

Approval # A 221561TPA

298580

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Form Approved. OMB No. 2050-0039

|   |   |   |    |  |                |   |                    |   |                             |                   |                   |  |      |  |
|---|---|---|----|--|----------------|---|--------------------|---|-----------------------------|-------------------|-------------------|--|------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>  |    | 2. Page 1 of<br>Page 1   |                | 3. Emergency Response Phone<br><b>3E@800-451-8348</b> |                    | 4. Manifest Tracking Number<br><b>014505335 JJK</b> |                             |                   |                   |  |      |  |
| 5. Generator's Name and Mailing Address<br><b>AMSPEC SERVICES, LLC<br/>1249 SOUTH RIVER ROAD SUITE 204<br/>CRANBURY, NJ 08512<br/>908-925-7533</b>  |   |   |    | Generator's Site Address (if different than mailing address)<br><b>AMSPEC - TAMPA<br/>5803 BRECKENRIDGE PKWY SUITE D<br/>TAMPA, FL 33610</b> |                |   |                    |   |                             |                   |                   |  |      |  |
| Generator's Phone:<br><b>908-925-7533</b>   |   |   |    |  |                | U.S. EPA ID Number<br><b>FLR000083071</b>             |                    |   |                             |                   |                   |  |      |  |
| 6. Transporter 1 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |   |    | 954-763-3390   |                | U.S. EPA ID Number                                    |                    |   |                             |                   |                   |  |      |  |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |   |    |  |                | U.S. EPA ID Number                                    |                    |   |                             |                   |                   |  |      |  |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-6302</b>  |   |   |    |  |                | U.S. EPA ID Number<br><b>FLD021032404</b>             |                    |   |                             |                   |                   |  |      |  |
| 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 | 12. Unit Wt./Vol.                                   | 13. Waste Codes             |                   |                   |  |      |  |
|   |   | 1. <b>UN1993, Flammable liquids, n.o.s., S.P.O.#, (Gasoline, Acetone) APP: 653743.342359</b><br><b>Comp # 1102873</b> |    |  | No.            | Type  |                    |   |                             |                   |                   |  |      |  |
|   |   |   |    |  | <b>1</b>       | <b>DM</b>   | <b>55</b>          |   | <b>0001, F003D018, F005</b> |                   |                   |  |      |  |
|   |   |   |    |  |                |   |                    |   |                             |                   |                   |  |      |  |
|   |   |   |    |  |                |   |                    |   |                             |                   |                   |  |      |  |
| 14. Special Handling Instructions and Additional Information  |   |   |    |  |                |   |                    |   |                             |                   |                   |  |      |  |
| 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<br><b>Eled G9b7c</b>   |   |   |    | Signature<br>  |                | Month<br><b>4</b>                                     |                    | Day<br><b>22</b>                                    |                             | Year<br><b>22</b> |                   |  |      |  |
| 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):   |   |    |  |                |   |                    |   |                             |                   |                   |  |      |  |
| TRANSPORTER   | 17. Transporter Acknowledgment of Receipt of Materials  |   |    |  |                |   |                    |   |                             |                   |                   |  |      |  |
|   | Transporter 1 Printed/Typed Name<br><b>Christopher Roman</b>  |   |    |  | Signature<br>  |   | Month<br><b>4</b>  |   | Day<br><b>22</b>            |                   | Year<br><b>22</b> |  |      |  |
|   | 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. <b>H141</b>  |   | 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<br><b>ANN STEIGER</b>  |   |    |  | Signature<br>  |   | Month<br><b>4</b>  |   | Day<br><b>22</b>            |                   | Year<br><b>22</b> |  |      |  |

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| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>  |  | 1. Generator ID Number<br><b>FLR000224121</b> | 2. Page 1 of<br><b>Page 1</b> | 3. Emergency Response Phone<br><b>3E@800-451-8348</b> | 4. Manifest Tracking Number<br><b>022158365 JJK</b>   |                        |                                  |
|--|--|---|-------------------------------|---|---|------------------------|----------------------------------|
| 5. Generator's Name and Mailing Address<br><b>AMSPEC - CAPE CANAVERAL<br/>AMSPEC - CAPE CANAVERAL<br/>191 CENTER STREET<br/>CAPE CANAVERAL, FL 32920</b>   |  |   |                               |   | Generator's Site Address (if different than mailing address)<br><b>AMSPEC - CAPE CANAVERAL<br/>191 CENTER STREET<br/>CAPE CANAVERAL, FL 32920</b> |                        |                                  |
| Generator's Phone: <b>321.855.8900</b>   |  |   |                               |   | U.S. EPA ID Number<br><b>FLR000083071</b>   |                        |                                  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>  |  |   |                               |   | U.S. EPA ID Number<br><b>964-763-3390</b>   |                        |                                  |
| 7. Transporter 2 Company Name  |  |   |                               |   | U.S. EPA ID Number  |                        |                                  |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>  |  |   |                               |   | U.S. EPA ID Number<br><b>FLO091032404</b>   |                        |                                  |
| Facility's Phone: <b>813-623-5302</b>  |  |   |                               |   |   |                        |                                  |
| 9a.<br>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. UN1983, Flammable liquids, n.o.s., 3, PG II, (Gasoline and diesel fuel)(APPV# A181531TPA) 652901.341147     | 3   | DM                            | 165   | G   | D001, F003, D018, F005 |                                  |
|  | 2.   |   |                               |   |   |                        |                                  |
|  | 3.   |   |                               |   |   |                        |                                  |
|  | 4.   |   |                               |   |   |                        |                                  |
| 14. Special Handling Instructions and Additional Information<br><b>① 371/lbs ② 367/lbs ③ 379/lbs</b>   |  |   |                               |   |   |                        |                                  |
| 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.<br>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<br><b>X TASHA GREER</b>   |  |   |                               |   | Signature<br><b>X [Signature]</b>   |                        | Month Day Year<br><b>4 12 22</b> |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____<br>Transporter signature (for exports only): _____ Date leaving U.S.: _____  |  |   |                               |   |   |                        |                                  |
| 17. Transporter Acknowledgment of Receipt of Materials   |  |   |                               |   |   |                        |                                  |
| Transporter 1 Printed/Typed Name<br><b>PAUL HAGERTY</b>  |  |   |                               |   | Signature<br><b>[Signature]</b>   |                        | Month Day Year<br><b>4 12 22</b> |
| 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. <b>H141</b>   |  | 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<br><b>ANN STEIGER</b>   |  |   |                               |   | Signature<br><b>[Signature]</b>   |                        | Month Day Year<br><b>4 12 22</b> |

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|   |  |   |  |   |   |
|---|--|---|--|---|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLD050693852</b> | 2. Page 1 of<br><b>Page 1</b>  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487159 JJK</b> |
| 5. Generator's Name and Mailing Address<br><b>DAYTON GRANGER<br/>3289 SW 9TH AVENUE<br/>FORT LAUDERDALE, FL 33316</b> |  |   | Generator's Site Address (if different than mailing address)<br><b>DAYTON GRANGER<br/>3289 SW 9TH AVENUE<br/>FORT LAUDERDALE, FL 33316</b> |   |   |
| Generator's Phone: <b>854-463-3451</b>  |  |   |  |   |   |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |  |   | 854-763-3390   |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |
| 7. Transporter 2 Company Name   |  |   |  |   | U.S. EPA ID Number                                  |
| 8. Designated Facility Name<br><b>US ECOLOGY TAMPA, INC</b>   |  |   |  |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |
| 2002 N. ORIENT RD, TAMPA, FL  |  |   |  |   |   |
| Facility's Phone: <b>813-623-5302</b>   |  |   |  |   |   |

| 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. UN2734, Waste, Amines, liquid, corrosive, flammable, n.o.s. Tetraethylenepentamine, Aliphatic Amine) 543448.327164<br><i>3, 8, PG II C1718S9T8A</i> | 1              | DF   | 15                 | 6.6               | D001, D002                                |
| X      | 2. UN1950, Waste, Aerosols, flammable, (each not exceeding 1 L capacity), 2.1, APPROV: K211801TPA 543448.327170  | 1              | DF   | 5                  | 6.6               | D001                                      |
| X      | 3. UN2929, Waste, Flammable liquids, toxic, n.o.s., (methylene chloride, methanol) 6.1 (3), PG II, APPR 543448.327171<br><i>K211801TPA</i>             | 1              | DF   | 15                 | 6                 | D001, U080, F002<br><del>U122, D035</del> |
| X      | 4. UN1263, Waste, Paint related material, 3, PG II APPROV: B201657TPA 543448.327173  | 1              | CW   | 220                | 6.6               | D001                                      |

14. Special Handling Instructions and Additional Information  
 ① 391b's ② 11.1b's ③ 591b's ④ 1271b's ⑤ 591b's ⑥ 2191b's  
 ⑦ 3291b's

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: *Willy Euge* Signature: *Willy Euge* Month: *19* Day: *10* Year: *2002*

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

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: *MAWA* Signature: *MAWA* Month: *4* Day: *18* Year: *2002*

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

18. Discrepancy

18a. Discrepancy Indication Space ☒ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

LINE 4 BOX 11 SHOULD BE 35L AS SHOWN IN BOX 14

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. *H141* 3. *H141* 4. *H141*

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: *ANN STEIGER* Signature: *Ann Steiger* Month: *4* Day: *21* Year: *2002*

