

PATIENT CONTACT  
KELLEY TRACTOR

PHONE NUMBER (905) 582-5360

PAGE OF  
CALL PROBLEM ORDER  
TYPE CODE ORIGIN

TE NUMBER NAME AND ADDRESS

62208701  
KELLEY TRACTOR - MIAMI  
8525 NW 65TH ST DEPT 3100  
MIAMI, FL 33168

CALL WAS TAKEN ON

AT BY

12/7/2012 2:41 PM FURBER, Anthony Vito

P.O. NUMBER

PROBLEM SYNOPSIS, AS REPORTED

PRIORITY Medium

TRAILER NO.

UPTIME UNIT NO.

TT

TM

ST

ARRIVE DATE

ARRIVE TIME

CLOSE DATE

CLOSE TIME

JOB COMPLETE

YES NO

PART / DESCRIPTION

UM

QUANTITY

SHIPPING DESCRIPTION

SERIAL #

# CONT

TYPE

COL-3-HAZ666QADM

1

1

MANUAL INPUT

12-10-13

12-10-13

12/7/2012 12:00

M-ENERGYBURCHB

1

1

MANUAL INPUT

12-10-13

12-10-13

12/7/2012 12:00

M-TRANS

1

1

MANUAL INPUT

12-10-13

12-10-13

12/7/2012 12:00

## Qualification Statement

I, the undersigned, hereby certify that I understand the used FCC Environmental, LLC degreasing fluid (i.e. Mineral Clean) is not a hazardous waste as defined in 40 CFR 261.5 and is not a hazardous waste or been mixed with a listed or characteristic hazardous waste as defined in 40 CFR 261.11. I am authorized to sign on behalf of the GENERATOR.

I have reviewed our physical facilities, administrative practices, and operational procedures and have determined that the degreasing fluid is not a hazardous waste as defined in 40 CFR 261.11. I am authorized to sign on behalf of the GENERATOR.

I have reviewed our physical facilities, administrative practices, and operational procedures and have determined that the degreasing fluid is not a hazardous waste as defined in 40 CFR 261.11. I am authorized to sign on behalf of the GENERATOR.

Initial if Conditionally Exempt Small Quantity Generator as defined in 40 CFR 261.5

Initial if Do-it-yourself collection center

The GENERATOR hereby certifies that the material collected from the GENERATOR'S facility by FCC Environmental, LLC does not contain any PCB's as defined in 40 CFR 761 and is not a hazardous waste or been mixed with a listed or characteristic hazardous waste as defined in 40 CFR 261.11. I am authorized to sign on behalf of the GENERATOR.

Transporter Information:

FCC Environmental, LLC  
523 N. Sam Houston Parkway East, Suite 400  
Houston, TX 77060

US DOT ID# 1688621  
EPA ID# TXF000078094

Designated Facility  
1280 N.E. 48th Street  
Pompano Beach, FL 33064  
(800) 235-0189, Ext 1  
EPA ID# FL0964262410

OWNER NAME

CUSTOMER SIGNATURE / DATE

DRIVER SIGNATURE / DATE

RECEIVED AT PLANT / DATE

CUSTOMER

Waste Name: Environmental Kelly Tractor

EPAID # FLD 78192511

Manifest Tracking No. 0071334343SK

Wastewater (see 40 CFR 268.2) place "w" next to the applicable code(s)

Profile# 120434

WITH SUBCATEGORIES (place appropriate letter from section 8 before each code that applies) (See 40 CFR 268 for details)

