

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number: **FLR000197939** 2. Page 1 of 3. Emergency Response Phone: **954.696.5949** 4. Waste Tracking Number: **NHWM103116**

5. Generator's Name and Mailing Address: **ECO SERVICES DBA** Generator's Site Address (if different than mailing address): **3923 S State Rd 7**

245 SW 159 Way Sunrise FL 33326 **Dave FI 33314**

Generator's Phone: **954.696.5949** U.S. EPA ID Number: **FLR000197939**

6. Transporter 1 Company Name: **ECO SERVICES DBA** U.S. EPA ID Number:

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

8. Designated Facility Name and Site Address: **TRIUMPH STATE ENVIRONMENTAL** U.S. EPA ID Number:

3701 SW 4th Ave Dave FI 33314 **FLD981018113**

Facility's Phone: **954.583.3795**

9. Waste Shipping Name and Description: 10. Containers: 11. Total Quantity: 12. Unit Wt./Vol.

1. **Empty Drum Scrap Metal 010 DM** **-** **-** **0**

2.

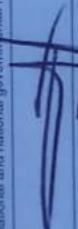
3.

4.

13. Special Handling Instructions and Additional Information:

\$5,000 unit.

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

Generator's/Officer's Printed/Typed Name: **David Bawls** Signature:  Month: **10** Day: **31** Year: **16**

15. International Shipments: ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit: Date leaving U.S.

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials: Manifest Reference Number:

Transporter 1 Printed/Typed Name: **Raul F. Casio** Signature:  Month: **10** Day: **31** Year: **16**

Transporter 2 Printed/Typed Name: Signature: Month: Day: Year:

17. Discrepancy: 17a. Discrepancy Indication Space: ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

17b. Alternate Facility (for Generator): U.S. EPA ID Number:

Facility's Phone: 17c. Signature of Alternate Facility (for Generator):

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in item 17a: Signature:  Month: **10** Day: **31** Year: **16**

Printed/Typed Name: **David Lora**

Generator's Phone:

6. Transporter 1 Company Name

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

U.S. EPA ID Number

Facility's Phone:

9. Waste Shipping Name and Description

No.

Type

11. Total Quantity

12. Unit Wt./Vol.

GENERATOR

13. Special Handling Instructions and Additional Information

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

Generator's/Offeor's Printed/Typed Name

Signature

Month Day

15. International Shipments

☐ Import to U.S.☐ Export from U.S.

Port of entry/exit:

Date leaving U.S.

Month Day

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day

Transporter 2 Printed/Typed Name

Signature

Month Day

17. Discrepancy

17a. Discrepancy Indication Space

☐ Quantity☐ Type☐ Residue☐ Partial Rejection☐ Full Rejection

17b. Alternate Facility (or Generator)

Manifest Reference Number

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day

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

Printed/Typed Name

Signature

Month Day

169-BLS-C-6 10497 (Rev. 9/09)

DESIGNATED FACILITY'S C

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number FLR000197939		2. Page 1 of 1		3. Emergency Response Phone 9546965949		4. Waste Tracking Number VHWM10282016	
5. Generator's Name and Mailing Address 245 SW 159 Way Sawtooth FL 3326 Davie FL 33314		Generator's Site Address (if different than mailing address) 3923 S Stalk Rd + Davie FL 33314							
Generator's Phone: 954 6965949		U.S. EPA ID Number FLR000197939							
6. Transporter 1 Company Name ECO SERVICES DBR INC		U.S. EPA ID Number							
7. Transporter 2 Company Name		U.S. EPA ID Number							
8. Designated Facility Name and Site Address 3301 SW 4th Av 954-5833795		U.S. EPA ID Number FLR981018773							
Facility's Phone:		U.S. EPA ID Number							
9. Waste Shipping Name and Description Non Hazardous used filters		10. Containers No. Type 010 DM 550 gal 010 550 gal		11. Total Quantity		12. Unit WL/Vol. gal			
1. 2.									
3.									
4.									
13. Special Handling Instructions and Additional Information									
14. GENERATOR'S OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.									
Generator's/Officer's Printed/Typed Name David Sawtooth		Signature 		Month Day Year 10 28 16					
15. International Shipments ☐ Import to U.S. ☐ Export from U.S.		Port of entry/exit Date leaving U.S.							
Transporter Signature (for exports only):									
16. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name David Beckwith		Signature 		Month Day Year 10 28 16					
Transporter 2 Printed/Typed Name		Signature		Month Day Year					
17. Discrepancy		☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection							
17a. Discrepancy Indication Space		Manifest Reference Number:							
17b. Alternate Facility (or Generator)		U.S. EPA ID Number							
Facility's Phone:									
17c. Signature of Alternate Facility (or Generator)				Month Day Year					
DESIGNATED FACILITY									
18. Designated Facility Owner or Operator: Confirmation of receipt of materials covered by the manifest except as noted in Item 17a		Signature 		Month Day Year 10 28 16					
Printed/Typed Name									

NON-HAZARDOUS
WASTE MANIFEST

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Waste Tracking Number

5. Generator's Name and Mailing Address

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

245 SW 159th Way Suite F133316
Daire FL 333143923 State Rd 1
Daire FL 33314

Generator's Phone:

6. Transporter 1 Company Name

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

U.S. EPA ID Number

3401 SW 4th Ave Daire FL 33314
FLD981018443

Facility's Phone:

9. Waste Shipping Name and Description

10. Containers
No. Type11. Total
Quantity12. Unit
Wt./Vol.1. Petroleum Contaminated Soil
(Non-Petroleum)

03 DM

165 gal

3.

4.

13. Special Handling Instructions and Additional Information

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

Generator's/Officer's Printed/Typed Name

Signature

Month Day Year

15. International Shipments

☐ Import to U.S.☐ Export from U.S.Port of entry/exit:
Date leaving U.S.:Month Day Year
10/31/16

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

☐ Quantity☐ Type☐ Residue☐ Partial Rejection☐ Full Rejection

17a. Discrepancy Indication Space

17b. Alternate Facility (or Generator)

Manifest Reference Number:

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

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