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

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|   |  |  |  |                               |  |   |  |  |  |   |  |
|---|--|--|--|-------------------------------|--|---|--|--|--|---|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLCESQG</b>   |  | 2. Page 1 of<br><b>Page 1</b> |  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> |  | 4. Manifest Tracking Number<br><b>023487269 JJK</b>  |  |   |  |
|   |  | 5. Generator's Name and Mailing Address<br><b>FERRETTI GROUP<br/>1445 SE 16TH STREET<br/>FORT LAUDERDALE, FL 33316-0000<br/>954-462-5527</b> |  |                               |  |   |  | Generator's Site Address (if different than mailing address)<br><b>FERRETTI GROUP<br/>1445 SE 16TH STREET<br/>FORT LAUDERDALE, FL 33316-0000</b> |  |   |  |
| 6. Generator's Phone:<br><b>954-462-5527</b>  |  | 6. Transporter 1 Company Name<br><b>Chm Bery (DANA)</b>  |  |                               |  | 954-763-3380  |  |  |  | U.S. EPA ID Number<br><b>FLR000083071</b> |  |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA INC</b>  |  |  |  |                               |  |   |  |  |  | U.S. EPA ID Number<br><b>FLD981932494</b> |  |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |  |  |  |                               |  |   |  |  |  |   |  |
| Facility's Phone:   |  |  |  |                               |  | 10. Containers  |  | 11. Total Quantity   |  | 12. Unit Wt./Vol.                         |  |
| 9a. HM  |  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                               |  |                               |  | No. Type  |  | Quantity   |  | 13. Waste Codes                           |  |
| X   |  | 1. UN1950, Waste, Aerosols, flammable, (each not exceeding 1 L capacity), 2.1, 551527.340003   |  |                               |  | 1 DF  |  | 26   |  | D001                                      |  |
|   |  | 2.   |  |                               |  |   |  |  |  |   |  |
|   |  | 3.   |  |                               |  |   |  |  |  |   |  |
|   |  | 4.   |  |                               |  |   |  |  |  |   |  |
| 14. Special Handling Instructions and Additional Information<br><br><b>26165</b>  |  |  |  |                               |  |   |  |  |  |   |  |
| 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<br><b>Charmen Ahmarar</b>  |  |  |  |                               |  | Signature<br><i>[Signature]</i>                       |  | Month<br><b>14</b>   |  | Day<br><b>1</b>                           |  |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.   |  |  |  |                               |  | Port of entry/exit:<br>Date leaving U.S.:             |  | Year<br><b>22</b>  |  |   |  |
| 17. Transporter Acknowledgment of Receipt of Materials  |  |  |  |                               |  | Signature<br><b>Ken Hill</b>                          |  | Month<br><b>14</b>   |  | Day<br><b>1</b>                           |  |
| Transporter 1 Printed/Typed Name<br><b>Ken Hill</b>   |  |  |  |                               |  | Signature   |  | Year<br><b>22</b>  |  |   |  |
| Transporter 2 Printed/Typed Name  |  |  |  |                               |  |   |  |  |  |   |  |
| 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:  |  |  |  |                               |  | U.S. EPA ID Number                                    |  |  |  |   |  |
| 18b. Alternate Facility (or Generator)  |  |  |  |                               |  |   |  |  |  |   |  |
| Facility's Phone:   |  |  |  |                               |  |   |  | Month  |  | Day                                       |  |
| 18c. Signature of Alternate Facility (or Generator)   |  |  |  |                               |  |   |  | Year   |  |   |  |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)   |  |  |  |                               |  |   |  |  |  |   |  |
| 1.  |  | 2.   |  | 3.                            |  | 4.  |  |  |  |   |  |
| <b>H14</b>  |  |  |  |                               |  |   |  |  |  |   |  |
| 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<br><b>Ann Steger</b>   |  |  |  |                               |  | Signature<br><i>[Signature]</i>                       |  | Month<br><b>14</b>   |  | Day<br><b>8</b>                           |  |
|   |  |  |  |                               |  |   |  | Year<br><b>26</b>  |  |   |  |

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|   |  |  |  |                               |  |  |  |   |  |                   |  |                   |  |
|---|--|--|--|-------------------------------|--|--|--|---|--|-------------------|--|-------------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLCESQG</b>   |  | 2. Page 1 of<br><b>Page 1</b> |  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>  |  | 4. Manifest Tracking Number<br><b>023487270 JJK</b> |  |                   |  |                   |  |
| 5. Generator's Name and Mailing Address<br><b>MTKP CUSTOM PAINTING<br/>1860 NORTHWEST 29TH STREET<br/>FORT LAUDERDALE, FL 33311<br/>954-594-7485</b>  |  |  |  |                               |  | Generator's Site Address (if different than mailing address)<br><b>MTKP CUSTOM PAINTING<br/>1860 NORTHWEST 29TH STREET<br/>FORT LAUDERDALE, FL 33311</b> |  |   |  |                   |  |                   |  |
| 6. Generator's Name<br><b>CLIF BERRY (DANIA)</b>  |  |  |  |                               |  | 954-783-3390   |  | U.S. EPA ID Number<br><b>FLR000083071</b>           |  |                   |  |                   |  |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA INC</b>  |  |  |  |                               |  | U.S. EPA ID Number   |  |   |  |                   |  |                   |  |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |  |  |  |                               |  | U.S. EPA ID Number<br><b>FLD981932494</b>  |  |   |  |                   |  |                   |  |
| Facility's Phone:   |  |  |  |                               |  |  |  |   |  |                   |  |                   |  |
| 9a. HM  |  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |  |                               |  | 10. Containers<br>No. Type   |  | 11. Total Quantity                                  |  | 12. Unit WL/Vol.  |  | 13. Waste Codes   |  |
| X   |  | 1. UN1993, Waste, Flammable liquids, n.o.s., (Toluene and Xylene), 3, PG II APP; L180605TPA 552246.340284      |  |                               |  | 1 DF   |  | 55 G  |  |                   |  | D001, F003, F005  |  |
|   |  | 2.   |  |                               |  |  |  |   |  |                   |  |                   |  |
|   |  | 3.   |  |                               |  |  |  |   |  |                   |  |                   |  |
|   |  | 4.   |  |                               |  |  |  |   |  |                   |  |                   |  |
| 14. Special Handling Instructions and Additional Information<br><br><b>Line 1 H483</b>  |  |  |  |                               |  |  |  |   |  |                   |  |                   |  |
| 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<br><b>X Phantega from</b>  |  |  |  |                               |  | Signature<br><b>X [Signature]</b>  |  | Month<br><b>4</b>                                   |  | Day<br><b>6</b>   |  | Year<br><b>22</b> |  |
| 16. International Shipments: <input type="checkbox"/> Import to U.S. <input checked="" type="checkbox"/> Export from U.S.   |  |  |  |                               |  | Port of entry/exit:<br>Date leaving U.S.:  |  |   |  |                   |  |                   |  |
| 17. Transporter Acknowledgment of Receipt of Materials  |  |  |  |                               |  | Signature<br><b>Ken Hill</b>   |  | Month<br><b>4</b>                                   |  | Day<br><b>6</b>   |  | Year<br><b>22</b> |  |
| Transporter 1 Printed/Typed Name<br><b>Proval L180605TPA</b>  |  |  |  |                               |  | Signature<br><b>Ken Hill</b>   |  | Month<br><b>4</b>                                   |  | Day<br><b>6</b>   |  | Year<br><b>22</b> |  |
| 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   |  |  |  |                               |  |  |  |   |  |                   |  |                   |  |
| 18b. Alternate Facility (or Generator)  |  |  |  |                               |  | Manifest Reference Number: U.S. EPA ID Number  |  |   |  |                   |  |                   |  |
| Facility's Phone:   |  |  |  |                               |  |  |  |   |  |                   |  |                   |  |
| 18c. Signature of Alternate Facility (or Generator)   |  |  |  |                               |  | Month<br><b>4</b>  |  | Day<br><b>8</b>                                     |  | Year<br><b>22</b> |  |                   |  |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)   |  |  |  |                               |  |  |  |   |  |                   |  |                   |  |
| 1.  |  | 2.   |  | 3.                            |  | 4.   |  |   |  |                   |  |                   |  |
| H141  |  |  |  |                               |  |  |  |   |  |                   |  |                   |  |
| 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<br><b>ANN STEIGER</b>  |  |  |  |                               |  | Signature<br><b>Ann Steiger</b>  |  | Month<br><b>4</b>                                   |  | Day<br><b>8</b>   |  | Year<br><b>22</b> |  |

