

From: Shawn Lennon [jlennon@perma-fix.com]
Sent: Tuesday, May 17, 2011 4:55 PM
To: Winston, Kathy
Subject: Requested Manifests from 5/12/11 Inspection
Attachments: Skmbt_bizhu11051716080.pdf

Kathy, see attached.

John (Shawn) Lennon, Jr.
General Manager
Perma-Fix of Ft. Lauderdale, Inc.
3701 SW 47th Avenue, Suite 109
Davie, FL 33314
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Drum inventory

| Date in | Transporter | Generator | Manifest # | haz /nonhaz | Quantity | Date out |
|-----------|-------------|---------------------------------|------------|-------------|----------|-----------|
| 8-Dec-10 | Pfx | JTS Woodworking | 3291649 | haz | 10 | 13-Dec-10 |
| 8-Dec-10 | Pfx | KB Electronics | 91647 | haz | 1 | 13-Dec-10 |
| 9-Dec-10 | Pfx | Pro Quality Collision | 91651 | haz | 1 | 13-Dec-10 |
| 9-Dec-10 | Pfx | Navegator Of The Seas | 91650 | haz | 2 | 13-Dec-10 |
| 9-Dec-10 | Pfx | Finish Master | 91653 | haz | 2 | 13-Dec-10 |
| 10-Dec-10 | Pfx | United Turbine | 91661 | haz | 2 | 13-Dec-10 |
| 10-Dec-10 | Pfx | Sonic Aviation | 91655 | haz | 13 | 13-Dec-10 |
| 10-Dec-10 | Pfx | Wayne Acres Ford | 91659 | haz | 1 | 13-Dec-10 |
| 10-Dec-10 | Pfx | Absolute Hardwood 'flooring | 91654 | haz | 3 | 13-Dec-10 |
| 10-Dec-10 | Pfx | Custom Cabinets | 91660 | haz | 1 | 13-Dec-10 |
| 10-Dec-10 | Pfx | Designers Specialty Cabinet Co. | 91656 | haz | 6 | 13-Dec-10 |
| 10-Dec-10 | Pfx | Steel Fabricators | 91658 | haz | 7 | 13-Dec-10 |
| 10-Dec-10 | Pfx | L.E. Auto Body | 91657 | haz | 1 | 13-Dec-10 |
| 12-Dec-10 | Pfx | Solstice | 91652 | haz | 4 | 20-Dec-10 |
| 13-Dec-10 | Pfx | Jewel Of The Seas | 91663 | haz | 1 | 20-Dec-10 |
| 13-Dec-10 | EMC | Aerospace Precision | 1579487 | haz | 3 | 20-Dec-10 |
| 13-Dec-10 | EMC | Doral Hyundai | 1579492 | haz | 2 | 20-Dec-10 |
| 13-Dec-10 | EMC | Aeroservicios | 1579491 | haz | 3 | 20-Dec-10 |

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

Form Approved. OMB No. 2050-0039

| | | | | | | | | | |
|---|---|--|--|--|--|---|------------------|-----------------|-----------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number <div style="text-align: center;">CESQG</div> | | 2. Page 1 of <div style="text-align: center;">1</div> | 3. Emergency Response Phone <div style="text-align: center;">800-424-9300</div> | 4. Manifest Tracking Number <div style="text-align: center; font-size: 1.2em;">003291647 JJK</div> | | | |
| 5. Generator's Name and Mailing Address K & B Electronics 12090 NW 39th Street Coral Springs, FL Generator's Phone: 954-346-4900 | | | | | | | | | |
| Generator's Site Address (if different than mailing address) | | | | | | | | | |
| 6. Transporter 1 Company Name Perma-Fix of Ft. Lauderdale, Inc. | | | | | | U.S. EPA ID Number FL0991018771 | | | |
| 7. Transporter 2 Company Name A.R. Paquette & Co., Inc. | | | | | | U.S. EPA ID Number FL0982105884 | | | |
| 8. Designated Facility Name and Site Address Perma-Fix of South Georgia, Inc. 1612 James P. Rodgers Circle Valdosta, GA 31601 Facility's Phone: 229-244-0474 | | | | | | U.S. EPA ID Number GA0901380814 | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | 10. Containers | 11. Total Quantity | 12. Unit WL/Vol. | 13. Waste Codes | |
| | | | | | No. | Type | | | |
| | X | 1. UN1993, RG, Waste Flammable Liquids, n.o.s., 3, PGI | | | 1 | DM | 55 | G | 3001 3008 |
| | | 2. | | | | | | | |
| | | 3. | | | | | | | |
| | 4. | | | | | | | | |
| 14. Special Handling Instructions and Additional Information 1) Approval # KBEG3142 | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | |
| Generator's/Offor's Printed/Typed Name X Anthony Prince | | | | | | | | | |
| Signature X Anthony Prince | | | | | | | | | |
| Month Day Year 12 8 10 | | | | | | | | | |
| TRANSPORTER | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | |
| | Transporter 1 Printed/Typed Name YANACIO BAKCIA | | | | Signature Yanacio Bakcia | | | | |
| | Month Day Year 12 8 10 | | | | | | | | |
| Transporter 2 Printed/Typed Name Carlos Alicea | | | | Signature Carlos Alicea | | | | | |
| Month Day Year 12 13 10 | | | | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy | | | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | |
| | 18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number | | | | | | | | |
| | Facility's Phone: | | | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | |
| 1. H061 | | 2. | | 3. | | 4. | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | | |
| Printed/Typed Name | | | | Signature | | | | | |
| Month Day Year 12 14 10 | | | | | | | | | |