- |  |   |   |  |   |
|--|---|---|--|---|
| <input type="checkbox"/> D001 HI-TOC           | <input type="checkbox"/> D008 Lead acid batteries | <input type="checkbox"/> K069 Not Calcium Sulfate | <input type="checkbox"/> P065 Lo RMERC Res.      | <input type="checkbox"/> U151 Hi Hg               |
| <input type="checkbox"/> D001 Except HI-TOC    | <input type="checkbox"/> D009 Organic Hg> 260ppm  | <input type="checkbox"/> K071 Rmerc Res.          | <input type="checkbox"/> P065 Not Inc RMERC Res. | <input type="checkbox"/> U240 2, 4 D              |
| <input type="checkbox"/> D003 Reactive Cyanide | <input type="checkbox"/> D009 Inorg. Hg> 260      | <input type="checkbox"/> K071 Not Rmerc Res.      | <input type="checkbox"/> P065 Hi Inc RMERC Res.  | <input type="checkbox"/> U240 2, 4 esters & Salts |
| <input type="checkbox"/> D003 Reactive Sulfide | <input type="checkbox"/> D009 Hg < 260            | <input type="checkbox"/> K106 Lo Rmerc Res.       | <input type="checkbox"/> P092 Lo Inc. Res.       |   |
| <input type="checkbox"/> D003 Explosive        | <input type="checkbox"/> F025 Light ends          | <input type="checkbox"/> K106 Not Rmerc Res.      | <input type="checkbox"/> P092 Lo RMERC Res.      |   |
| <input type="checkbox"/> D003 Water Reactives  | <input type="checkbox"/> F025 Spent filter        | <input type="checkbox"/> K106> 260 ppm Hg         | <input type="checkbox"/> P092 Not Inc RMERC Res. |   |
| <input type="checkbox"/> D003 Unexp Ord. Emg   | <input type="checkbox"/> K006 Hydrated            | <input type="checkbox"/> P047 Salts               | <input type="checkbox"/> P092 Hi Inc RMERC Res.  |   |
| <input type="checkbox"/> D003 Other Reactives  | <input type="checkbox"/> K006 Anhydrous           | <input type="checkbox"/> P047 Nonsalts            | <input type="checkbox"/> U151 Lo RMERC Res.      |   |
| <input type="checkbox"/> D006 Batteries        | <input type="checkbox"/> K069 Calcium Sulfate     | <input type="checkbox"/> P065 Lo Inc. Res.        | <input type="checkbox"/> U151 Lo Not RMERC Res.  |   |

The subcategory for D018-D043 waste is 'treated in nonCWA/nonSDWA facility' unless the following box is checked: ☐ 'treated in CWA/SDWA facility'

3. COMMON CODES (Place appropriate letter from section 8 before each code that applies)

- |                               |                               |                               |                               |                               |                               |                               |                               |                               |                               |  |                               |  |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|--|-------------------------------|--|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> D002 | <input type="checkbox"/> P012 | <input type="checkbox"/> P030 | <input type="checkbox"/> P051 | <input type="checkbox"/> P098 | <input type="checkbox"/> P105 | <input type="checkbox"/> P205 | <input type="checkbox"/> F006 | <input type="checkbox"/> F007 | <input type="checkbox"/> F008 | <input type="checkbox"/> F009            | <input type="checkbox"/> F010 | <input type="checkbox"/> F011            | <input type="checkbox"/> F012 | <input type="checkbox"/> F019 | <input type="checkbox"/> F039 |
| <input type="checkbox"/> D004 | <input type="checkbox"/> D005 | <input type="checkbox"/> D006 | <input type="checkbox"/> D007 | <input type="checkbox"/> D008 | <input type="checkbox"/> D009 | <input type="checkbox"/> D010 | <input type="checkbox"/> D011 | <input type="checkbox"/> D012 | <input type="checkbox"/> D013 | <input type="checkbox"/> D014            | <input type="checkbox"/> D015 | <input type="checkbox"/> D016            | <input type="checkbox"/> D017 | <input type="checkbox"/> D018 | <input type="checkbox"/> D019 |
| <input type="checkbox"/> D020 | <input type="checkbox"/> D021 | <input type="checkbox"/> D022 | <input type="checkbox"/> D023 | <input type="checkbox"/> D024 | <input type="checkbox"/> D025 | <input type="checkbox"/> D026 | <input type="checkbox"/> D027 | <input type="checkbox"/> D028 | <input type="checkbox"/> D029 | <input type="checkbox"/> D030            | <input type="checkbox"/> D031 | <input type="checkbox"/> D032            | <input type="checkbox"/> D033 | <input type="checkbox"/> D034 | <input type="checkbox"/> D035 |
| <input type="checkbox"/> D036 | <input type="checkbox"/> D037 | <input type="checkbox"/> D038 | <input type="checkbox"/> D039 | <input type="checkbox"/> D040 | <input type="checkbox"/> D041 | <input type="checkbox"/> D042 | <input type="checkbox"/> D043 | <input type="checkbox"/> D001 | <input type="checkbox"/> F002 | <input checked="" type="checkbox"/> F003 | <input type="checkbox"/> F004 | <input checked="" type="checkbox"/> F005 | <input type="checkbox"/> U002 | <input type="checkbox"/> U003 | <input type="checkbox"/> U006 |
| <input type="checkbox"/> U007 | <input type="checkbox"/> U044 | <input type="checkbox"/> U061 | <input type="checkbox"/> U072 | <input type="checkbox"/> U080 | <input type="checkbox"/> U108 | <input type="checkbox"/> U117 | <input type="checkbox"/> U122 | <input type="checkbox"/> U123 | <input type="checkbox"/> U136 | <input type="checkbox"/> U154            | <input type="checkbox"/> U188 | <input type="checkbox"/> U213            | <input type="checkbox"/> U220 | <input type="checkbox"/> U226 | <input type="checkbox"/> U279 |
|                               |                               |                               |                               |                               |                               |                               |                               |                               |                               |  |                               |  |                               |                               | K051                          |

ADDITIONAL CODES (Enter all codes not identified above which are associated with waste)

4. USEPA HAZARDOUS WASTE CODE(S)	5. TREATMENT STANDARDS FOR NON-PHASE II STATES (INDICATE THE APPLICABLE TREATMENT STANDARD 268.41, 268.43 OR SPECIFIED TECHNOLOGY)	6. HOW MUST THE WASTE BE MANAGED? ENTER THE LETTER FROM BELOW

To identify F039, or UHCs managed in non-CWA, use the "F039/Underlying Hazardous Constituents Form provided and check here: ☐  
 If no UHCs are present upon generation check here: ☐ Check here If disposal facility will check for all UHCs ☐ (i.e. no UHC form required)  
 If to list additional EPA waste code(s), use the supplemental sheet and check here: ☐ In lieu of supplemental sheet you may use multiple copies of this form.

7. SOLVENT CONSTITUENTS (F001 - F005) Check here if disposal facility will check for all spent

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> Acetone                    | <input type="checkbox"/> Benzene                 | <input type="checkbox"/> n-Butyl alcohol                            | <input type="checkbox"/> Carbon disulfide  |
| <input type="checkbox"/> Carbon Tetrachloride       | <input type="checkbox"/> Chlorobenzene           | <input type="checkbox"/> o-Cresol                                   | <input type="checkbox"/> Cresols (m&p)     |
| <input type="checkbox"/> Cyclohexanone              | <input type="checkbox"/> o-Dichlorobenzene       | <input type="checkbox"/> 2-Ethoxyethanol                            | <input type="checkbox"/> Ethyl acetate     |
| <input type="checkbox"/> Ethyl benzene              | <input type="checkbox"/> Ethyl ether             | <input type="checkbox"/> Isobutanol                                 | <input type="checkbox"/> Methanol          |
| <input type="checkbox"/> Methylene chloride         | <input type="checkbox"/> Methyl ethyl ketone     | <input type="checkbox"/> Methyl isobutyl ketone                     | <input type="checkbox"/> Nitrobenzene      |
| <input type="checkbox"/> 2-Nitropropane             | <input type="checkbox"/> Pyridine                | <input type="checkbox"/> Tetrachloroethylene                        | <input type="checkbox"/> Toluene           |
| <input type="checkbox"/> 1,1,1 Trichloroethane      | <input type="checkbox"/> 1, 1, 2-Trichloroethane | <input type="checkbox"/> 1, 1, 2-Trichloro, 1, 2, 2-trifluoroethane | <input type="checkbox"/> Trichloroethylene |
| <input type="checkbox"/> Trichloromonofluoromethane | <input type="checkbox"/> Xylenes                 |   |  |

8. (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

A. or ☒ **RESTRICTED WASTE REQUIRES TREATMENT**

This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40  
☐ For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."

B.1 **RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS**

"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

B.2 **(CERTIFICATION REMOVED BY PHASE IV)**

B.3 **GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS**

"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the nonwastewater organic constituents have been treated by combustion units as specified in 268.42, Table 1. I have been unable to detect the nonwastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."

B.4 **DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS**

"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."

C. **RESTRICTED WASTE SUBJECT TO A VARIANCE**

This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.  
☐ For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."

D. **RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT**

"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

E. **WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS**

This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Signature

Title

Date

GENERATOR

<b>HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number FLD981925811	2. Page 1 of 1	3. Emergency Response Phone 800-424-0300	4. Manifest Tracking Number <b>007133434 JJK</b>			
Generator's Name and Mailing Address <b>Kelly Tractor</b> 9255 NW 50th St. Dept G 100 Miami, FL 33155 US				Generator's Site Address (if different than mailing address)				
Generator's Phone: 305-592-6360								
6. Transporter 1 Company Name <b>FCC ENVIRONMENTAL LLC</b>				U.S. EPA ID Number TXR000078004				
7. Transporter 2 Company Name <b>FREEHOLD CARTAGE INC.</b>				U.S. EPA ID Number NJ0034126164				
8. Designated Facility Name and Site Address <b>Glant Resource Recovery - Sumter Inc.</b> 755 Industrial Road Sumter, SC 29151 US				U.S. EPA ID Number SCD000775008				
Facility's Phone: 803-773-1400								
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 Wt./Vol.	13. Waste Codes
		1. UN1263, RQ, WASTE PAINT RELATED MATERIAL, 3, PG II (D001)		No.	Type			
				81	DM	50	G	D001 F003 F005
		2.						
		3.						
	4.							
14. Special Handling Instructions and Additional Information ERG # 128 SO# APPROVAL 12/04/34								
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 <u>John S. Johnson</u> Signature <u>[Signature]</u> Month <u>12</u> Day <u>04</u> Year <u>34</u>								
INT'L	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.:							
	Transporter signature (for exports only):							
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name <u>[Name]</u> Signature <u>[Signature]</u> Month <u>12</u> Day <u>04</u> Year <u>34</u>							
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name <u>[Name]</u> Signature <u>[Signature]</u> Month <u>12</u> Day <u>04</u> Year <u>34</u>							
	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 <u>12</u> Day <u>04</u> Year <u>34</u>								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. 2. 3. 4.								
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name <u>[Name]</u> Signature <u>[Signature]</u> Month <u>12</u> Day <u>04</u> Year <u>34</u>								

NUMBER

1325200

PAGE OF

CALL TYPE PROBLEM CODE ORDER ORIGIN

PRIORITY

Insurance

CUSTOMER CONTACT  
KELLY TRACTOR  
PHONE NUMBER (305) 582-5360  
SITE NUMBER NAME AND ADDRESS

CALL WAS TAKEN ON

AT BY

P.O. NUMBER

52208701  
KELLY TRACTOR- MIAMI  
8285 NW 68TH ST DEPT 3100  
MIAMI, FL 33166

12/18/2012 1:02 PM 3100WENDELL

ASSIGNED TECH

PROMISE DATE, TIME

VEHICLE NO.

TRAILER NO.

UPTIME UNIT NO.

TT

TM

PLIST DMP MAINTENANCE DATE 12/18/2012  
AND 8 DIMS ARE 100% DCH/DCH  
CONTACT MAYNE/MIKE IN 2014  
CAMELINE/HAZ DIM 780 1002914  
0887

CLOSE DATE

CLOSE TIME

JOB COMPLET

PART / DESCRIPTION

U/M

QUANTITY

HM

SHIPPING DESCRIPTION

GLYCOL PH

BRIX

SNIFER

C-D-T

COL-AB555GADM

Non DOT Regulated Liquid Aqueous

COL-44255GADM

(1)

Unsoluble Solids Organic

WT-ENERGYTECHNICS

80 1

M-TRANS

80 1

Reuse Qualification Statement

I am signing this document, I hereby certify that I understand the used FCC Environmental, LLC degreasing fluid (i.e. Mineral spirits, petroleum naphtha) returned to FCC Environmental, LLC for inclusion in the FCC Environmental, LLC Reuse program will be utilized as an effective substitute for chemical product. For the purpose of qualifying to participate in the program, I further certify that any used degreasing fluid so returned to FCC Environmental, LLC has not been mixed with hazardous waste or other objectionable substances. All constituents that may be present in the degreasing fluid are contaminants resulting from, and incidental to, normal use of the solvent as a degreaser or cleaner. I have reviewed our physical facilities, administrative practices, and operational procedures and based on this review do willing make this true, accurate and complete certification.

Signature Solvent QA & QC

Used solvent passed visual inspection  
Used solvent has no unusual odor  
Parts Cleaner is clean (frontback)  
Fusible link operational

Yes No  
Light assembly is in good working order  
Light is unobstructed  
Parts Cleaner is properly grounded

Signature

I agree to pay for the above services and/or products and to be bound by the terms and conditions set forth above and on the reverse side of this document.

PRINT CUSTOMER NAME

CUSTOMER SIGNATURE / DATE

102929

CUSTOMER

DRIVER SIGNATURE / DATE

RECEIVED AT PLANT / DATE

Initial if Conditionally Exempt Small Quantity Generator as defined in 40 CFR 261.5  
Initial if Do-it-yourself collection center

Generator  
EPA ID#  
The GENERATOR hereby certifies that the material collected from the GENERATOR'S facility by FCC Environmental, LLC does not contain any PCBs defined in 40 CFR 761 and is not hazardous waste or been mixed with a listed or characteristic hazardous waste as defined in 40 CFR 261. If the material collected is a used oil as defined in 40 CFR Part 279, the GENERATOR certifies that the total halogen content is less than 1,000 ppm, or the GENERATOR hereby certifies that the redactable waste presumption under 40 CFR Part 279 has been rebutted. The GENERATOR will not, for any reason, deny and all to including, but not limited to, proper disposal, testing, and transportation if the material contains PCBs or is determined to be a hazardous waste. I certify it to the best of my knowledge, the information presented herein is correct and accurate, and I am authorized to sign on behalf of the GENERATOR.

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

Designated Facility  
1280 N.E. 48th Street  
Pompano Beach, FL 33064  
(800) 235-0189, Ext 1  
EPA ID#: FLD064262410

## LAND DISPOSAL NOTIFICATION AND CERTIFICATION FORM PHASE IV

FCC environmental

Generator Name: Kelly Tractor

EPAID # FLD98925811

Manifest Tracking No. 00713344435K

Page 1 of 1

1. If waste is a wastewater (see 40 CFR 268.2) place "w" next to the applicable code(s)

Profile# 1240433

2. CODES WITH SUBCATEGORIES (place appropriate letter from section 8 before each code that applies) (See 40 CFR 268 for details)

<input checked="" type="checkbox"/> D001 Hi-TOC	<input type="checkbox"/> D008 Lead acid batteries	<input type="checkbox"/> K069 Not Calcium Sulfate	<input type="checkbox"/> P065 Lo RMERC Res.	<input type="checkbox"/> U151 Hi Hg
<input type="checkbox"/> D001 Except Hi-TOC	<input type="checkbox"/> D009 Organic Hg> 260ppm	<input type="checkbox"/> K071 Rmerc Res.	<input type="checkbox"/> P065 Not Inc./RMERC Res.	<input type="checkbox"/> U240 2, 4 D
<input type="checkbox"/> D003 Reactive Cyanide	<input type="checkbox"/> D009 inorg. Hg> 260	<input type="checkbox"/> K071 Not Rmerc Res.	<input type="checkbox"/> P065 Hi Inc./RMERC Res.	<input type="checkbox"/> U240 2, 4 esters & Salts
<input type="checkbox"/> D003 Reactive Sulfide	<input type="checkbox"/> D009 Hg < 260	<input type="checkbox"/> K106 Lo Rmerc Res.	<input type="checkbox"/> P092 Lo Inc. Res.	
<input type="checkbox"/> D003 Explosive	<input type="checkbox"/> F025 Light ends	<input type="checkbox"/> K106 Not Rmerc Res.	<input type="checkbox"/> P092 Lo RMERC Res.	
<input type="checkbox"/> D003 Water Reactives	<input type="checkbox"/> F025 Spent filter	<input type="checkbox"/> K106> 260 ppm Hg	<input type="checkbox"/> P092 Not Inc./RMERC Res.	
<input type="checkbox"/> D003 Unexp Ord. Emg	<input type="checkbox"/> K006 Hydrated	<input type="checkbox"/> P047 Salts	<input type="checkbox"/> P092 Hi Inc./RMERC Res.	
<input type="checkbox"/> D003 Other Reactives	<input type="checkbox"/> K006 Anhydrous	<input type="checkbox"/> P047 Nonsalts	<input type="checkbox"/> U151 Lo RMERC Res.	
<input type="checkbox"/> D006 Batteries	<input type="checkbox"/> K069 Calcium Sulfate	<input type="checkbox"/> P065 Lo Inc. Res.	<input type="checkbox"/> U151 Lo Not RMERC Res.	

The subcategory for D018-D043 waste is 'treated in nonCWA/nonSDWA facility' unless the following box is checked: ☐ treated in CWA/SDWA facility'

3. COMMON CODES (Place appropriate letter from section 8 before each code that applies)

<input type="checkbox"/> D002	<input type="checkbox"/> P012	<input type="checkbox"/> P030	<input type="checkbox"/> P051	<input type="checkbox"/> P098	<input type="checkbox"/> P105	<input type="checkbox"/> P205	<input type="checkbox"/> F006	<input type="checkbox"/> F007	<input type="checkbox"/> F008	<input type="checkbox"/> F009	<input type="checkbox"/> F010	<input type="checkbox"/> F011	<input type="checkbox"/> F012	<input type="checkbox"/> F019	<input type="checkbox"/> F039
<input type="checkbox"/> D004	<input type="checkbox"/> D005	<input type="checkbox"/> D006	<input type="checkbox"/> D007	<input type="checkbox"/> D008	<input type="checkbox"/> D009	<input type="checkbox"/> D010	<input type="checkbox"/> D011	<input type="checkbox"/> D012	<input type="checkbox"/> D013	<input type="checkbox"/> D014	<input type="checkbox"/> D015	<input type="checkbox"/> D016	<input type="checkbox"/> D017	<input type="checkbox"/> D018	<input type="checkbox"/> D019
<input type="checkbox"/> D020	<input type="checkbox"/> D021	<input type="checkbox"/> D022	<input type="checkbox"/> D023	<input type="checkbox"/> D024	<input type="checkbox"/> D025	<input type="checkbox"/> D026	<input type="checkbox"/> D027	<input type="checkbox"/> D028	<input type="checkbox"/> D029	<input type="checkbox"/> D030	<input type="checkbox"/> D031	<input type="checkbox"/> D032	<input type="checkbox"/> D033	<input type="checkbox"/> D034	<input type="checkbox"/> D035
<input type="checkbox"/> D036	<input type="checkbox"/> D037	<input type="checkbox"/> D038	<input type="checkbox"/> D039	<input type="checkbox"/> D040	<input type="checkbox"/> D041	<input type="checkbox"/> D042	<input type="checkbox"/> D043	<input type="checkbox"/> D001	<input type="checkbox"/> F002	<input type="checkbox"/> F003	<input type="checkbox"/> F004	<input type="checkbox"/> F005	<input type="checkbox"/> U002	<input type="checkbox"/> U003	<input type="checkbox"/> U006
<input type="checkbox"/> U007	<input type="checkbox"/> U044	<input type="checkbox"/> U061	<input type="checkbox"/> U072	<input type="checkbox"/> U080	<input type="checkbox"/> U108	<input type="checkbox"/> U117	<input type="checkbox"/> U122	<input type="checkbox"/> U123	<input type="checkbox"/> U136	<input type="checkbox"/> U154	<input type="checkbox"/> U188	<input type="checkbox"/> U213	<input type="checkbox"/> U220	<input type="checkbox"/> U226	<input type="checkbox"/> U279

ADDITIONAL CODES (Enter all codes not identified above which are associated with waste)

4. USEPA HAZARDOUS WASTE CODE(S)	5. TREATMENT STANDARDS FOR NON-PHASE II STATES (INDICATE THE APPLICABLE TREATMENT STANDARD 268.41, 268.43 OR SPECIFIED TECHNOLOGY)	6. HOW MUST THE WASTE BE MANAGED? ENTER THE LETTER FROM BELOW

To identify F039, or UHCs managed in non-CWA, use the "F039/Underlying Hazardous Constituents Form provided and check here: ☐If no UHCs are present upon generation check here: ☐ Check here if disposal facility will check for all UHCs ☐ (i.e. no UHC form required)To list additional EPA waste code(s), use the supplemental sheet and check here: ☐ In lieu of supplemental sheet you may use multiple copies of this form.

7. SOLVENT CONSTITUENTS (F001 - F005) Check here if disposal facility will check for all spent

<input type="checkbox"/> Acetone	<input type="checkbox"/> Benzene	<input type="checkbox"/> n-Butyl alcohol	<input type="checkbox"/> Carbon disulfide
<input type="checkbox"/> Carbon Tetrachloride	<input type="checkbox"/> Chlorobenzene	<input type="checkbox"/> O-Cresol	<input type="checkbox"/> Cresols (m&p)
<input type="checkbox"/> Cyclohexanone	<input type="checkbox"/> o-Dichlorobenzene	<input type="checkbox"/> 2-Ethoxyethanol	<input type="checkbox"/> Ethyl acetate
<input type="checkbox"/> Ethyl benzene	<input type="checkbox"/> Ethyl ether	<input type="checkbox"/> Isobutanol	<input type="checkbox"/> Methanol
<input type="checkbox"/> Methylene chloride	<input type="checkbox"/> Methyl ethyl ketone	<input type="checkbox"/> Methyl isobutyl ketone	<input type="checkbox"/> Nitrobenzene
<input type="checkbox"/> 2-Nitropropane	<input type="checkbox"/> Pyridine	<input type="checkbox"/> Tetrachloroethylene	<input type="checkbox"/> Toluene
<input type="checkbox"/> 1:1,1 Trichloroethane	<input type="checkbox"/> 1, 1, 2-Trichloroethane	<input type="checkbox"/> 1, 1, 2-Dichloro, 1, 2, 2-trifluoroethane	<input type="checkbox"/> Trichloroethylene
<input type="checkbox"/> Trichloromonofluoromethane	<input type="checkbox"/> Xylenes		

8. (States authorized by EPA to manage the LDR program may have regulatory citations different from the 40 CFR citations listed below. Where these regulatory citations differ, your certification will be deemed to refer to those state citations instead of the 40 CFR citations.)

A. or ☒ RESTRICTED WASTE REQUIRES TREATMENT

This waste must be treated to the applicable treatment standards set forth in 40 CFR Part 268.40

☐ For Hazardous Debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."

B.1 RESTRICTED WASTE TREATMENT TO PERFORMANCE STANDARDS

"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

B.2 (CERTIFICATION REMOVED BY PHASE IV)

B.3 GOOD FAITH AND ANALYTICAL CERTIFICATION - FOR INCINERATED ORGANICS

"I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the nonwastewater organic constituents have been treated by combustion units as specified in 268.42, Table 1. I have been unable to detect the nonwastewater organic constituents, despite having used best good faith efforts to analyze for such constituents. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."

B.4 DECHARACTERIZED WASTE REQUIRES TREATMENT FOR UNDERLYING HAZARDOUS CONSTITUENTS

"I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment."

C. RESTRICTED WASTE SUBJECT TO A VARIANCE

This waste is subject to a national capacity variance, a treatability variance, or a case-by-case extension. Enter the effective date of prohibition in column 5 above.

☐ For hazardous debris: "This hazardous debris is subject to the alternative treatment standards of 40 CFR 268.45."

D. RESTRICTED WASTE CAN BE LAND DISPOSED WITHOUT FURTHER TREATMENT

"I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment."

E. WASTE NOT CURRENTLY SUBJECT TO PART 268 RESTRICTIONS

This waste is a newly identified waste that is not currently subject to any 40 CFR Part 268 restrictions.

I hereby certify that all information in this and all associated documents is complete and accurate, to the best of my knowledge and information.

Signature

Title

Date 12-21-12

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number FLD981925811	2. Page 1 of 1	3. Emergency Response Phone 800-424-9300	4. Manifest Tracking Number <b>007133444 JJK</b>			
5. Generator's Name and Mailing Address Kelly Tractor 8256 NW 58th St. Dept G 100 Miami, FL 33166 US Generator's Phone: 305-562-5360				Generator's Site Address (If different than mailing address)				
6. Transporter 1 Company Name FCC ENVIRONMENTAL LLC				U.S. EPA ID Number TXR000078064				
7. Transporter 2 Company Name FREEHOLD CARTAGE INC.				U.S. EPA ID Number PIL0004105104				
8. Designated Facility Name and Site Address Giant Resource Recovery, Sumter Inc. 755 Industrial Road Sumter, SC 29151 US Facility's Phone: 803-773-1400				U.S. EPA ID Number SC018300 / 174290				
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 Wt./Vol.	13. Waste Codes
				No.	Type			
	X 1.	UN 1526, RQ, WASTE FLAMMABLE SOLIDS, ORGANIC, n.o.s., 4.1, PG II (D001) (toluene, xylene)		1	DM	50	P	D001 F003 F005
	2.							
	3.							
	4.							
14. Special Handling Instructions and Additional Information ERG # 133 SQ# 1535202 APPROVAL 1240433								
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 Signature Month Day Year								
TRANSPORTER INTL	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.							
	Transporter signature (for exports only):							
	17. Transporter Acknowledgment of Receipt of Materials							
DESIGNATED FACILITY	Transporter 1 Printed/Typed Name Signature Month Day Year							
	Transporter 2 Printed/Typed Name Signature Month Day Year							
	18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number:								
18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone:								
18c. Signature of Alternate Facility (or Generator) Month Day Year								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1.		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name Signature Month Day Year								