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|   |  |   |  |                            |  |  |  |   |  |
|---|--|---|--|----------------------------|--|--|--|---|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLR000236489</b> |  | 2. Page 1 of <b>Page 1</b> |  | 3. Emergency Response Phone<br><b>352-451-8340</b> |  | 4. Manifest Tracking Number<br><b>023487271 JJK</b> |  |
| 5. Generator's Name and Mailing Address<br><b>AVIATION INFLATABLES, INC.<br/>1655 NW 136 AVE BLDG M<br/>SUNRISE, FL 33323</b>   |  |   |  |                            |  |  |  |   |  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |  |   |  |                            |  |  |  |   |  |
| 7. Transporter 2 Company Name   |  |   |  |                            |  |  |  |   |  |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>   |  |   |  |                            |  |  |  |   |  |
| 9a. 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   |  |   |  |                            |  |  |  |   |  |
| 14. Special Handling Instructions and Additional Information<br><b>① 169 lbs, ② 263, ③ 237 lbs,</b>   |  |   |  |                            |  |  |  |   |  |
| 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. |  |   |  |                            |  |  |  |   |  |
| 16. International Shipments   |  |   |  |                            |  |  |  |   |  |
| 17. Transporter Acknowledgment of Receipt of Materials  |  |   |  |                            |  |  |  |   |  |
| 18. Discrepancy   |  |   |  |                            |  |  |  |   |  |
| 18a. Discrepancy Indication Space   |  |   |  |                            |  |  |  |   |  |
| 18b. Alternate Facility (or Generator)  |  |   |  |                            |  |  |  |   |  |
| 18c. Signature of Alternate Facility (or Generator)   |  |   |  |                            |  |  |  |   |  |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)   |  |   |  |                            |  |  |  |   |  |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a  |  |   |  |                            |  |  |  |   |  |

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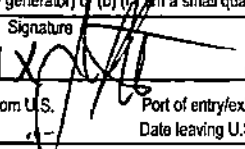
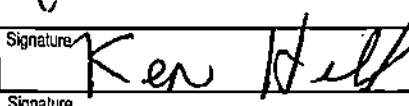
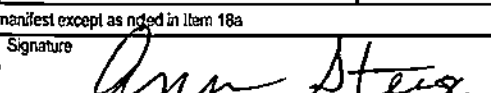
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|  |  |   |                               |   |   |   |                 |  |
|--|--|---|-------------------------------|---|---|---|-----------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>  |  | 1. Generator ID Number<br><b>FLR000253187</b> | 2. Page 1 of<br><b>Page 1</b> | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>   | 4. Manifest Tracking Number<br><b>023487272 JJK</b> |   |                 |  |
| 5. Generator's Name and Mailing Address<br><b>ADHESIVES TECHNOLOGY CORP<br/>450 EAST COPANS ROAD<br/>POMPANO BEACH, FL 33084</b>   |  |   |                               | Generator's Site Address (if different than mailing address)<br><b>ADHESIVES TECHNOLOGY CORP<br/>450 EAST COPANS ROAD<br/>POMPANO BEACH, FL 33084</b> |   |   |                 |  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>  |  |   |                               | 954-461-2350<br><b>954-763-3390</b>   |   | U.S. EPA ID Number<br><b>FLR000083071</b> |                 |  |
| 7. Transporter 2 Company Name  |  |   |                               | U.S. EPA ID Number  |   |   |                 |  |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>  |  |   |                               | U.S. EPA ID Number<br><b>FLD981932494</b>   |   |   |                 |  |
| Facility's Phone<br><b>813-623-5302</b>  |  |   |                               |   |   |   |                 |  |
| 9a. HM   | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |   |                               | 10. Containers<br>No. Type  | 11. Total Quantity                                  | 12. Unit Wt./Vol.                         | 13. Waste Codes |  |
|  | UN1993, Waste flammable liquids, n.o.s. (Ethanol, Xylene), 3, PG II 552294.340363                              |   |                               | 8 TP  | 2200 G  | D001                                      |                 |  |
|  | UN1993, Waste flammable liquids, n.o.s. (Ethanol, Xylene), 3, PG II 552294.340364                              |   |                               | 2 DM  | 110 G   | D001                                      |                 |  |
|  | 3.   |   |                               |   |   |   |                 |  |
|  | 4.   |   |                               |   |   |   |                 |  |
| 14. Special Handling Instructions and Additional Information<br><b>① 2244 lbs ② 2256 lbs ③ 1804 lbs ④ 2213 lbs ⑤ 1836 lbs ⑥ 2110 lbs<br/>⑦ 2317 lbs ⑧ 2417 lbs ⑨ 431 lbs ⑩ 57 lbs</b>  |  |   |                               |   |   |   |                 |  |
| 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.<br>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<br><b>Krista Maroni</b>   |  |   |                               | Signature<br><i>Krista Maroni</i>   |   | Month Day Year<br><b>4 7 22</b>           |                 |  |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____<br>Transporter signature (for exports only): _____ Date leaving U.S.: _____  |  |   |                               |   |   |   |                 |  |
| 17. Transporter Acknowledgment of Receipt of Materials   |  |   |                               |   |   |   |                 |  |
| Transporter 1 Printed/Typed Name<br><b>IGNACIO BARRIA</b>  |  |   |                               | Signature<br><i>Ignacio Barria</i>  |   | Month Day Year<br><b>4 7 22</b>           |                 |  |
| 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. <b>H141</b>   |  | 2. <b>H141</b>                                |                               | 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<br><b>ANN STEIGER</b>   |  |   |                               | Signature<br><i>Ann Steiger</i>   |   | Month Day Year<br><b>4 14 22</b>          |                 |  |



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|   |  |  |                |   |   |   |
|---|--|--|----------------|---|---|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLCESQG</b> | 2. Page 1 of 3 | 3. Emergency Response Phone<br><b>800-451-8346</b>  | 4. Manifest Tracking Number<br><b>023487273 JJK</b> |   |
| 5. Generator's Name and Mailing Address<br><b>EDDIE DIMEGLIOS COLLISION EXPERTS<br/>4375 SOUTHWEST 60TH AVENUE<br/>DAVIE, FL 33314<br/>954-792-8514</b>   |  |  |                | Generator's Site Address (if different than mailing address)<br><b>EDDIE DIMEGLIOS COLLISION EXPERTS<br/>4375 SOUTHWEST 60TH AVENUE<br/>DAVIE, FL 33314</b> |   |   |
| Generator's Phone:<br><b>Cliff Berry (DANIEL)</b>   |  |  |                | 954-763-3390  |   | U.S. EPA ID Number<br><b>FLR000083071</b> |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |  |  |                | U.S. EPA ID Number<br><b>FLD981932494</b>   |   |   |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>913-623-5302</b>  |  |  |                | U.S. EPA ID Number<br><b>FLD981932494</b>   |   |   |
| Facility's Phone:   |  |  |                |   |   |   |
| 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |  |                | 10. Containers<br>No. Type  | 11. Total Quantity                                  | 12. Unit Wt./Vol.                         |
| 1   | UN1993, Waste, Flammable liquids, n.o.s., (Acetone AND Toluene )3, PG II APP; C220881TPA 552310.340383         |  |                | 55  | G   | D001                                      |
| 2.  |  |  |                |   |   |   |
| 3.  |  |  |                |   |   |   |
| 4.  |  |  |                |   |   |   |
| 14. Special Handling Instructions and Additional Information<br><br><b>Line 1 # 459</b>   |  |  |                |   |   |   |
| 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<br><b>X JOHN ARGENTINE</b>   |  |  |                | Signature<br>   |   | Month Day Year<br><b>4/4/22</b>           |
| 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<br><b>Ken Hill</b>   |  |  |                | Signature<br>   |   | Month Day Year<br><b>4/4/22</b>           |
| 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. <b>H141</b>  |  | 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<br><b>ANN STEIGER</b>  |  |  |                | Signature<br>   |   | Month Day Year<br><b>4/8/22</b>           |

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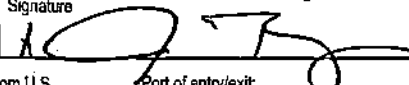
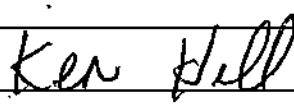
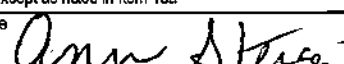
Form Approved. OMB No. 2050-0039

|   |  |  |    |                            |   |                    |   |                 |    |  |  |
|---|--|--|----|----------------------------|---|--------------------|---|-----------------|----|--|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLCESQG</b> |    | 2. Page 1 of 3             | 3. Emergency Response Phone<br><b>352-800-451-8346</b>  |                    | 4. Manifest Tracking Number<br><b>023487274 JJK</b> |                 |    |  |  |
| 5. Generator's Name and Mailing Address<br><b>JOE VS YACHT REFINISHING INC<br/>3764 SOUTHWEST 30TH AVENUE<br/>FORT LAUDERDALE, FL 33312<br/>954-306-3301</b>  |  |  |    |                            | Generator's Site Address (if different than mailing address)<br><b>DERECKTORS SHIPYARD<br/>775 TAYLOR LANE<br/>DANIA, 33004</b> |                    |   |                 |    |  |  |
| 6. Transporter 1 Company Name<br><b>Shirley Berry (DANIA)</b>   |  |  |    |                            | 954-763-3390  |                    | U.S. EPA ID Number<br><b>FLR000083071</b>           |                 |    |  |  |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |  |  |    |                            | U.S. EPA ID Number<br><b>FLD981932494</b>   |                    |   |                 |    |  |  |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-823-5302</b>  |  |  |    |                            | U.S. EPA ID Number<br><b>FLD981932494</b>   |                    |   |                 |    |  |  |
| Facility's Phone:   |  |  |    |                            |   |                    |   |                 |    |  |  |
| 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |  |    | 10. Containers<br>No. Type |   | 11. Total Quantity | 12. Unit Wt./Vol.                                   | 13. Waste Codes |    |  |  |
|   | UN1993, Waste, Flammable liquids, n.o.s., (Toluene and Xylene)3, PG II (APPV#C190992TPA) 551226.338777         |  |    | 2 DF 30                    |   | G                  | D001  | F003, F005      |    |  |  |
|   | 2.   |  |    |                            |   |                    |   |                 |    |  |  |
|   | 3.   |  |    |                            |   |                    |   |                 |    |  |  |
|   | 4.   |  |    |                            |   |                    |   |                 |    |  |  |
| 14. Special Handling Instructions and Additional Information<br><b>Live 1 122 126</b>   |  |  |    |                            |   |                    |   |                 |    |  |  |
| 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/Offero's Printed/Typed Name<br><b>Michael Nelson</b>  |  |  |    |                            | Signature<br><b>Michael Nelson</b>  |                    | Month Day Year<br><b>14 5 22</b>                    |                 |    |  |  |
| 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<br><b>Ken Hill</b>   |  |  |    |                            | Signature<br><b>Ken Hill</b>  |                    | Month Day Year<br><b>14 5 22</b>                    |                 |    |  |  |
| 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. <b>H141</b>  |  |  | 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<br><b>ANN STEIGER</b>  |  |  |    |                            | Signature<br><b>Ann Steiger</b>   |                    | Month Day Year<br><b>14 8 22</b>                    |                 |    |  |  |