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

Form Approved. OMB No. 2050-0039

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number FLCESQG33444 | | 2. Page 1 of 1 | 3. Emergency Response Phone 800-424-9300 | 4. Manifest Tracking Number 003291649 JJK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|---|-----------|-----------------------|--|---|-------------|-------------|--|-----------|--|----------------|--|--------------------|------------------|-----------------|--|--|-----|------|--|--|--|---|--|----------|-----------|------------|----------|-------------|-------------|-------------|---|--|----------|-----------|------------|----------|-------------|-------------|-------------|--|----|--|--|--|--|-------------|--|--|--|----|--|--|--|--|--|
| | | 5. Generator's Name and Mailing Address JTS Woodworking 75 NW 15th Avenue Delray Beach, FL 33444 Generator's Phone: 561-272-7996 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| GENERATOR | | 6. Transporter 1 Company Name Perma-Fix of Ft. Lauderdale, Inc. | | | | U.S. EPA ID Number FLD981018773 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 7. Transporter 2 Company Name A.R. Paquette & Co., Inc. | | | | U.S. EPA ID Number FLD982105884 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESIGNATED FACILITY | | 8. Designated Facility Name and Site Address Perma-Fix of South Georgia, Inc. 1612 James P. Rodgers Circle Valdosta, GA 31601 Facility's Phone: 229-244-0474 | | | | U.S. EPA ID Number GAD093380814 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th rowspan="2">9a. HM</th> <th rowspan="2">9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))</th> <th colspan="2">10. Containers</th> <th rowspan="2">11. Total Quantity</th> <th rowspan="2">12. Unit WL/Vol.</th> <th colspan="3">13. Waste Codes</th> </tr> <tr> <th>No.</th> <th>Type</th> <th></th> <th></th> <th></th> </tr> <tr> <td>X</td> <td>1. NA3077, RQ, Hazardous waste, solid, n.o.s., 9, PGIII Y.G.</td> <td>3</td> <td>DM</td> <td>165</td> <td>G</td> <td>0035</td> <td>0003</td> <td>0005</td> </tr> <tr> <td>X</td> <td>2. UN1263, RQ, Waste Paint related material including paint thinning, drying, removing, or reducing compound, 3, PGII Y.G.</td> <td>7</td> <td>DM</td> <td>385</td> <td>G</td> <td>0001</td> <td>0035</td> <td>0003</td> </tr> <tr> <td></td> <td>3.</td> <td></td> <td></td> <td></td> <td></td> <td>0005</td> <td></td> <td></td> </tr> <tr> <td></td> <td>4.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> | | | | | | | | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit WL/Vol. | 13. Waste Codes | | | No. | Type | | | | X | 1. NA3077, RQ, Hazardous waste, solid, n.o.s., 9, PGIII Y.G. | 3 | DM | 165 | G | 0035 | 0003 | 0005 | X | 2. UN1263, RQ, Waste Paint related material including paint thinning, drying, removing, or reducing compound, 3, PGII Y.G. | 7 | DM | 385 | G | 0001 | 0035 | 0003 | | 3. | | | | | 0005 | | | | 4. | | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit WL/Vol. | 13. Waste Codes | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | No. | Type | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X | 1. NA3077, RQ, Hazardous waste, solid, n.o.s., 9, PGIII Y.G. | 3 | DM | 165 | G | 0035 | 0003 | 0005 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| X | 2. UN1263, RQ, Waste Paint related material including paint thinning, drying, removing, or reducing compound, 3, PGII Y.G. | 7 | DM | 385 | G | 0001 | 0035 | 0003 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 3. | | | | | 0005 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 4. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TRANSPORTER | | 14. Special Handling Instructions and Additional Information 1) Approval # JTS6734- Bags 2) Approval # JTS65735 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| INT'L | | Generator's/Offor's Printed/Typed Name Mark Fitch | | | | Signature <i>[Signature]</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. | | | | Month Day Year 12/8/10 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESIGNATED FACILITY | | Transporter signature (for exports only): | | | | Port of entry/exit: Date leaving U.S.: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESIGNATED FACILITY | | Transporter 1 Printed/Typed Name YANACIO GARCIA | | | | Signature <i>[Signature]</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Transporter 2 Printed/Typed Name Carlos Alicia | | | | Signature <i>[Signature]</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESIGNATED FACILITY | | 18. Discrepancy | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESIGNATED FACILITY | | 18b. Alternate Facility (or Generator) | | | | Manifest Reference Number: U.S. EPA ID Number | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Facility's Phone: | | | | 18c. Signature of Alternate Facility (or Generator) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESIGNATED FACILITY | | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | 1. H141 | | 2. H061 | | 3. | | 4. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESIGNATED FACILITY | | 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Printed/Typed Name [Signature] | | | | Signature <i>[Signature]</i> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DESIGNATED FACILITY | | | | | | Month Day Year 12/19/10 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |