkg. Co.)				A. State Manifest Document No. NY A722439 9	
4. Generator's Phone (716 248-1800				E. Generator's ID Same	
5. Transporter 1 (Company Name) Northeast Environmental Services		6. US EPA ID Number N Y D 0 5 7 7 0 1 0 9		C. State Transporter's ID NY - A H 6225	
7. Transporter 2 (Company Name)		8. US EPA ID Number		D. Transporter's Phone (315) 697-3979	
9. Designated Facility Name and Site Address Northeast Environmental Services, Inc. Canal Road Wampsville, NY 13163				10. US EPA ID Number N Y D 0 5 7 7 0 1 0 9	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers	13. Total Quantity
				No. Type	Unit
a. Waste Flammable Liquid, n.o.s. Flammable Liquid UN1993				206 D I M	00330 G
b. Waste Flammable Liquid, n.o.s. Flammable Liquid (D001)RQ UN1993				0102 D I M	00110 G
c. Waste Flammable Liquid, n.o.s. Flammable Liquid (D001)RQ UN1993				0114 D I M	00770 G
d.					
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above	
a. Toluene				b. B	
c. Isopropanol				d. T	
b. Ink				L	
15. Special Handling Instructions and Additional Information					
a) 7519-E-A001		c) 7519-E-A002		7519-5-88	
b) 7519-E-A005					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and state laws and regulations. If I am a large quantity generator, I certify that I have program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR if I am a small generator, I have made a good faith effort to minimize my waste and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name THOMAS BOOTH		Signature Thomas Booth		Mo. Day Year 12 19 88	
17. Transporter 1 (Acknowledgment of Receipt of Materials)					
Printed/Typed Name Allen Snetsinger		Signature Allen Snetsinger		Mo. Day Year 12 19 88	
18. Transporter 2 (Acknowledgment of Receipt of Materials)					
Printed/Typed Name		Signature		Mo. Day Year	
19. Discrepancy Indication Space Ke = B, T					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 15.					
Printed/Typed Name David J Chmielewski		Signature David J Chmielewski		Mo. Day Year 12 19 88	

In case of emergency or spill immediately call the National Response Center (800) 424-9302 and the N.Y. Department of Transportation (516) 457-7262.

NY A 722439 9

BRS Edit Record

Date Edit began:

8/24/94

Reviewer:

MW/K

BRS edit complete:

EPA I.D.

NYD 981 877020

Sec VI	GENERATOR STATUS
<p>A. 1993 RCRA generator status - Instructions, Page 8 (check one box below)</p> <p><input checked="" type="checkbox"/> 1. LOG (Skip to Sec VII)</p> <p><input type="checkbox"/> 2. SOG</p> <p><input type="checkbox"/> 3. CESOG</p> <p><input type="checkbox"/> 4. Non generator (CONTINUE TO BOX B)</p>	<p>B. Reason for not generating - Instructions, Page 9 (Check all that apply)</p> <p><input type="checkbox"/> 1. Never</p> <p><input type="checkbox"/> 2. No longer in business</p> <p><input type="checkbox"/> 3. Only excluded or delisted waste</p> <p><input type="checkbox"/> 4. Only non-hazardous</p> <p><input type="checkbox"/> 5. Periodic or occasional generator</p> <p><input type="checkbox"/> 6. Waste minimization activity</p> <p><input type="checkbox"/> 7. Other (Specify in comments box)</p>

Sec VII	ON-SITE WASTE MANAGEMENT STATUS	
<p>A. RCRA permitted or interim status storage Instructions, Page 10</p> <p style="text-align: center;">1</p>	<p>B. RCRA permitted or interim status treatment, disposal, or recycling - Instructions, Page 10</p> <p style="text-align: center;">1</p>	<p>C. RCRA-exempt treatment, disposal, or recycling Instructions, Page 11</p> <p style="text-align: center;">1</p>

Sec VIII	WASTE REDUCTION ACTIVITY DURING 1993	
<p>A. Did this site begin or expand a source reduction activity during 1993? - Instructions, Page 11</p> <p><input checked="" type="checkbox"/> 1. Yes</p> <p><input type="checkbox"/> 2. No</p>	<p>B. Did this site begin or expand a recycling activity during 1993? - Instructions, Page 11</p> <p><input checked="" type="checkbox"/> 1. Yes</p> <p><input type="checkbox"/> 2. No</p>	<p>C. Did this site systematically investigate opportunities for source reduction or recycling during 1993? Instructions, Page 12</p> <p><input checked="" type="checkbox"/> 1. Yes</p> <p><input type="checkbox"/> 2. No</p>

D. Did any of the factors listed below delay or limit this site's ability to initiate new or additional source reduction activities in 1993? - Instructions, Page 12 (YOU MUST CHECK YES OR NO FOR EACH ITEM)

Yes	No	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. a. Insufficient capital to install new source reduction equipment or implement new source reduction practices
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. 2. b. Lack of technical information on source reduction techniques applicable to the specific production processes
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. 2. c. Source reduction is not economically feasible, cost savings in waste management or production will not recover the capital investment
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. 2. d. Concern that the product quality may decline as a result of source reduction
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. 2. e. Technical limitations of the production processes.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. 2. f. Permitting burdens
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. 2. g. Source reduction previously implemented - additional reduction does not appear to be technically feasible
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. 2. h. Source reduction previously implemented - additional reduction does not appear to be economically feasible
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. 2. i. Source reduction previously implemented - additional reduction does not appear to be feasible due to permitting requirements
<input type="checkbox"/>	<input type="checkbox"/>	2. 2. j. Other (specify in comments box below)

E. Did any of the factors listed below delay or limit this site's ability to initiate new or additional onsite or offsite recycling activities in 1993? Instructions, Page 12 (YOU MUST CHECK YES OR NO FOR EACH ITEM)

Yes	No	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. a. Insufficient capital to install new recycling equipment or implement new recycling practices
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. b. Lack of technical information about recycling techniques applicable to this site's specific production processes
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. c. Recycling is not economically feasible, cost savings in waste management or production will not recover the capital investment
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. d. Concern that product quality may decline as a result of recycling.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. e. Requirement to manifest wastes inhibit shipments off site for recycling
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. f. Financial liability provisions inhibit shipments off site for recycling
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. g. Technical limitations of production processes inhibit shipments off site for recycling
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. h. Technical limitations of production processes inhibit on site recycling
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. i. Permitting burdens inhibit recycling
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. j. Lack of permitted off site recycling facilities
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. k. Unable to identify a market for recyclable materials
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. l. Recycling previously implemented, additional recycling does not appear to be technically feasible
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. m. Recycling previously implemented, additional recycling does not appear to be economically feasible
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. n. Recycling previously implemented, additional recycling does not appear to be feasible due to permitting requirements
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. 2. o. Other (specify in the comment box below)

COMMENTS

Sec. VI - Generator Status EPA ID NO. NYD 9811877020

<p>A. 1991 RCRA generator status Instruction page 7 (CHECK ONE BOX BELOW)</p> <p><input checked="" type="checkbox"/> 1 LOG <input type="checkbox"/> (SKIP TO SEC. VII) <input type="checkbox"/> 2 SQG <input type="checkbox"/> <input type="checkbox"/> 3 CESQG <input type="checkbox"/> <input type="checkbox"/> 4 Non generator (CONTINUE TO BOX B)</p>	<p>B. Reason for not generating Page 9 (CHECK ALL THAT APPLY)</p> <p><input type="checkbox"/> 1 Never generated <input type="checkbox"/> 4 Only non-hazardous waste <input type="checkbox"/> 2 Out of business <input type="checkbox"/> 5 Periodic or occasional generator <input type="checkbox"/> 3 Only excluded or deleted waste <input type="checkbox"/> 6 Waste minimization activity <input type="checkbox"/> 7 Other (SPECIFY COMMENTS IN BOX BELOW)</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Sec. VII - On-Site Waste Management Status

<p>A. RCRA permitted or interim status storage Instruction page 10</p> <p style="text-align: center;">/ /</p>	<p>B. RCRA permitted or interim status treatment, disposal, or recycling Page 10</p> <p style="text-align: center;">/ /</p>	<p>C. RCRA-exempt treatment, disposal, or recycling Page 11</p> <p style="text-align: center;">/ /</p>
--------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------

Sec. VIII - Waste Minimization Activity during 1990 or 1991

<p>A. Did this site begin or expand a source reduction activity during 1990 or 1991? Instruction page 11</p> <p><input checked="" type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No</p>	<p>B. Did this site begin or expand a recycling activity during 1990 or 1991? Page 12</p> <p><input type="checkbox"/> 1 Yes <input checked="" type="checkbox"/> 2 No</p>	<p>C. Did this site systematically investigate opportunities for source reduction or recycling during 1990 or 1991? Page 12</p> <p><input checked="" type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No</p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

D. Did any of the factors listed below delay or limit this site's ability to initiate new or additional source reduction activities in 1990 or 1991?
Page 12
(CHECK YES OR NO FOR EACH ITEM)

Yes	No	
<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	a. Insufficient capital to install new source reduction equipment or implement new source reduction practices
<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	b. Lack of technical information on source reduction techniques applicable to the specific production processes
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	c. Source reduction is not economically feasible: cost savings in waste management or production will not recover the capital investment
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	d. Concern that product quality may decline as a result of source reduction
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	e. Technical limitations of the production processes
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	f. Permitting burdens
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	g. Source reduction previously implemented - additional reduction does not appear to be technically feasible
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	h. Source reduction previously implemented - additional reduction does not appear to be economically feasible
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	i. Source reduction previously implemented - additional reduction does not appear to be feasible due to permitting requirements
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	j. Other (SPECIFY COMMENTS IN BOX BELOW)

E. Did any of the factors listed below delay or limit this site's ability to initiate new or additional on-site or off-site recycling activities during 1990 or 1991?
Page 12
(CHECK YES OR NO FOR EACH ITEM)

Yes	No		Yes	No	
<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	a. Insufficient capital to install new recycling equipment or implement new recycling practice	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	h. Technical limitations of production processes inhibit on-site recycling
<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	b. Lack of technical information on recycling techniques applicable to this site's specific production processes	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	i. Permitting burdens inhibit recycling
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	c. Recycling is not economically feasible: cost savings in waste management or production will not recover the capital investment	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	j. Lack of permitted off-site recycling facilities
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	d. Concern that product quality may decline as a result of recycling	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	k. Unable to identify a market for recyclable materials
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	e. Requirements to manifest wastes inhibit shipments off site for recycling	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	l. Recycling previously implemented - additional recycling does not appear to be technically feasible
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	f. Financial liability provisions inhibit shipments off site for recycling	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	m. Recycling previously implemented - additional recycling does not appear to be economically feasible
<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	g. Technical limitations of production processes inhibit shipments off site for recycling	<input type="checkbox"/> 1	<input checked="" type="checkbox"/> 2	n. Recycling previously implemented - additional recycling does not appear to be feasible due to permitting requirements
					o. Other (SPECIFY COMMENTS IN BOX BELOW)

Comments:

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
REGULATORY FEE DETERMINATION UNIT
BOX 5973 GPO
NEW YORK, NEW YORK 10087-5973

INVOICE NUMBER: 157245790000
INVOICE DATE: 06/06/90

OWNER NAME: SOMERVILLE PACKAGING
AND ADDRESS 3750 MONROE AVENUE
ROCHESTER, NY 14534

Address Correction

ENTER CHANGE OF ADDRESS HERE:

By 0981877020

RETURN THIS PAGE WITH YOUR CHECK MADE PAYABLE TO
"NYS ENVIRONMENTAL CONSERVATION" TO THE FOLLOWING ADDRESS:

NYS Department of Environmental Conservation
Regulatory Fee Determination Unit
Box 5973 GPO
New York, New York 10087-5973

|| CHECK HERE IF YOU WISH TO RECEIVE REVISED RULES AND REGULATIONS WHEN AVAILABLE

>>>>

TOTAL ENVIRONMENTAL REGULATORY PROGRAM FEE

TOTAL FEE ASSESSED	PAYMENTS/CREDITS TO DATE	BALANCE
\$ 2,000.00	\$ 2,000.00	\$ 0.00

AMOUNT DUE THIS STATEMENT	PAST DUE AMOUNT	PENALTIES	INTEREST	TOTAL AMOUNT DUE
\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

RECEIVED
FEB 2 4 1992

Office: 2050-0024 Expires: 9/30/92

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME SOMMERVILLE PACKAGING

EPA ID NO. N.Y.01911877020



U.S. ENVIRONMENTAL PROTECTION AGENCY
1991 Hazardous Waste Report

FORM IC

IDENTIFICATION AND CERTIFICATION

INSTRUCTIONS: Read the detailed instructions beginning on page 6 of the 1991 Hazardous Waste Report booklet before completing this form.

SEC. I Site name and location address. Complete items A through H. Check the box in items A, C, E, F, G, and H if same as label; if different, enter corrections. If label is absent, enter information. Instruction page 6

A. EPA ID No. Same as label or N.Y.01911877020 B. County Monroe

C. Site/company name Same as label or Sommerville Packaging D. Has the site name associated with the EPA ID changed since 1989? 1 Yes 2 No

E. Street name and number. If not applicable, enter industrial park, building name or other physical location description. Same as label or 3750 MONROE AVE.

F. City, town, village, etc. Same as label or ROCHESTER G. State Same as label or N.Y. H. Zip Code Same as label or 14538

SEC. II Mailing address of site. Instruction page 6

A. Is the mailing address the same as the location address? 1 Yes (GO TO SEC. III) 2 No (GO TO BOX B)

B. Number and street name of mailing address

C. City, town, village, etc. D. State E. Zip Code

SEC. III Name, title, and telephone number of the person who should be contacted if questions arise regarding this report. Instruction page 6

A. Please print: Last name ONOFREY First name PETER M.I. G B. Title PRESSROOM MANAGER C. Telephone 716 248-1800 Extension

SEC. IV Enter the Standard Industrial Classification (SIC) Code that describes the principal products, group of products, produced or distributed, or the services rendered at the site's physical location. Enter more than one SIC Code only if no one industry description includes the combined activities of the site. Instruction page 7

A. 2752 B. C. D.

SEC. V "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties under Section 3008 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violations."

A. Please print: Last name Onofrey First name Peter M.I. G B. Title PRESSROOM MANAGER

C. Signature Peter Onofrey D. Date of signature 02 21 91 MO DAY YR.

BEFORE COPYING FORM ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME

SOMERVILLE PACKAGING

EPA ID NO.

N.Y.D. 198.118.7.710.2.0



U.S. ENVIRONMENTAL PROTECTION AGENCY

1991 Hazardous Waste Report

FORM GM

WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 13 of the 1991 Hazardous Waste Report booklet before completing this form.

<p>Sec. I A. Waste description Instruction Page 15 WASTE INK</p>						
<p>B. EPA hazardous waste code Page 15 D001</p>				<p>C. State hazardous waste code Page 15</p>		
<p>D. SIC code Page 16 2752</p>	<p>E. Origin code Page 16 System type M0611</p>	<p>F. Source code Page 17 A09</p>	<p>G. Point of measurement Page 17 U</p>	<p>H. Form code Page 17 B604</p>	<p>I. RCRA-radioactive mixed Page 17 2</p>	
<p>J. Reported TRI constituent Page 18 2</p>		<p>K. CAS numbers Page 18</p> <p>1. _____ 2. _____</p> <p>3. _____ 4. _____ 5. _____</p>				

<p>Sec. II A. Quantity generated in 1990 Instruction Page 18 10500.0</p>		<p>B. Quantity generated in 1991 Page 18 9970.0</p>		<p>C. UOM Density Page 19 U</p> <p><input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 kg</p>		<p>D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 19</p> <p><input type="checkbox"/> 1 Yes (CONTINUE TO SYSTEM 1)</p> <p><input checked="" type="checkbox"/> 2 No (SKIP TO SEC. III)</p>	
<p>ON-SITE SYSTEM 1</p> <p>On-site system type Page 19 M</p> <p>Quantity treated, disposed or recycled on site in 1991 _____</p>				<p>ON-SITE SYSTEM 2</p> <p>On-site system type Page 19 M</p> <p>Quantity treated, disposed or recycled on site in 1991 _____</p>			

<p>Sec. III A. Was any of this waste shipped off site in 1991? <input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX B)</p> <p><input type="checkbox"/> 2 No (SKIP TO SEC. IV)</p>							
<p>Site 1 B. EPA ID No. of facility waste was shipped to Page 20 NJ D 002 182 897</p>		<p>C. System type shipped to Page 20 M059</p>		<p>D. Off-site availability code Page 21 U</p>		<p>E. Total quantity shipped in 1991 Page 21 9970.0</p>	
<p>Site 2 B. EPA ID No. of facility waste was shipped to Page 20</p>		<p>C. System type shipped to Page 20 M</p>		<p>D. Off-site availability code Page 21</p>		<p>E. Total quantity shipped in 1991 Page 21</p>	

<p>Sec. IV A. Did new activities in 1991 result in minimization of this waste? Instruction Page 22</p> <p><input type="checkbox"/> 1 Yes (CONTINUE TO BOX B)</p> <p><input checked="" type="checkbox"/> 2 No (THIS FORM IS COMPLETE)</p>									
<p>B. Activity Page 22 W</p>		<p>C. Other effects Page 22</p> <p><input type="checkbox"/> 1 Yes</p> <p><input type="checkbox"/> 2 No</p>		<p>D. Quantity recycled in 1991 due to new activities Page 23 _____</p>		<p>E. Activity/production index Page 23 _____</p>		<p>F. 1991 Source reduction quantity Page 24 _____</p>	

Comments:

ATTACH SITE IDENTIFICATION LABEL OR ENTER BELOW. FOR ADDITIONAL SPACE USE COMMENTS BOX. DO NOT COPY FORM. CALL 518/467-3273 FOR COPIES.



U.S. ENVIRONMENTAL PROTECTION AGENCY

1991 Hazardous Waste Report

WASTE GENERATION AND MANAGEMENT

SITE NAME **SOMMERVILLE**
PACKAGING
 EPA ID No. **NYD 981 877 020**

FORM
GM

INSTRUCTIONS: Read the detailed instructions beginning on page 13 of the 1991 Hazardous Waste Report booklet before completing this form.

Sec. I A. Waste description: **WASTE FOUNTAIN MIX**

B. EPA hazardous waste code: **D001**

C. State hazardous waste code: **1001**

D. SIC code: **2811**

E. Origin code: **M061**

F. Source code: **A**

G. Point of measurement: **1**

H. Form code: **B**

I. RCRA-remedial waste: **2**

J. Reported IR certificate: **2**

K. CAS numbers: 1. **108-90-7** 2. **108-90-7** 3. **108-90-7** 4. **108-90-7** 5. **108-90-7**

Sec. II A. Quantity generated in 1990: **45500**

B. Quantity generated in 1991: **1561001**

C. Page 18

D. Did this site do any of the following to the waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? YES (continue to system 1) NO (skip to SEC. III)

ON-SITE SYSTEM 1 On-site system type: **M** Quantity treated, disposed or recycled on site in 1991: **45500**

ON-SITE SYSTEM 2 On-site system type: **M** Quantity treated, disposed or recycled on site in 1991: **1561001**

Sec. III A. Was any of this waste shipped off site in 1991? YES (continue to box B) NO (skip to SEC. IV)

Site 1 B. EPA ID No. of facility waste was shipped to: **NYD 002 182 897** C. System type shipped to: **M061** D. Off-site availability code: **1** E. Total quantity shipped in 1991: **15610**

Site 2 B. EPA ID No. of facility waste was shipped to: **NYD 002 182 897** C. System type shipped to: **M** D. Off-site availability code: **1** E. Total quantity shipped in 1991: **15610**

Sec. IV A. Did new activities in 1991 result in minimization of this waste? YES (continue to box B) NO (the form is complete)

B. Activity: **W** C. Other Effects: **W** D. Quantity recycled in 1991 due to new activities: **W** E. Activity/production index: **W** F. 1991 Source reduction quantity: **W**

Comments: **YES**

ATTACH SITE IDENTIFICATION LABEL OR ENTER BELOW. FOR ADDITIONAL SPACE USE COMMENTS BOX. DO NOT COPY FORM. CALL 518457-3273 FOR COPIES.



U.S. ENVIRONMENTAL PROTECTION AGENCY

1991 Hazardous Waste Report

WASTE GENERATION AND MANAGEMENT

SITE NAME **SOMMERVILLE**
PACKAGING
 EPA ID No. **NYD981877020**

FORM
GM

INSTRUCTIONS: Read the detailed instructions beginning on page 13 of the 1991 Hazardous Waste Report booklet before completing this form.

Sec. I A. Waste description Instruction Page 16 **WASTE GLUE**

B. EPA hazardous waste code Page 15 **D001** C. State hazardous waste code, Page 16

D. SIC code Page 16

E. Origin code Page 18 System type **M061** F. Source code Page 17 **A** G. Point of measurement Page 17 **1** H. Form code, Page 17 **B210** I. RCRA-radioactive mixed Page 17 **2** J. Reported T98 circuit-break Page 18 **2**

Sec. II K. CAS numbers, Page 18

1. 2. 3. 4. 5.

Sec. II A. Quantity generated in 1990, Page 18 **11905.0** B. Quantity generated in 1991, Page 18 **10270.01** C. Page 18

D. Did this site do any of the following to this waste: treat on site, dispose on site, recycle on site, or discharge to a sewer/POTW? Page 18 1 YES (continue to system 1) 2 NO (skip to SEC. III)

ON-SITE SYSTEM 1 On-site system type **M** Quantity treated, disposed or recycled on site in 1991

ON-SITE SYSTEM 2 On-site system type **M** Quantity treated, disposed or recycled on site in 1991

Sec. III A. Was any of this waste shipped off site in 1991? YES (continue to box B) NO (skip to SEC. IV)

Site 1 B. EPA ID No. of facility waste was shipped to Page 20 **NJD002182897** C. System type shipped to **M061** D. Off-site availability code Page 21 **1** E. Total quantity shipped in 1991 Page 21 **10270.0**

Site 2 B. EPA ID No. of facility waste was shipped to Page 20 **M** C. System type shipped to **M** D. Off-site availability code Page 21 **1** E. Total quantity shipped in 1991 Page 21

Sec. IV A. Did new activities in 1991 result in minimization of this waste? YES (continue to box B) NO (the form is complete)

B. Activity, Page 22 **W W** C. Other Effects Page 22 **W W** D. Quantity recycled in 1991 due to new activities Page 23 **W W** E. Activity/production index Page 23 **W W** F. 1991 Source reduction quantity Page 24

Comments: **YES**

ATTACH SITE IDENTIFICATION LABEL OR ENTER BELOW. FOR ADDITIONAL SPACE USE COMMENTS BOX. DO NOT COPY FORM. CALL 518/467-3273 FOR COPIES.



U.S. ENVIRONMENTAL PROTECTION AGENCY

1991 Hazardous Waste Report

WASTE GENERATION AND MANAGEMENT

FORM

GM

SITE NAME **S O M M E R V I L L E**

P A C K A G I N G

EPA ID No. **N Y D 9 8 1 8 7 7 0 2 0**

INSTRUCTIONS: Read the detailed instructions beginning on page 13 of the 1991 Hazardous Waste Report booklet before completing this form.

<p>Sec. I A. Waste description Instruction Page 16 WASTE SOLVENT</p>									
<p>B. EPA hazardous waste code Page 16 F 0 0 5</p>					<p>C. State hazardous waste code Page 16</p>			<p>D. SIC code Page 16 2 7 5 2</p>	
<p>E. Origin code Page 16 System type M 0 6 1</p>		<p>F. Source code Page 17 A 0 9</p>		<p>G. Point of measurement Page 17 1</p>	<p>H. Form code Page 17 B</p>	<p>I. RCRA-radioactive mixed Page 17 2</p>	<p>J. Reported TR constituent Page 18 2</p>		

K. CAS numbers, Page 18

1.	2.	3.	4.	5.
----	----	----	----	----

<p>Sec. H A. Quantity generated in 1990, Page 18 5 2 7 5 0</p>		<p>B. Quantity generated in 1991, Page 18 6 3 8 5 0 1</p>		<p>C. Page 18</p>	
----------------------------------------------------------------------------------	--	----------------------------------------------------------------------	--	-------------------	--

D. Did the site do any of the following to the waste. Mark an 1 YES (continue to system 1) 2 NO (skip to SEC. III)
 deposit on site, recycle on site, or discharge to a sewer/POTW? Page 18

<p>ON-SITE SYSTEM 1 On-site system type M Quantity treated, disposed or recycled on site in 1991</p>		<p>ON-SITE SYSTEM 2 On-site system type M Quantity treated, disposed or recycled on site in 1991</p>	
--------------------------------------------------------------------------------------------------------------------------------	--	--------------------------------------------------------------------------------------------------------------------------------	--

Sec. III A. Was any of the waste shipped off site in 1991?
 Instruction Page 20 YES (continue to box B) NO (skip to SEC. IV)

<p>Site 1 B. EPA ID No. of facility waste was shipped to Page 20 N J D 0 0 2 1 8 2 8 9 7</p>		<p>C. System type shipped to M 0 6 1</p>	<p>D. Off-site availability code Page 21 1</p>	<p>E. Total quantity shipped in 1991 Page 21 6 3 8 5 0</p>
<p>Site 2 B. EPA ID No. of facility waste was shipped to Page 20</p>		<p>C. System type shipped to M</p>	<p>D. Off-site availability code Page 21</p>	<p>E. Total quantity shipped in 1991 Page 21</p>

Sec. IV A. Did new activities in 1991 result in incineration of the waste?
 Instruction Page 22 YES (continue to box B) NO (this form is complete)

<p>B. Activity, Page 22 W W</p>		<p>C. Other Effects, Page 22</p>		<p>D. Quantity recycled in 1991 due to new activities Page 23</p>		<p>E. Activity/production index Page 23</p>		<p>F. 1991 Source reduction quantity Page 24</p>	
<p>W W</p>									

Comments: **YES**

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME

SOMERVILLE PACKAGING

EPA ID NO.

NYD9811877020



U.S. ENVIRONMENTAL PROTECTION AGENCY

1991 Hazardous Waste Report

OFF-SITE IDENTIFICATION

FORM

01

INSTRUCTIONS: Read the detailed instructions on the back of this page before completing this form.

Site 1 A. EPA ID No. of off-site installation or transporter <u>NYD002182897</u>	B. Name of off-site installation or transporter <u>SAFETY KLEEN Corp.</u>
C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input checked="" type="checkbox"/> TSDR	D. Address of off-site installation Street <u>1200 SYLVAN STREET</u> City <u>LINDEN</u> State <u>(NJ)</u> Zip Code <u>07036</u>

Site 2 A. EPA ID No. of off-site installation or transporter _____	B. Name of off-site installation or transporter _____
C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input type="checkbox"/> TSDR	D. Address of off-site installation Street _____ City _____ State _____ Zip Code _____

Site 3 A. EPA ID No. of off-site installation or transporter _____	B. Name of off-site installation or transporter _____
C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input type="checkbox"/> TSDR	D. Address of off-site installation Street _____ City _____ State _____ Zip Code _____

Site 4 A. EPA ID No. of off-site installation or transporter _____	B. Name of off-site installation or transporter _____
C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input type="checkbox"/> TSDR	D. Address of off-site installation Street _____ City _____ State _____ Zip Code _____

Site 5 A. EPA ID No. of off-site installation or transporter _____	B. Name of off-site installation or transporter _____
C. Handler type (CHECK ALL THAT APPLY) <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input type="checkbox"/> TSDR	D. Address of off-site installation Street _____ City _____ State _____ Zip Code _____

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR LABEL

U.S. ENVIRONMENTAL PROTECTION AGENCY
1990 NYS DEC 1989 Hazardous Waste Report

IDENTIFICATION AND CERTIFICATION

FORM IC

RECEIVED FEB 19 1997
MANIFEST SECTION

SITE NAME SOMERVILLE PACKAGING

EPA ID NO. NY109181181710210

INSTRUCTIONS: Read the detailed instructions beginning on page 7 of the 1989 Hazardous Waste Report booklet before completing this form.

SEC. I Site name and location address. Complete items A through H. Check the box in items A, B, D, E, F, G, and H if same as label; if different, enter corrections. If label is absent, enter information. Instruction page 7.

A. EPA ID No. Same as label or _____

B. Site/company name Same as label or _____

C. Has the site name associated with this EPA ID changed since 1987? 1 Yes 2 No

D. Street name and number. If not applicable, enter industrial park, building name or other physical location description. Same as label 3750 Monroe Ave.

E. City, town, village, etc. Same as label Rochester

F. County Monroe

G. State Same as label NY

H. Zip Code Same as label 14633

SEC. II Mailing address of site. Instruction page 7.

A. Is the mailing address the same as the location address? 1 Yes (SKIP TO SEC. III) 2 No (COMPLETE SEC. II)

B. Number and street name of mailing address

C. City, town, village, etc.

D. State

E. Zip Code

SEC. III Name, title, and telephone number of the person who should be contacted if questions arise regarding this report. Instruction page 7.

A. Please print: Last name ONOFREY

First name PETER

ML G

B. Title Press MAN.

C. Telephone 716 248-1800

Extension _____

SEC. IV Enter the Standard Industrial Classification (SIC) Code that describes the principal products, group of products, produced or distributed, or the services rendered at the site's physical location. Enter more than one SIC Code only if no one industry description includes the combined activities of the site. Instruction page 8.

A. 2752

B. _____

C. _____

D. _____

SEC. V I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. Number of form pages submitted

Form IC 13 **Form GM** _____ **Form WR** _____ **Form PS** _____

B. Please print: Last name ONOFREY

First name PETER

ML G

C. Title Press MANAGER

D. Signature Peter Onofrey

E. Date of signature 02/13/90 02/13/90 02/13/90

NY **NY** **NY**

IDENTIFICATION LABEL

Solvent Packings

Waste Generation and Management



U.S. ENVIRONMENTAL PROTECTION AGENCY
 RECEIVED NYS DEC 1989
 1989 Hazardous Waste Report



FEB 13 1991
 NYS DEC
 WASTE GENERATION AND MANAGEMENT

Read the detailed instructions beginning on page 14 of the 1989 Hazardous Waste Report booklet before completing this form.

A. Waste description
 Instruction Page 16

WASTE GIVE AND INK AND CLEANING SOLVENTS AND WATER SOLUTIONS USED ON PRINTING + GIVING PRESSES

B. Hazardous waste code
 Page 16

D0011 F0011

C. State hazardous waste code
 Page 16

D. Waste quantity
 Page 16

2752

E. Source code
 Page 16

1A01

F. Form code
 Page 16

1812199

G. Origin
 Page 16 Code U

System type MI

H. Treatment
 Page 17

U

I. CAS number
 Page 17

1. _____ 2. _____
 3. _____ 4. _____ 5. _____

Sec. 8	A. Quantity generated in 1989 Instruction Page 17	B. Quantity generated in 1989 Page 17	C. UCM Page 16	D. Density Page 16	E. Was this waste treated, disposed or recycled on site or discharged to a sewer/POTW? Page 16
	_____	_____ <u>119</u>	<u>2</u>	_____ . _____ <input type="checkbox"/> 1 lbs/gal <input type="checkbox"/> 2 kg	<input type="checkbox"/> 1 Yes (CONTINUE TO SYSTEM 1) <input checked="" type="checkbox"/> 2 No (GMP TO SEC. 9)
SYSTEM 1		SYSTEM 2			
System type Page 16 <u>MI</u>		Quantity treated, disposed or recycled in 1989 Page 16 _____		System type Page 16 <u>MI</u>	
		Quantity treated, disposed or recycled in 1989 Page 16 _____			

Sec. 9	A. Was this waste shipped off site? Instruction Page 18		
	<input checked="" type="checkbox"/> 1 Yes (CONTINUE TO BOX 9) <input type="checkbox"/> 2 No (GMP TO SEC. 9)		
Site 1	B. EPA ID No. of facility to which waste was shipped Instruction Page 18	C. System type Page 18	D. Total quantity shipped in 1989 Page 18
	<u>NYD1015717101109</u>	<u>MI0412</u>	_____ <u>5</u>
Site 2	<u>WV1010121110281917</u>	<u>MI0412</u>	_____ <u>114</u>

Sec. 10	A. Waste minimization results in 1989 Instruction Page 20				
	<input type="checkbox"/> 1 Yes (CONTINUE TO BOX 9) <input checked="" type="checkbox"/> 2 No (THIS FORM IS COMPLETE)				
B. Activity Page 21	C. Other efforts Page 21	D. Quantity recycled in 1989 due to new activities Page 21	E. Activity/Production Index Page 21	F. Source Reduction Quantity Page 20	
<u>MI</u> <u>MI</u>	<input type="checkbox"/> 1 Yes <input checked="" type="checkbox"/> 2 No	_____	_____ . _____	_____	
<u>MI</u> <u>MI</u>					

Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER

SITE NAME SOMERVILLE PACKAGING

EPA ID NO. NYD 981 877 020



N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

1992 HAZARDOUS WASTE REPORT

FORM IC

IDENTIFICATION AND CERTIFICATION

INSTRUCTIONS: Read the detailed instructions beginning on page 6 of the Hazardous Waste Report booklet before completing this form.

Sec I SITE NAME AND LOCATION ADDRESS - COMPLETE ITEMS A THROUGH H

A. EPA ID NO. NYD 981 877 702 B. County: Monroe

C. Site/company name: Somerville Packaging D. Has the site name associated with this EPA ID no. changed since 1987? 1. Yes 2. No

E. Street name and number. If not applicable, enter industrial park, building name or other physical location description: 3750 Monroe Avenue

F. City, town, village, etc.: Pittsford G. State: NV H. Zip Code: 14853-0548

Sec II MAILING ADDRESS OF SITE - Instruction on page 6

A. Is the mailing address the same as the location address in "E" above? 1. Yes (skip to section III) 2. No (go to box B)

B. Number and street of mailing address:

C. City, Town, Village, etc.: D. State: E. Zip Code:

Sec III NAME, TITLE AND TELEPHONE NUMBER OF PERSON WHO SHOULD BE CONTACTED ABOUT THIS REPORT - Instruction on page 6

a. Last name	First name	M.I.	B. Title:	c. Telephone:
O'Brien	Harold	I.	Plant Manager	<u>716 248-1800</u>
				Area Code EXT.

Sec IV Enter the standard classification (SIC) code that describes the principal products or group of products, produced or distributed, or the services rendered at the site's physical location. Enter more than one code only if no one industry description includes the combined activities of the site. Instruction page 6

A. 2752 B. C. D.

Sec V CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision, in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties under section 3008 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violations.

a. Last name	First name	M.I.	B. Title:
O'Brien	Harold	I.	Plant Manager
C. Signature: <u>Harold J. O'Brien</u>			D. Date Signed: <u> </u> Mo. <u> </u> Day <u> </u> Year

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:

SITE NAME SOMERVILLE PACKAGING

EPA ID NO. NYD 981 877 020



N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

1992 HAZARDOUS WASTE REPORT

WASTE GENERATION AND MANAGEMENT

FORM GM

INSTRUCTIONS: Read the detailed instructions beginning on page 13 of the Hazardous Waste Report booklet before completing this form.

Sec I A. Waste description - Instructions, Page 15

Waste Ink

B. EPA hazardous waste code Instructions, Page 15 D10D1

C. State hazardous waste code Instructions, Page 16

D. SIC code Page 16 2752

E. Origin Code Page 16 System type M

F. Source code Page 17 A09

G. Point of measurement Page 17 1

H. Form code Page 16 B604

I. RCRA Radioactive waste Page 16 2

J. Reported TRI constituent Page 16 2

K. CAS numbers Page 16
 1. - - 2. - -
 3. - - 4. - - 5. - -

Sec II A. Quantity generated in 1991 Instructions on Page 19

B. Quantity generated in 1992 Instructions on Page 19 26049.0

C. UOM Instr Page 19 Density 1
 1 -/gal. 2 -kg

D. Did the site treat on site, dispose of on site, recycle on site or discharge to a sewer/POTW? Instr. Page 19
 1. Yes (continue to system 1)
 2. No (Skip to Sec. III)

ON-SITE SYSTEM 1
 On-site system type M Quantity treated, disposed of, or recycled on site in 1992

ON-SITE SYSTEM 2
 On-site system type M Quantity treated, disposed of, or recycled on site in 1992

Sec III A. Was any of this waste shipped off site in 1992? Instructions on Page 20
 1. Yes (continue to Box "B")
 2. No (Skip to Sec. IV)

B. EPA ID Number of facility to which waste was shipped: Instr., Page 21
 Site 1 NYD 980 753 784

C. System type shipped to Instr., Page 21 M042

D. Off-site availability code: Instr., Page 21 1

E. Total quantity shipped in 1992 Instr., Page 21 26049.0

B. EPA ID Number of facility to which waste was shipped: Instr., Page 21
 Site 2

C. System type shipped to Instr., Page 21 M

D. Off-site availability code: Instr., Page 21

E. Total quantity shipped in 1992 Instr., Page 21

Sec IV A. Did new activities in 1992 result in minimization of this waste? Instructions on Page 21
 1. Yes (continue to Box "B")
 2. No (This form is now complete)

B. Activity - Instr., Page 22 W W

C. Other effects? Instr., Page 22
 1. Yes
 2. No

D. Quantity recycled in 1992 due to new activities Instr., Page 23

E. Activity/production index: Instr., page 23

F. 1992 source reduction quantity Instr., page 24

Comments: Increase in quantity caused by changing over to vegetable oil based inks in 1992.

FEB 26 1990

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 1989

Page No. 1 of 3

EPA ID NUMBER [REDACTED]

401 CHANGE OF ADDRESS (if necessary)

NAME NYD981877020

STREET SOMERVILLE PACKAGING

CITY ROCHESTER NY 14534

STATE NY

ZIP CODE

TRANSFERS, STORAGE, OR DISPOSAL FACILITY (TSD)?
EPA ID NUMBER [REDACTED]

NAME FRONTIER CHEMICAL WASTE PROCESS INC

TELEPHONE NUMBER (716) 245-8208

STREET 4626 Royal AVE

CITY NIAGARA FALLS

STATE NY

ZIP CODE 14303

WASTE INFORMATION		WASTE NUMBER	HANDLING CODE	QUANTITY (Rounded to Nearest Tenth)
WASTE DESCRIPTION				
WASTE FLAMMABLE LIQUID				16.14
WASTE FLAMMABLE LIQUID				11.19
WASTE INK NON HAZARDOUS				11.10
WASTE GLUE NON HAZARDOUS				11.10

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 205.45 of the Penal Law.

PRINT OR TYPE NAME Peter Quofrey

TITLE Shift Supervisor

SIGNATURE Peter Quofrey

TELEPHONE NUMBER (716) 244-1827

DATE 2/20/90



GENERATOR ANNUAL REPORT

for the year ending December 31, 1989

EPA ID NUMBER [REDACTED]

401

NY098187702C
SOMERVILLE PACKAGING
3750 MONROE AVENUE
ROCHESTER NY 14534

CHANGE OF ADDRESS (if necessary)
NAME
STREET
CITY STATE ZIP CODE

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)
EPA ID NUMBER [REDACTED]

NAME **NORTHEAST ENVIRONMENTAL SERVICES INC** TELEPHONE NUMBER **315-697-3979**

STREET **P.O. BOX 228 CANAL ROAD**

CITY **CANASTOTA** STATE **NY** ZIP CODE **13023-0227**

WASTE INFORMATION			WASTE NUMBER	HANDLING CODE	QUANTITY (Rounded to Nearest Tenth)
WASTE DESCRIPTION					
WASTE FLAMMABLE LIQUID			005	B	
WASTE FLAMMABLE LIQUID					
WASTE INK NON-HAZARDOUS				B	
WASTE GLUE NON-HAZARDOUS					

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 205.45 of the Penal Law.

PRINT OR TYPE NAME **PETER ONOFREY** TITLE **SHIFT Supervisor**

SIGNATURE *Peter Onofrey* TELEPHONE NUMBER **(716) 248-1927** DATE **2/20/90**

FEB 2 1990
FEB 2 1990

GENERATOR ANNUAL REPORT

for the year ending December 31, 1989

Page No. 3 of 3

EPA ID NUMBER [REDACTED]

NYD981877020 SOMERVILLE PACKAGING 3750 MONROE AVENUE ROCHESTER NY 14534	401	CHANGE OF ADDRESS (if necessary) NAME		
		STREET		
		CITY	STATE	ZIP CODE

TRANSPORTATION, STORAGE, OR DISPOSAL FACILITY (TSD/F)
EPA ID NUMBER [REDACTED]

NAME Safety Kleen Corp.	TELEPHONE NUMBER
STREET 1525 WEST HENRIETTA ROAD	
CITY AVON	STATE NY
	ZIP CODE 14414

WASTE INFORMATION

WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (Rounded to Nearest Tenth)
WASTE PETROLEUM NAPHTHA	101011	R	0.00000000

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 205.45 of the Penal Law.

PRINT OR TYPE NAME PETER ONOFREY	TITLE Shift Supervisor
SIGNATURE <i>Peter Onofrey</i>	TELEPHONE NUMBER (716) 248-1427
	DATE 2/20/90



NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 87

Page No. 1 of 3

GENERATOR EPA ID NUMBER NYD16118770210 OR SMALL GENERATOR EXEMPT GENERATOR

NAME ROLPH CLARK STONE PACKAGING TELEPHONE NUMBER 716-248-1800

STREET 3750 MONROE AVE.

CITY ROCHESTER STATE NY ZIP CODE 14534

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)
EPA ID NUMBER NYD101577701109

NAME NORTHEAST ENVIRONMENTAL SERVICES INC. TELEPHONE NUMBER 315-697-3979

STREET P.O. Box 228 - CANAL ROAD

CITY CANASTOTA STATE NY ZIP CODE 13032-0228

WASTE INFORMATION			
WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (in Whole Tons)
WASTE FLAMMABLE LIQUID	F10105	B	0101010103
WASTE FLAMMABLE LIQUID	D10101	B	0101010108
WASTE INK NON - HAZARDOUS	D10101	L	0101010107
WASTE GLUE NON - HAZARDOUS	D10101	L	0101010105

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

PRINT OR TYPE NAME PETER ONOFREY TITLE SHIFT SUPERVISOR
SIGNATURE Peter G. Onofrey DATE 1/21/88

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 87

Page No. 2 of 3

GENERATOR EPA ID NUMBER NYD1918178770210 OR SMALL GENERATOR EXEMPT GENERATOR

NAME	<u>Rolph Clark Stone PKG.</u>			TELEPHONE NUMBER	<u>716-248-1800</u>
STREET	<u>3750 MONROE AVE</u>				
CITY	<u>ROCHESTER</u>			STATE	<u>NY</u>
				ZIP CODE	<u>14534</u>
TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)					
EPA ID NUMBER <u>NYD19181071513184</u>					

NAME	<u>SAFETY KLEEN Corp.</u>			TELEPHONE NUMBER	<u>716-226-2411</u>
STREET	<u>1525 WEST HENRIETTA ROAD</u>				
CITY	<u>AVON</u>			STATE	<u>NY</u>
				ZIP CODE	<u>14414</u>

WASTE DESCRIPTION	WASTE INFORMATION		QUANTITY (in Whole Tons)
	WASTE NUMBER	HANDLING CODE	
<u>WASTE PETROLEUM NAPHTHA</u>	<u>D101011</u>	<u>R</u>	<u>01010101011</u>

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

PRINT OR TYPE NAME	<u>PETER ONOFREY</u>	TITLE	<u>SHIFT SUPERVISOR</u>
SIGNATURE	<u>Peter Onofrey</u>	DATE	<u>1/21/88</u>



NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF SOLID AND HAZARDOUS WASTE

GENERATOR ANNUAL REPORT

for the year ending December 31, 19 87

Page No. 3 of 3

GENERATOR EPA ID NUMBER NY101010101010101010101010 OR SMALL GENERATOR EXEMPT GENERATOR

NAME Rolph CLARK STONE PKG. TELEPHONE NUMBER 716-248-1800

STREET 3750 MONROE AVE

CITY ROCHESTER STATE N.Y. ZIP CODE 14534

TREATMENT, STORAGE, OR DISPOSAL FACILITY (TSDF)
EPA ID NUMBER WIZD101010101010101010101010

NAME PRINTING DEVELOPMENTS TELEPHONE NUMBER 414-554-1030

STREET 2010 INDIANA STREET

CITY RACINE, WI STATE WI ZIP CODE 53405

WASTE INFORMATION			
WASTE DESCRIPTION	WASTE NUMBER	HANDLING CODE	QUANTITY (in Whole Tons)
<u>WASTE Corrosive LIQUID</u>	<u>D101012</u>	<u>T</u>	<u>010101010101</u>

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

PRINT OR TYPE NAME PETER ONOFREY TITLE SHIFT SUPERVISOR

SIGNATURE Peter Onofrey DATE 1/22/88

SITE NAME: Shorewood Packaging Corporation
 3750 Monroe Avenue
 Pittsford, NY 14534-0548

EPA ID NO.

NYD 981 877 020



N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

1993 HAZARDOUS WASTE

FORM IC

IDENTIFICATION AND CERTIFICATION

INSTRUCTIONS: Read the detailed instructions beginning on page 7 of the Hazardous Waste Report booklet before completing this form.

Sec I SITE NAME AND LOCATION ADDRESS - COMPLETE ITEMS A THROUGH H

A. EPA ID NO. NYD 981 877 020 B. County: Monroe

C. Site/company name: Shorewood Packaging Corporation-Pittsford Operations D. Has the site name associated with this EPA ID No. changed since 1992? 1. Yes 2. No

E. Street name and number If not applicable, enter industrial park, building name or other physical location description: 3750 Monroe Avenue

F. City, town, village, etc.: Pittsford G. State: NY H. Zip Code: 14534-0548

Sec II MAILING ADDRESS OF SITE - Instructions, Page 7

A. Is the mailing address the same as the location address in "E" above? 1. Yes (skip to section III) 2. No (go to box B)

B. Number and street of mailing address:

C. City, Town, Village, etc.: D. State: E. Zip Code:

Sec III NAME, TITLE AND TELEPHONE NUMBER OF PERSON WHO SHOULD BE CONTACTED ABOUT THIS REPORT - Instructions, Page 7

A. Last name: O'Brien First name: Harold M.I.: I. B. Title: Litho Operations Manager C. Telephone: 716 248-1808 Area Code: 716

Sec IV Enter the standard classification (SIC) code that describes the principal products or group of products, produced or distributed, or the services rendered at the site's physical location. Enter more than one code only if no one industry description includes the combined activities of the site. Instruction Page 7

A. 2752 B. C. D.

Sec V CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision, in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties under section 3008 of the Resource Conservation and Recovery Act for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. Last name: O'Brien First name: Harold M.I.: I. B. Title: Litho Operations Manager

C. Signature: Harold J. O'Brien D. Date Signed: 3/29/94 Mo. Day Year

SITE NAME Shorewood Packaging Corporation
3750 Monroe Avenue
Pittsford, NY 14534-0548

EPA ID NO. NYD 981 877 020



N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 1993 HAZARDOUS WASTE REPORT

FORM GM

WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 13 of the Hazardous Waste Report booklet before completing this form.

SEC I A. Waste description: - Instructions, Page 15
 Waste Inks & Waste Flammable Liquids Nos

B. EPA hazardous waste code: Instructions, Page 16 D001 F005

C. New York State hazardous waste code: Instructions, Page 16

D. SIC code: Page 16 21753 E. Origin Code: Page 16 U F. Source code: Page 17 A09 G. Point of measurement: Page 17 U H. Form code: Page 17 B6b4 I. RCRA Radioactive-mixed: Page 17 2

J. Reported TRI constituent: Page 18 1 K. CAS numbers: Page 18 1. - - 2. - - 3. - - 4. - - 5. - -

SEC II A. Quantity of Hazardous Waste generated in 1992: Instructions, Page 18 26049 . 0 B. Quantity of Hazardous Waste generated in 1993: - Instructions, Page 18 15178 . 0 C. UOM: Instr., Page 19 1 Density: 1. lbs/gal. 2. sg D. Did this site treat on site, dispose of on site, recycle on site, or discharge to a sewer/POTW? Instr., Page 19 1. Yes (continue to system I) 2. No (Skip to Sec. III)

ON-SITE SYSTEM 1 PS Page Number ON-SITE SYSTEM 2 PS Page Number
 On-site system type Quantity treated, disposed of, or recycled on site in 1993: Instr., Page 19 M .
 On-site system type Quantity treated, disposed of, or recycled on site in 1993: Instr., Page 19 M .

SEC III A. Was any of this waste shipped off site in 1993? Instructions, Page 20 1. Yes (continue to Box "B") 2. No (Skip to Sec. IV)

Site 1 B. EPA ID Number of facility to which waste was shipped: Instr., Page 20 NJD 002182 897 C. System type shipped to Instr., Page 20 M061 D. Off-site availability code: Instr., Page 21 1 E. Total quantity shipped to this facility in 1993: Instr., Page 21 125110 . 0

Site 2 B. EPA ID Number of facility to which waste was shipped: Instr., Page 20 NYD 980753 784 C. System type shipped to Instr., Page 20 M021 D. Off-site availability code: Instr., Page 21 1 E. Total quantity shipped to this facility in 1993: Instr., Page 21 638 . 0

SEC IV A. Did any new activities in 1993 result in reduction of this waste? Instructions, Page 22 1. Yes (continue to Box "B") 2. No (This form is now complete)

B. Activity: - Instr., Page 22 W19 C. Other effects? Instr., Page 22 1. Yes 2. No D. Quantity recycled in 1993 due to new activities: Instr., Page 22 NA E. Activity/production index: Instr., Page 22 011 1 F. 1993 source reduction quantity: Instr., Page 24 10000 . 6

Comments:
 A reduction in wash liquids and use of vegetable oil base inks were the main reasons for a major decrease in hazardous waste.

SITE NAME Shorewood Packaging Corporation
3750 Monroe Avenue
Pittsford, NY 14534-0548



N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION
1993 HAZARDOUS WASTE REPORT

EPA ID NO.

N	Y	D	9	8	1	8	7	7	0	2	0
---	---	---	---	---	---	---	---	---	---	---	---

FORM
GM

WASTE GENERATION AND MANAGEMENT

INSTRUCTIONS: Read the detailed instructions beginning on page 13 of the Hazardous Waste Report booklet before completing this form.

Sec I A. Waste description: - Instructions, Page 15					
B. EPA hazardous waste code: Instructions, Page 16			C. New York State hazardous waste code: Instructions, Page 16		
D. SIC code: Page 16	E. Origin Code: Page 16	F. Source code: Page 17	G. Point of measurement: Page 17	H. Form code: Page 17	I. RCRA Radioactive-mixed: Page 17
J. Reported TRI constituent: Page 18		K. CAS numbers: Page 18			

Sec II A. Quantity of Hazardous Waste generated in 1992: Instructions, Page 18	B. Quantity of Hazardous Waste generated in 1993: - Instructions, Page 18	C. UOM: Instr., Page 19	Density: <table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>					D. Did this site treat on site, dispose of on site, recycle on site, or discharge to a sewer/POTW? Instr., Page 19 <input type="checkbox"/> 1. Yes (continue to system 1) <input type="checkbox"/> 2. No (Skip to Sec. III)				
ON-SITE SYSTEM 1 On-site system type Instr., Page 19	PS Page Number <table border="1"><tr><td></td><td></td><td></td><td></td></tr></table> Quantity treated, disposed of, or recycled on site in 1993: Instr., Page 19					ON-SITE SYSTEM 2 On-site system type Instr., Page 19	PS Page Number <table border="1"><tr><td></td><td></td><td></td><td></td></tr></table> Quantity treated, disposed of, or recycled on site in 1993: Instr., Page 19					

Sec III A. Was any of this waste shipped off site in 1993? Instructions, Page 20	<input type="checkbox"/> 1. Yes (continue to Box "B") <input type="checkbox"/> 2. No (Skip to Sec. IV)			
Site 1 B. EPA ID Number of facility to which waste was shipped: Instr., Page 20	C. System type shipped to: Instr., Page 20	D. Off-site availability code: Instr., Page 21	E. Total quantity shipped to this facility in 1993: Instr., Page 21	
Site 2 B. EPA ID Number of facility to which waste was shipped: Instr., Page 20	C. System type shipped to: Instr., Page 20	D. Off-site availability code: Instr., Page 21	E. Total quantity shipped to this facility in 1993: Instr., Page 21	

Sec IV A. Did any new activities in 1993 result in reduction of this waste? Instructions, Page 22	<input type="checkbox"/> 1. Yes (continue to Box "B") <input type="checkbox"/> 2. No (This form is now complete)			
B. Activity: - Instr., Page 22	C. Other effects? Instr., Page 22	D. Quantity recycled in 1993 due to new activities: Instr., Page 22	E. Activity/production index: Instr., Page 22	F. 1993 source reduction quantity: Instr., Page 24

Comments:

SITE NAME Shorewood Packaging Corporation
 3750 Monroe Avenue
 Pittsford, NY 14534-0548

EPA ID NO.
 NYD 981 877 020



N.Y.S. DEPARTMENT OF ENVIRONMENTAL CONSERVATION

1993 HAZARDOUS WASTE
OFF SITE IDENTIFICATION

FORM 01

INSTRUCTIONS: Read the detailed instructions on page 47 of the Hazardous Waste Report booklet before completing this form.

Site 1	A. EPA ID Number of off site installation or transporter. 111D 051 060 408	B. Name of off-site installation or transporter. Safety Kleen Corporation
	C. Handler type: <input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> TSDR	D. Address of off-site installation: Street: City: State Zip code

Site 2	A. EPA ID Number of off site installation or transporter. 111D 984 908 202	B. Name of off-site installation or transporter. Safety Kleen Corporation
	C. Handler type: <input type="checkbox"/> Generator <input checked="" type="checkbox"/> Transporter <input type="checkbox"/> TSDR	D. Address of off-site installation: Street: City: State Zip code

Site 3	A. EPA ID Number of off site installation or transporter. NJ D 002 182 897	B. Name of off-site installation or transporter. Safety Kleen Corporation
	C. Handler type: <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> TSDR	D. Address of off-site installation: Street: 1200 Sylvan Street City: Linden State NJ Zip code 07036

Site 4	A. EPA ID Number of off site installation or transporter. NY D 980 753 784	B. Name of off-site installation or transporter. Safety Kleen Corporation
	C. Handler type: <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> TSDR	D. Address of off-site installation: Street: 1525 W. Henrietta Road City: Avon State NY Zip code 14414

Site 5	A. EPA ID Number of off site installation or transporter. KY D 053 348 108	B. Name of off-site installation or transporter. Safety Kleen Corporation
	C. Handler type: <input type="checkbox"/> Generator <input type="checkbox"/> Transporter <input checked="" type="checkbox"/> TSDR	D. Address of off-site installation: Street: State Highway 146 City: Newcastle State KY Zip code 40050