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|   |        |   |   |  |   |                    |                 |
|---|--------|---|---|--|---|--------------------|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |        | 1. Generator ID Number<br><b>FLR000166751</b>   | 2. Page 1 of <b>3</b>   | 3. Emergency Response Phone<br><b>800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487276 JJK</b> |                    |                 |
| 5. Generator's Name and Mailing Address<br><b>IRL LABS</b><br><b>5381 NW 33RD AVENUE</b><br><b>FORT LAUDERDALE, FL 33309</b><br>954-777-0018<br>Generator's Phone:  |        |   | Generator's Site Address (if different than mailing address)<br><b>IRL LABS</b><br><b>5381 NW 33RD AVENUE</b><br><b>FORT LAUDERDALE, FL 33309</b> |  |   |                    |                 |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |        |   | 954-763-3390  |  | U.S. EPA ID Number<br><b>FLR000083071</b>           |                    |                 |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA INC</b>  |        |   |   |  | U.S. EPA ID Number                                  |                    |                 |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL</b><br><b>813-623-5302</b><br>Facility's Phone:   |        |   | U.S. EPA ID Number<br><b>FLD981932494</b>   |  |   |                    |                 |
| GENERATOR'S<br>CONTAINERS   | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))        | 10. Containers<br>No.   | Type   | 11. Total Quantity                                  | 12. Unit Wt./Vol.  | 13. Waste Codes |
|   |        | <b>UN1993, Waste, Flammable liquids, n.o.s., (contains xylene)</b><br><b>3, PG II (APPROVAL IRL001) 552524.340867</b> | <b>1</b>  | <b>DF</b>  | <b>G</b>  | <b>D001</b>        | <b>F003</b>     |
|   |        |   |   |  |   |                    |                 |
|   |        |   |   |  |   |                    |                 |
|   |        |   |   |  |   |                    |                 |
| 14. Special Handling Instructions and Additional Information<br><br><b>Line 1 # 424</b>   |        |   |   |  |   |                    |                 |
| 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<br><b>X John Bowling</b>   |        |   | Signature<br>   |  | Month Day Year<br><b>4 6 22</b>                     |                    |                 |
| 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<br><b>Ken Hill</b>   |        |   | Signature<br>   |  | Month Day Year<br><b>4 6 22</b>                     |                    |                 |
| 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. <b>H141</b>  |        | 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<br><b>ANN STEIGER</b>  |        |   | Signature<br>   |  | Month Day Year<br><b>4 8 22</b>                     |                    |                 |

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|---|---|--|--|--|---|---|------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b> |  | 2. Page 1 of<br><b>Page 1</b>  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487282 JJK</b> |                  |
| 5. Generator's Name and Mailing Address<br><b>APS-AIR PARTS SERVICE &amp; SUPPLIES LIMITED</b><br><b>7178 NORTHWEST 12TH STREET</b><br><b>MIAMI, FL 33126</b><br><b>305-471-8500</b>  |   |  |  | Generator's Site Address (if different than mailing address)<br><b>APS-AIR PARTS SERVICE &amp; SUPPLIES</b><br><b>6964 NORTHWEST 12TH STREET</b><br><b>MIAMI, FL 33126</b> |   |   |                  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |  |  | 854-763-3390   |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                  |
| 7. Transporter 2 Company Name   |   |  |  |  |   | U.S. EPA ID Number                                  |                  |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC</b><br><b>2002 N. ORIENT RD, TAMPA, FL</b><br><b>813-623-5302</b>  |   |  |  |  |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |                  |
| Facility's Phone:   |   |  |  |  |   |   |                  |
| 9a. HM.   | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))    |  |  | 10. Containers<br>No. Type   |   | 11. Total Quantity                                  | 12. Unit WL/Vol. |
|   | 1X UN1950, Waste, Aerosols, flammable, (each not exceeding 1 L capacity), 2.1, 552787.341418<br><i>220818 TPA</i> |  |  | 1 / DF   |   | 15  | P                |
|   |   |  |  |  |   |   | D001             |
|   |   |  |  |  |   |   |                  |
|   |   |  |  |  |   |   |                  |
|   |   |  |  |  |   |   |                  |
| 14. Special Handling Instructions and Additional Information<br><i>0, 816's</i>   |   |  |  |  |   |   |                  |
| 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<br><i>0 Andre Alvarado</i>   |   |  |  | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><i>14 14 22</i>                   |                  |
| 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<br><i>Michael Lewis</i>  |   |  |  | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><i>14 14 22</i>                   |                  |
| 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. <i>H141</i>  |   | 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<br><i>ANN STEIGEL</i>  |   |  |  | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><i>14 12 22</i>                   |                  |

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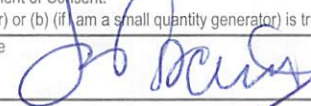


|   |   |  |                               |   |   |                    |                   |                        |
|---|---|--|-------------------------------|---|---|--------------------|-------------------|------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>   | 2. Page 1 of<br><b>Page 1</b> | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487284 JJK</b> |                    |                   |                        |
| 5. Generator's Name and Mailing Address<br><b>FINISH CREATION INC.<br/>7980 WEST 25TH AVENUE<br/>HIALEAH, FL, 33016-0000</b>  |   |  |                               |   |   |                    |                   |                        |
| Generator's Phone: <b>786-507-7222</b>  |   |  |                               |   |   |                    |                   |                        |
| Generator's Site Address (if different than mailing address)<br><b>FINISH CREATION INC.<br/>7980 WEST 25TH AVENUE<br/>HIALEAH, FL 33016-0000</b>  |   |  |                               |   |   |                    |                   |                        |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |  |                               | 954-763-3390  |   |                    |                   |                        |
| 7. Transporter 2 Company Name   |   |  |                               | U.S. EPA ID Number<br><b>FLR000083071</b>             |   |                    |                   |                        |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>   |   |  |                               | U.S. EPA ID Number<br><b>FLD981932494</b>             |   |                    |                   |                        |
| Facility's Phone: <b>813-623-5302</b>   |   |  |                               |   |   |                    |                   |                        |
| GENERATOR   | 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))   |                               | 10. Containers<br>No. Type                            |   | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes        |
|   | 1.  | X UN1325, Waste, Flammable solids, organic, n.o.s., (Xylene, Toluene), 4.1, PG II, APP; D220907TPA 551633.339441 |                               | 1 DM  |   | 55                 | G                 | D001, F003, F005       |
|   | 2.  | X UN1993, Waste, Flammable liquids, n.o.s. (Xylene, Toluene), 3, PG II (appr # F140844EQF) 551633.339442         |                               | 2 DM  |   | 110                | G                 | D001, D035, F003, F005 |
|   | 3.  |  |                               |   |   |                    |                   |                        |
|   | 4.  |  |                               |   |   |                    |                   |                        |
| 14. Special Handling Instructions and Additional Information<br><b>① 92 lb's, ② 441 lb's, ③ 401 lb's</b>  |   |  |                               |   |   |                    |                   |                        |
| 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<br><b>Blanca Hernandez</b>   |   |  |                               |   |   |                    |                   |                        |
| Signature<br><b>[Signature]</b>   |   |  |                               |   |   |                    |                   |                        |
| Month Day Year<br><b>4/21/22</b>  |   |  |                               |   |   |                    |                   |                        |
| 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.: _____  |  |                               |   |   |                    |                   |                        |
|   | 17. Transporter Acknowledgment of Receipt of Materials  |  |                               |   |   |                    |                   |                        |
| TRANSPORTER   | Transporter 1 Printed/Typed Name<br><b>Melissa Lewis</b>  |  |                               |   |   |                    |                   |                        |
|   | Signature<br><b>[Signature]</b>   |  |                               |   |   |                    |                   |                        |
| Month Day Year<br><b>4/21/22</b>  |   |  |                               |   |   |                    |                   |                        |
| 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. <b>H141</b>  |   |  | 2. <b>H141</b>                |   |   | 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<br><b>Kassidy Hines</b>  |   |  |                               |   |   |                    |                   |                        |
| Signature<br><b>[Signature]</b>   |   |  |                               |   |   |                    |                   |                        |
| Month Day Year<br><b>4/28/22</b>  |   |  |                               |   |   |                    |                   |                        |



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|---|---|---|--|---|---|-------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>  | 2. Page 1 of<br><b>Page 1</b>  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487286 JJK</b> |                   |
| 5. Generator's Name and Mailing Address<br><b>B &amp; L SERVICE INC.<br/>P.O. BOX 960<br/>FT LAUDERDALE, FL 33302</b>   |   |   | Generator's Site Address (if different than mailing address)<br><b>YELLOW CAB 7TH AVENUE<br/>800 NW 7TH AVENUE<br/>FORT LAUDERDALE, FL 33311</b> |   |   |                   |
| Generator's Phone:  |   |   |  |   |   |                   |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |   | 954-763-3390   |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                   |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |   |  |   | U.S. EPA ID Number                                  |                   |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |   |   |  |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |                   |
| 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                                  | 12. Unit Wt./Vol. |
|   |   |   | No.  | Type  |   |                   |
|   |   | <b>1X UN2926, Waste, Flammable solids, toxic, organic, n.o.s., (Filters, Xylene) 4.1, 6.1, PG II (APP:D220985TP 548674.335102</b> | <b>1</b>   | <b>DM</b>   | <b>55</b>   | <b>G</b>          |
|   |   |   |  |   |   |                   |
|   |   |   |  |   |   |                   |
| 13. Waste Codes<br><b>D001, F005F003</b>  |   |   |  |   |   |                   |
| 14. Special Handling Instructions and Additional Information<br><b>① 761b's</b>   |   |   |  |   |   |                   |
| 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<br><b>Nataniel Lopez</b>   |   | Signature<br>                                 |  | Month Day Year<br><b>4/22/22</b>                      |   |                   |
| 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<br><b>Matt Lok</b>   |   | Signature<br>  |   | Month Day Year<br><b>4/22/22</b>                    |                   |
|   | 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. <b>H141</b>  | 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<br><b>Kassidy Hines</b>  |   | Signature<br>                                 |  | Month Day Year<br><b>4/28/22</b>                      |   |                   |

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|   |  |  |                          |   |   |                         |  |
|---|--|--|--------------------------|---|---|-------------------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLCCSRG</b> | 2. Page 1 of<br><b>1</b> | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487288 JJK</b> |                         |  |
| 5. Generator's Name and Mailing Address<br><b>FLOESQS</b>   |  | Generator's Phone: <b>706-202-2163</b>   |                          |   |   |                         |  |
| <b>ATLAS POLYMERS CORPORATION</b>   |  | <b>ATLAS POLYMERS CORPORATION</b>        |                          |   |   |                         |  |
| <b>4325 EAST 11TH AVENUE</b>  |  | <b>4325 EAST 11TH AVENUE</b>             |                          |   |   |                         |  |
| <b>HIALEAH, FL 33013</b>  |  | <b>HIALEAH, FL 33013</b>                 |                          |   |   |                         |  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |  | 954-763-3390                             |                          | U.S. EPA ID Number<br><b>FLR000083071</b>             |   |                         |  |
| 7. Transporter 2 Company Name   |  |  |                          | U.S. EPA ID Number                                    |   |                         |  |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC</b>  |  |  |                          | U.S. EPA ID Number<br><b>FLD981932494</b>             |   |                         |  |
| 2002 N. ORIENT RD, TAMPA, FL  |  |  |                          |   |   |                         |  |
| Facility's Phone: <b>813-623-5302</b>   |  |  |                          |   |   |                         |  |
| 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers<br>No. Type               |                          | 11. Total Quantity                                    | 12. Unit Wt./Vol.                                   | 13. Waste Codes         |  |
| 1.  | <b>X UN1263, Waste, Paint related material, 3, PG II, APPROV: H210756TPA 553962.342659</b>                     | <b>1 DM</b>                              |                          | <b>55</b>   | <b>G</b>  | <b>D001, F003, F005</b> |  |
| 2.  |  |  |                          |   |   |                         |  |
| 3.  |  |  |                          |   |   |                         |  |
| 4.  |  |  |                          |   |   |                         |  |
| 14. Special Handling Instructions and Additional Information<br><b>① 416 1b's</b>   |  |  |                          |   |   |                         |  |
| 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<br><b>ADOLFO ROSENDO</b>   |  | Signature<br><b>[Signature]</b>          |                          | Month<br><b>4</b>                                     |   | Day<br><b>22</b>        |  |
| 16. International Shipments<br><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<br><b>[Signature]</b>  |  | Signature<br><b>[Signature]</b>          |                          | Month<br><b>4</b>                                     |   | Day<br><b>22</b>        |  |
| Transporter 2 Printed/Typed Name  |  | Signature                                |                          | Month   |   | Day                     |  |
|   |  |  |                          |   |   |                         |  |
| 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. <b>H141</b>  |  | 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<br><b>Kassidy Hines</b>  |  | Signature<br><b>[Signature]</b>          |                          | Month<br><b>4</b>                                     |   | Day<br><b>28</b>        |  |
|   |  |  |                          | Year<br><b>22</b>                                     |   |                         |  |

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Form Approved, OMB No. 2050-0039

|   |   |   |                               |  |   |   |                                  |
|---|---|---|-------------------------------|--|---|---|----------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLR000231813</b>   | 2. Page 1 of<br><b>Page 1</b> | 3. Emergency Response Phone<br><b>3E@800-451-8348</b>  | 4. Manifest Tracking Number<br><b>014505322 JJK</b> |   |                                  |
| 5. Generator's Name and Mailing Address<br><b>TAMPABAY WATER<br/>2575 ENTERPRISE ROAD<br/>CLEARWATER, FL, 33763-0000<br/>727-796-2355</b>   |   |   |                               | Generator's Site Address (if different than mailing address)<br><b>TAMPABAY WATER - LAND O LAKES<br/>6865 PUMP STATION ROAD<br/>LAND O LAKES, FL 33639</b> |   |   |                                  |
| Generator's Phone:<br>6. Transferor's Name (if any)<br><b>Chet Berry (Punim)</b>  |   |   |                               | 954-763-3390   |   | U.S. EPA ID Number<br><b>FLR000083071</b> |                                  |
| 7. Transporter 2 Company Name<br><b>USECOLOGICAL TAMPABAY, INC</b>  |   |   |                               |  |   | U.S. EPA ID Number                        |                                  |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |   |   |                               |  |   | U.S. EPA ID Number<br><b>FLD981832484</b> |                                  |
| Facility's Phone:   |   |   |                               |  |   |   |                                  |
| GENERATOR   | 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))<br><b>UN3266, Waste Corrosive liquid, basic, inorganic, n. o. s., (SODIUM HYDROXIDE), 8, PG II, ERG #154<br/>535134.316586<br/>Approved # H211934TPA</b> | 10. Containers                |  | 11. Total Quantity                                  | 12. Unit Wt./Vol.                         | 13. Waste Codes                  |
|   |   |   | No.                           | Type   |   |   |                                  |
|   |   |   | <b>1</b>                      | <b>DF</b>  | <b>556</b>  |   | <b>R002</b>                      |
|   |   |   |                               |  |   |   |                                  |
|   |   |   |                               |  |   |   |                                  |
| 14. Special Handling Instructions and Additional Information  |   |   |                               |  |   |   |                                  |
| 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<br><b>Timothy White</b>  |   |   |                               | Signature<br><i>Timothy White</i>  |   | Month Day Year<br><b>8 13 21</b>          |                                  |
| 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   | 17. Transporter Acknowledgment of Receipt of Materials  |   |                               |  |   |   |                                  |
|   | Transporter 1 Printed/Typed Name<br><b>Steve Haggerty</b>   |   |                               |  | Signature<br><i>Steve Haggerty</i>                  |   | Month Day Year<br><b>8 13 21</b> |
|   | 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. <b>H110</b>  |   | 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<br><b>Amanda Pridgen</b>   |   |   |                               | Signature<br><i>Amanda Pridgen</i>   |   | Month Day Year<br><b>8 13 21</b>          |                                  |



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|   |   |  |   |  |   |
|---|---|--|---|--|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b> | 2. Page 1 of<br><b>Page 1</b>                               | 3. Emergency Response Phone<br><b>813-623-5302</b> | 4. Manifest Tracking Number<br><b>020265258 JJK</b> |
| 5. Generator's Name and Mailing Address (If different than mailing address)<br><b>SALLY BEAUTY<br/>1550 VANTAGEWAY<br/>JACKSONVILLE, FL 32218</b>   |   |  |   |  |   |
| Generator's Phone: <b>904-741-7423</b>  |   |  | 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b> |  |   |
| 7. Transporter 2 Company Name   |   |  | U.S. EPA ID Number<br><b>FLR000003074</b>                   |  |   |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>   |   |  | U.S. EPA ID Number<br><b>FLD981932404</b>                   |  |   |
| Facility's Phone: <b>813-623-5302</b>   |   |  |   |  |   |
| 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                    | 10. Containers<br>No.                    | Type  | 11. Total Quantity                                 | 12. Unit<br>Wt./Vol.                                |
| X   | 1. RQ, UN1080, Waste, Acetone, 3, PG II 536203.316575   | 12                                       | DM  | 110<br>55  | G   |
| X   | 2. UN2014, Waste, Hydrogen peroxide, aqueous solutions >40% and <80% hydrogen peroxide, 5.1, PG II 536203.316580<br><b>TG1255</b> | 12                                       | DM  | 55<br>110  | G   |
|   | 3.  |  |   |  |   |
|   | 4.  |  |   |  |   |
| 14. Special Handling Instructions and Additional Information<br><b>① 396 lbs ② 65 lbs ③ 495 lbs</b>   |   |  |   |  |   |
| 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: <b>X. Douglas Mene</b> Month: <b>8</b> Day: <b>16</b> Year: <b>21</b>   |   |  |   |  |   |
| 16. International Shipment <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<br>Transporter 1 Printed/Typed Name: <b>James Copeland</b> Signature: <b>[Signature]</b> Month: <b>8</b> Day: <b>16</b> Year: <b>21</b>  |   |  |   |  |   |
| 18. Discrepancy<br>18a. Discrepancy Indication Space <input checked="" type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection<br><b>LINE 1 BOX 10 AND 11 SHOULD BE 2 AND 110</b><br><b>LINE 2 BOX 10 AND 11 SHOULD BE 1 AND 55</b> Manifest Reference Number: U.S. EPA ID 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)<br>1. <b>H141</b> 2. <b>H141</b> 3. 4.  |   |  |   |  |   |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a<br>Printed/Typed Name: <b>Ann Steng</b> Signature: <b>[Signature]</b> Month: <b>8</b> Day: <b>23</b> Year: <b>21</b>   |   |  |   |  |   |

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|  |  |  |                               |  |   |                                   |
|--|--|--|-------------------------------|--|---|-----------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>  |  | 1. Generator ID Number<br><b>ELCESOG</b> | 2. Page 1 of<br><b>Page 1</b> | 3. Emergency Response Phone<br><b>3E @ 800 451 8346</b>  | 4. Manifest Tracking Number<br><b>022158326 JJK</b> |                                   |
| 5. Generator's Name and Mailing Address<br><b>MELBOURNE ARCHITECTURAL MILLWORKS<br/>325 EAST DRIVE<br/>MELBOURNE, FL 32904-0000</b>  |  |  |                               | Generator's Site Address (if different than mailing address)<br><b>MELBOURNE ARCHITECTURAL<br/>MILLWORKS<br/>325 EAST DRIVE<br/>MELBOURNE, FL 32904-0000</b> |   |                                   |
| Generator's Phone: <b>321-308-3297</b>   |  |  |                               | U.S. EPA ID Number<br><b>FLR000083071</b>  |   |                                   |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>  |  |  |                               | U.S. EPA ID Number<br><b>FLR000083071</b>  |   |                                   |
| 7. Transporter 2 Company Name  |  |  |                               | U.S. EPA ID Number   |   |                                   |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>  |  |  |                               | U.S. EPA ID Number<br><b>FLD081032404</b>  |   |                                   |
| Facility's Phone: <b>813-623-5302</b>  |  |  |                               |  |   |                                   |
| 9a. HM   | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers<br>No. Type               |                               | 11. Total Quantity   | 12. Unit Wt./Vol.                                   | 13. Waste Codes                   |
| X  | 1. UN1263, Waste, Paint, 3, PG II 534792.314142  | 5 DM                                     |                               | 1500   | P   | D001, F003, F005                  |
|  | 2.   |  |                               |  |   |                                   |
|  | 3.   |  |                               |  |   |                                   |
|  | 4.   |  |                               |  |   |                                   |
| 14. Special Handling Instructions and Additional Information<br><b>① 529lbs ② 118lbs ③ 456lbs ④ 449lbs ⑤ 403lbs</b>  |  |  |                               |  |   |                                   |
| 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.<br>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<br><b>CAROL TORRE</b>   |  |  |                               | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>10 03 21</b> |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.  |  |  |                               | Port of entry/exit:<br>Date leaving U.S.:  |   |                                   |
| Transporter signature (for exports only):  |  |  |                               |  |   |                                   |
| 17. Transporter Acknowledgment of Receipt of Materials   |  |  |                               |  |   |                                   |
| Transporter 1 Printed/Typed Name<br><b>Gary Butcher</b>  |  |  |                               | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>08 03 21</b> |
| 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. <b>H141</b>   |  | 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<br><b>ANN STAGER</b>  |  |  |                               | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>8 12 21</b>  |

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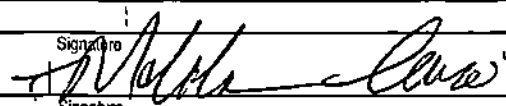
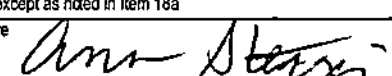
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|   |   |  |   |   |   |                   |
|---|---|--|---|---|---|-------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCE SQG</b>  | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8348</b> | 4. Manifest Tracking Number<br><b>023487003 JJK</b> |                   |
| 5. Generator's Name and Mailing Address<br><b>OASIS MEDICAL LLC DBA CLARITY MEDLAB<br/>2238 WEST ATLANTIC AVE SUITE E<br/>DELRAY BEACH, FL 33445</b>  |   |  | Generator's Site Address (if different than mailing address)<br><b>OASIS MEDICAL LLC DBA CLARITY MEDLAB<br/>2238 WEST ATLANTIC AVE SUITE E<br/>DELRAY BEACH, FL 33445</b> |   |   |                   |
| Generator's Phone:<br><b>561-330-4725</b>   |   |  | 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                   |
| 7. Transporter 2 Company Name   |   |  |   |   | U.S. EPA ID Number                                  |                   |
| 8. Designated Facility Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |  |   |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |                   |
| 2002 N. ORIENT RD, TAMPA, FL<br><b>813-623-5302</b>   |   |  |   |   | 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                                  | 12. Unit Wt./Vol. |
|   |   |  | No.   | Type  |   |                   |
|   | <b>X</b>  | <b>1. UN1993, Waste Flammable liquids, n.o.s., (Acetonitrile and Methanol), 3, PG II 535757.315987</b>         | <b>1</b>  | <b>DF</b>   | <b>5</b>  | <b>G</b>          |
|   |   | <b>2.</b>  |   |   |   |                   |
|   |   | <b>3.</b>  |   |   |   |                   |
|   | <b>4.</b>   |  |   |   |   |                   |
| 14. Special Handling Instructions and Additional Information<br><b>03165</b>  |   |  |   |   |   |                   |
| 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<br><b>Sheryl Burgerstock</b>   |   | Signature<br><b>Sheryl Burgerstock</b>   |   | Month Day Year<br><b>8/17/21</b>                      |   |                   |
| INT'L   | 16. International Shipments<br><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<br><b>Matthew Lewis</b>  |  | Signature<br><b>Matthew Lewis</b>   |   | Month Day Year<br><b>8/17/21</b>                    |                   |
|   | 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. <b>H141</b>  | 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<br><b>ANN STEIGER</b>  |  | Signature<br><b>Ann Steiger</b>   |   | Month Day Year<br><b>8/26/21</b>                    |                   |

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|   |  |   |  |   |   |
|---|--|---|--|---|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLR000154831</b>   | 2. Page 1 of<br><b>Page 1</b>  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487011 JJK</b> |
| 5. Generator's Name and Mailing Address<br><b>LAN CARGO REPAIR STATION<br/>5900 NW 18 St.<br/>B. 754<br/>MIAMI, FL 33128</b>  |  |   | Generator's Site Address (if different than mailing address)<br><b>LAN CARGO REPAIR STATION<br/>6450 NW 22ND STREET BLDG #709 BA<br/>MIAMI, FL 33122</b> |   |   |
| Generator's Phone:<br><b>Oliver Berry (DANIA)<br/>954-763-3390</b>  |  |   | U.S. EPA ID Number<br><b>FLR000083071</b>  |   |   |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |  |   | U.S. EPA ID Number   |   |   |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-823-5302</b>  |  |   | U.S. EPA ID Number<br><b>FLD981932494</b>  |   |   |
| Facility's Phone:   |  |   |  |   |   |
| 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. UN1993, Waste, Flammable liquids, n.o.s., 3, PG II, (Methyl Ethyl Ketone, Acetone) 635899.315898            | 1 DF  | 40   |   | 0001, 0018F003, F005, 92                            |
|   | 2.   |   |  |   |   |
|   | 3.   |   |  |   |   |
|   | 4.   |   |  |   |   |
| 14. Special Handling Instructions and Additional Information<br><b>① 113165</b>   |  |   |  |   |   |
| 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 Name Printed/Typed Name<br><b>Walter Bracamonte</b>   |  | Signature<br> |  | Month Day Year<br><b>8 16 21</b>                      |   |
| 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 Name Printed/Typed Name<br><b>MA/COA</b>  |  | Signature<br> |  | Month Day Year<br><b>8 16 21</b>                      |   |
| 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. <b>H141</b>  |  | 2.  |  | 3.  |   |
| 4.  |  | 5.  |  | 6.  |   |
| 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<br><b>ANN STEIGER</b>  |  | Signature<br> |  | Month Day Year<br><b>8 23 21</b>                      |   |



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|   |   |  |  |                               |  |   |                                 |   |                                  |                  |
|---|---|--|--|-------------------------------|--|---|---------------------------------|---|----------------------------------|------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>   |  | 2. Page 1 of<br><b>Page 1</b> |  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>   |                                 | 4. Manifest Tracking Number<br><b>023487025 JJK</b> |                                  |                  |
| 5. Generator's Name and Mailing Address<br><b>JOE VS YACHT REFINISHING INC</b><br><b>3784 SOUTHWEST 30TH AVENUE</b><br><b>FORT LAUDERDALE, FL 33312</b><br><b>954-308-3301</b>  |   |  |  |                               |  | Generator's Site Address (if different than mailing address)<br><b>DERECKTORS SHIPYARD</b><br><b>775 TAYLOR LANE</b><br><b>DANIA, 33004</b> |                                 |   |                                  |                  |
| 6. Transporter 1 Company Name<br><b>Oni Berry (DANIA)</b>   |   |  |  |                               |  | 6. Transporter 1 Phone<br><b>954-763-3390</b>   |                                 | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                  |                  |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA INC</b>  |   |  |  |                               |  | U.S. EPA ID Number<br><b>FLD981932494</b>   |                                 |   |                                  |                  |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL</b><br><b>813-823-5302</b>  |   |  |  |                               |  | U.S. EPA ID Number<br><b>FLD981932494</b>   |                                 |   |                                  |                  |
| 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                                  | 12. Unit WL/Vol.                 | 13. Waste Codes  |
|   | X   | 1. UN1993, Waste, Flammable liquids, n.o.s., (Toluene and Xylene)3, PG II (APPV# L201713TPA) 536970.317616     |  |                               |  | 2   | DF                              | 30  | 3                                | 0001, F003, F005 |
|   |   | 2.   |  |                               |  |   |                                 |   |                                  |                  |
|   |   | 3.   |  |                               |  |   |                                 |   |                                  |                  |
|   |   | 4.   |  |                               |  |   |                                 |   |                                  |                  |
| 14. Special Handling Instructions and Additional Information<br><b>① 121lbs ② 122lbs</b>  |   |  |  |                               |  |   |                                 |   |                                  |                  |
| 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<br><b>X. Nielson</b>   |   |  |  |                               |  | Signature<br><i>[Signature]</i>   |                                 | Month Day Year<br><b>8/24/21</b>                    |                                  |                  |
| 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<br><b>Ken Hill</b>   |  |  |                               |  |   | Signature<br><i>[Signature]</i> |   | Month Day Year<br><b>8/26/21</b> |                  |
| DESIGNATED FACILITY   | 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 |  |  |                               |  |   |                                 |   |                                  |                  |
|   | 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. <b>H141</b>  |   | 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<br><b>ANN STEIGER</b>  |   |  |  |                               |  | Signature<br><i>[Signature]</i>   |                                 | Month Day Year<br><b>9/2/21</b>                     |                                  |                  |

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|   |   |  |  |                               |  |   |                                   |   |                                  |                 |  |
|---|---|--|--|-------------------------------|--|---|-----------------------------------|---|----------------------------------|-----------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>   |  | 2. Page 1 of<br><b>Page 1</b> |  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>   |                                   | 4. Manifest Tracking Number<br><b>023487026 JJK</b> |                                  |                 |  |
| 5. Generator's Name and Mailing Address<br><b>FEDEX FREIGHT<br/>FEDEX FREIGHT - HOLLYWOOD<br/>6900 ALCOA ROAD<br/>BENTON, AR, 72016-0000</b>  |   |  |  |                               |  | Generator's Site Address (if different than mailing address)<br><b>FEDEX FREIGHT - HOLLYWOOD<br/>5981 PEMBROKE ROAD<br/>HOLLYWOOD, FL 33023</b> |                                   |   |                                  |                 |  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |  |  |                               |  | 854-763-3390  |                                   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                  |                 |  |
| 7. Transporter 2 Company Name   |   |  |  |                               |  | U.S. EPA ID Number  |                                   |   |                                  |                 |  |
| 8. Designated Facility Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |  |  |                               |  | U.S. EPA ID Number<br><b>FLD981932494</b>   |                                   |   |                                  |                 |  |
| 2002 N. ORIENT RD, TAMPA, FL<br>813-623-5302  |   |  |  |                               |  |   |                                   |   |                                  |                 |  |
| 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                                  | 12. Unit WL/Vol.                 | 13. Waste Codes |  |
|   | X   | 1. UN3266, Waste, Corrosive liquid, basic, inorganic, n.o.s., (Sodium hydroxide, Sodium Metasilicate), 538975.317814 |  |                               |  | 1   | DF                                | 150   | P                                | D002            |  |
|   | RQ  | 18, PG III   |  |                               |  |   |                                   |   |                                  |                 |  |
|   |   | 2.   |  |                               |  |   |                                   |   |                                  |                 |  |
|   |   | 3.   |  |                               |  |   |                                   |   |                                  |                 |  |
|   | 4.  |  |  |                               |  |   |                                   |   |                                  |                 |  |
| 14. Special Handling Instructions and Additional Information<br><b>Q86165</b>   |   |  |  |                               |  |   |                                   |   |                                  |                 |  |
| 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/Offendor's Printed/Typed Name<br><b>Misael Medina</b>   |   |  |  |                               |  | Signature<br><i>Misael Medina</i>   |                                   | Month Day Year<br><b>8 26 21</b>                    |                                  |                 |  |
| TRANSPORTER 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.: _____  |  |  |                               |  |   |                                   |   |                                  |                 |  |
|   | 17. Transporter Acknowledgment of Receipt of Materials  |  |  |                               |  |   |                                   |   |                                  |                 |  |
|   | Transporter 1 Printed/Typed Name<br><b>Corrosive LP</b>   |  |  |                               |  |   | Signature<br><i>Michael Lewis</i> |   | Month Day Year<br><b>8 26 21</b> |                 |  |
|   | 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. <b>H110</b>  |   | 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<br><b>Ann Steiger</b>  |   |  |  |                               |  | Signature<br><i>Ann Steiger</i>   |                                   | Month Day Year<br><b>9 2 21</b>                     |                                  |                 |  |

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|   |    |  |                |  |   |
|---|----|--|----------------|--|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |    | 1. Generator ID Number<br><b>FLCE506</b>   | 2. Page 1 of 1 | 3. Emergency Response Phone<br><b>305-252-4500</b> | 4. Manifest Tracking Number<br><b>023487027 JJK</b> |
| 5. Generator's Name and Mailing Address<br><b>FLCE506</b><br><b>UNITED STATES DEPARTMENT OF DEFENSE, J</b><br><b>15810 SOUTH WEST 129TH AVENUE</b><br><b>MIAMI, FL 33177-0000</b>   |    |  |                |  |   |
| Generator's Phone: <b>305-252-4500</b>  |    |  |                |  |   |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (Dania)</b><br><b>UNITED STATES DEPARTMENT OF DEFENSE, JCESE</b><br><b>15810 SOUTH WEST 129TH AVENUE</b><br><b>MIAMI, FL 33177-0000</b>   |    |  |                |  |   |
| 7. Transporter 2 Company Name   |    |  |                |  |   |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC</b><br><b>2002 N. ORIENT RD, TAMPA, FL</b><br>Facility's Phone: <b>813-623-6302</b>  |    |  |                |  |   |
| U.S. EPA ID Number: <b>FLD981932494</b>   |    |  |                |  |   |
| 9a. HM  |    | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |                | 10. Containers<br>No. Type                         | 11. Total Quantity                                  |
|   |    |  |                | 12. Unit Wt./Vol.                                  | 13. Waste Codes                                     |
| X   | 1. | UN2478, Waste Isocyanates, flammable, toxic, n.o.s., 3(6.1), PG II 535357.314981                               |                | 1 DF   | 6 P D001  |
| X   | 2. | UN1950, Waste, Aerosols, flammable, (each not exceeding 1 L capacity), 2.1, 535357.314985                      |                | 1 DF   | 21 P D001   |
| X   | 3. | UN1993, Waste, Flammable liquids, n.o.s., 3, PG II, (Xylene, Toluene)(APPROVAL # 535357.314987                 |                | 1 DF   | 72 P D001   |
| X   | 4. | UN3264, Waste, Corrosive liquid, acidic, inorganic, n.o.s., (Sulfuric acid), 8, PG II 535357.317478            |                | 1 DF   | 58 P D002   |
| 14. Special Handling Instructions and Additional Information  |    |  |                |  |   |
| 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/Offeree's Printed/Typed Name<br><b>Joshua Johnson</b>   |    |  |                | Signature<br><i>[Signature]</i>                    | Month Day Year<br><b>8 27 2001</b>                  |
| 16. International Shipments<br><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<br>Transporter 1 Printed/Typed Name<br><b>Mark Lewis</b> Signature<br><i>[Signature]</i> Month Day Year<br><b>8 27 21</b><br>Transporter 2 Printed/Typed Name<br>Signature<br>Month Day Year   |    |  |                |  |   |
| 18. Discrepancy<br>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<br>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. <b>H111</b>  |    | 2. <b>H111</b>   |                | 3. <b>H111</b>                                     |   |
|   |    |  |                | 4. <b>H110</b>                                     |   |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a<br>Printed/Typed Name<br><b>ANN STEIGER</b> Signature<br><i>[Signature]</i> Month Day Year<br><b>9 2 21</b>  |    |  |                |  |   |



