

FLD984171694

SK SHIP# 218249188
216695691

Form Approved. OMB No. 2050-0039

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CCSG	2. Page 1 of 1	3. Emergency Response Phone No. 800-468-1760	4. Manifest Tracking Number 004831660 SKS
5. Generator's Name and Mailing Address International Coll Repr Center 13400 SW 128 St Miami FL 33178			Generator's Site Address (if different than mailing address)		
6. Generator's Phone: SAFETY-KLEEN SYSTEMS, INC.			U.S. EPA ID Number TXR000091205		
7. Transporter 2 Company Name			U.S. EPA ID Number		
8. Designated Facility Name and Site Address SAFETY-KLEEN SYSTEMS, INC. 8755 NORTHWEST 95TH ST MEDLEY, FL 33178 305-684-0123			U.S. EPA ID Number FLD984171694		
Facility's Phone:					
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
			No.	Type	12. Unit Wt./Vol.
	X	1. UN1263 WASTE PAINT RELATED MATERIAL 3 PGII RQ(D001) (F003, F005 D005, D006, D018, D035, D039, D040)	1	DM	120
		2.			
		3.			
		4.			
13. Waste Codes F003 F005 D001 D005 D006 D018					
14. Special Handling Instructions and Additional Information TSO:MFL 69103935 USG: 11032433					
24 HR EMERGENCY #1-800-468-1760 (SAFETY-KLEEN) SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY 110001021024					
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.					
Generator's/Officer's Printed/Typed Name JOSE L BEATE			Signature 		Month Day Year 11 18 16
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.:				
	Transporter signature (for exports only):				
	17. Transporter Acknowledgment of Receipt of Materials				
	Transporter 1 Printed/Typed Name Christian Arz		Signature 		Month Day Year 11 18 16
	Transporter 2 Printed/Typed Name		Signature		Month Day Year
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				
	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. H141	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 Gail Gonzalez			Signature 		Month Day Year 11 18 16