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|  |   |   |    |                              |  |      |   |                   |                 |
|--|---|---|----|------------------------------|--|------|---|-------------------|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>  |   | 1. Generator ID Number<br><b>FLD000015321</b>   |    | 2. Page 1 of<br>Page 1       | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>  |      | 4. Manifest Tracking Number<br><b>023487028 JJK</b> |                   |                 |
| 5. Generator's Name and Mailing Address<br><b>BRADFORD MARINE<br/>3051 STATE ROAD 84<br/>FORT LAUDERDALE, FL 33312<br/>954-791-3800</b>  |   |   |    |                              | Generator's Site Address (if different than mailing address)<br><b>BRADFORD MARINE STATE RD 84<br/>3051 STATE ROAD 84<br/>FORT LAUDERDALE, FL 33312-0000</b> |      |   |                   |                 |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>  |   |   |    |                              | 954-763-3390   |      | U.S. EPA ID Number<br><b>FLR000083071</b>           |                   |                 |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA INC</b>   |   |   |    |                              |  |      | U.S. EPA ID Number                                  |                   |                 |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-823-5302</b>   |   |   |    |                              |  |      | U.S. EPA ID Number<br><b>FLD981932494</b>           |                   |                 |
| 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                                  | 12. Unit Wt./Vol. | 13. Waste Codes |
|  |   |   |    |                              | No.  | Type |   |                   |                 |
|  | X   | 1. UN1325, Waste, Flammable solids, organic, n.o.s., 4.1, PG II. (Toluene, Xylene) (APPV BDF 005) 537260.318040 |    |                              | 1  | DM   | 300   | P-                | D001, F003F005  |
|  |   | 2.  |    |                              |  |      |   |                   |                 |
|  |   | 3.  |    |                              |  |      |   |                   |                 |
|  | 4.  |   |    |                              |  |      |   |                   |                 |
| 14. Special Handling Instructions and Additional Information<br><b>① 135165</b>  |   |   |    |                              |  |      |   |                   |                 |
| 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/Offoror's Printed/Typed Name <b>[Signature]</b> Signature <b>[Signature]</b> Month <b>8</b> Day <b>30</b> Year <b>21</b>   |   |   |    |                              |  |      |   |                   |                 |
| TRANSPORTER 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 <b>Ken Hill</b>  |   |    | Signature <b>Ken Hill</b>    |  |      | Month <b>8</b> Day <b>30</b> Year <b>21</b>         |                   |                 |
|  | 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. <b>H141</b>  |   | 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 <b>Ann Stenger</b>   |   |    | Signature <b>Ann Stenger</b> |  |      | Month <b>9</b> Day <b>2</b> Year <b>21</b>          |                   |                 |

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|   |        |  |   |   |   |
|---|--------|--|---|---|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |        | 1. Generator ID Number<br><b>FLR000226712</b>  | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487029 JJK</b> |
| 5. Generator's Name and Mailing Address<br><b>NUTRANEXT LLC<br/>1301 SAWGRASS CORPORATE PARKWAY<br/>SUNRISE, FL 33323-2813<br/>954-233-3300</b>   |        |  | Generator's Site Address (if different than mailing address)<br><b>NUTRANEXT LLC<br/>1301 SAWGRASS CORPORATE PARKWAY<br/>SUNRISE, FL 33323-2813</b> |   |   |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (Dania)</b>   |        |  | U.S. EPA ID Number<br><b>FLD000083071</b>   |   |   |
| 7. Transporter 2 Company Name<br><b>MIAMI PLANT</b>   |        |  | U.S. EPA ID Number<br><b>FLD000083071</b>   |   |   |
| 8. Designated Facility Name and Site Address<br><b>US Ecology Tampa Inc<br/>2002 N. Orient Road<br/>Tampa FL 33612<br/>813-623-5302</b>   |        |  | U.S. EPA ID Number<br><b>FLD981932494</b>   |   |   |
| 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  |   |
|   | X      | 1. <b>UN1325, Flammable solids, organic, n.o.s., (Methyl Ethyl Ketone, Xylene), 4.1, PG II 537231318004</b>    | 1   | DF  | 300   |
|   |        | 2.   |   |   |   |
|   |        | 3.   |   |   |   |
|   |        | 4.   |   |   |   |
| 13. Waste Codes<br><b>D001, D035, F003, F005</b>  |        |  |   |   |   |
| 14. Special Handling Instructions and Additional Information<br><b>① 491bs</b>  |        |  |   |   |   |
| 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(e) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. |        |  |   |   |   |
| Generator's/Offero's Printed/Typed Name<br><b>Kathleen Del Duca</b>   |        |  | Signature<br><i>Kathleen Del Duca</i>   |   | Month Day Year<br><b>18 30 21</b>                   |
| 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<br><b>Ken Holl</b>   |        |  | Signature<br><i>Ken Holl</i>  |   | Month Day Year<br><b>18 30 21</b>                   |
| 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. <b>H141</b>  |        | 2.   |   | 3.  |   |
| 4.  |        | 5.   |   | 6.  |   |
| 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<br><b>ANN STEIGER</b>  |        |  | Signature<br><i>Ann Steiger</i>   |   | Month Day Year<br><b>9 2 21</b>                     |

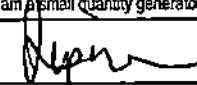

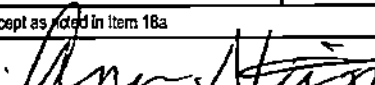
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|   |   |  |  |   |   |                   |                 |
|---|---|--|--|---|---|-------------------|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FL0000360560</b>  | 2. Page 1 of<br><b>Page 1</b>  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487030 JJK</b> |                   |                 |
| 5. Generator's Name and Mailing Address<br><b>CROWLEY LINER SERVICE, INC<br/>9487 REGENCY SQUARE BOULEVARD<br/>JACKSONVILLE, FL 32226-8126</b><br>Generator's Phone: <b>904-727-2200</b>  |   |  | Generator's Site Address (if different than mailing address)<br><b>CROWLEY LINER FORT LAUDERDALE<br/>4300 MACINTOSH ROAD<br/>FORT LAUDERDALE, FL 33316</b> |   |   |                   |                 |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b><br>954-763-3380   |   |  | U.S. EPA ID Number<br><b>FLR000083071</b>  |   |   |                   |                 |
| 7. Transporter 2 Company Name   |   |  | U.S. EPA ID Number   |   |   |                   |                 |
| 8. Designate Facility (or Generator) Name<br><b>USECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b><br>Facility's Phone: <b>813-623-5302</b>  |   |  | U.S. EPA ID Number<br><b>FLD981932494</b>  |   |   |                   |                 |
| 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. UN1263, Waste, Paint related material, 3, PG II<br>537330.318184  | 1  | CF  | 900   | P                 | D001            |
|   | X   | 2. UN1263, Waste, Paint related material, 3, PG II<br>537330.318216  | 1  | DF  | 165   | P                 | D001            |
|   |   | 3.   |  |   |   |                   |                 |
|   |   | 4.   |  |   |   |                   |                 |
| 14. Special Handling Instructions and Additional Information<br><b>① 938 lbs    ② 117 lbs</b>   |   |  |  |   |   |                   |                 |
| 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: <b>Justin Osborne</b> Signature: <i>Justin Osborne</i> Month: <b>18</b> Day: <b>31</b> Year: <b>21</b>  |   |  |  |   |   |                   |                 |
| INT'L   | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.      Port of entry/exit: _____<br>Transporter signature (for exports only): _____      Date leaving U.S.: _____ |  |  |   |   |                   |                 |
|   | 17. Transporter Acknowledgment of Receipt of Materials  |  |  |   |   |                   |                 |
| TRANSPORTER   | Transporter 1 Printed/Typed Name: <b>Matthew Lewis</b> Signature: <i>Matthew Lewis</i> Month: <b>8</b> Day: <b>31</b> Year: <b>21</b>   |  |  |   |   |                   |                 |
|   | 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. <b>H141</b>  |  | 2. <b>H141</b>   |   | 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: <b>Ann Steiger</b> Signature: <i>Ann Steiger</i> Month: <b>9</b> Day: <b>2</b> Year: <b>21</b>  |  |  |   |   |                   |                 |

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|   |  |   |   |   |   |
|---|--|---|---|---|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLD000604751</b> | 2. Page 1 of<br>Page 1  | 3. Emergency Response Phone<br><b>3E@800-451-8348</b> | 4. Manifest Tracking Number<br><b>014505339 JJK</b> |
| 5. Generator's Name and Mailing Address<br><b>STIN ROBERT BILLECK<br/>MOTIVA ENTERPRISES LLC TAMPA T<br/>MOTIVA ENTERPRISES LLC<br/>500 Dallas Street QAC 9th Floor<br/>HOUSTON, TX 77002</b>   |  |   | Generator's Site Address (if different than mailing address)<br><b>MOTIVA ENTERPRISES LLC TAMPA<br/>TERMINAL<br/>6500 COMMERCE STREET<br/>TAMPA, FL 33616</b> |   |   |
| Generator's Phone:<br><b>554-763-3390</b>   |  |   | U.S. EPA ID Number<br><b>FLD000083071</b>   |   |   |
| 6. Transporter 1 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |  |   | U.S. EPA ID Number<br><b>FLD981932494</b>   |   |   |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |  |   | U.S. EPA ID Number<br><b>FLD981932494</b>   |   |   |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |  |   | U.S. EPA ID Number<br><b>FLD981932494</b>   |   |   |
| Facility's Phone:   |  |   |   |   |   |
| 9a.<br>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 WL/Vol.                                    |
|   | 1. <b>UN1850, Waste, Aerosols, Flammable, (each not exceeding 1 L capacity), 2.1 (ERG 128) 561405.354594</b>   |   | <b>1</b>  |   | <b>125 P</b>  |
|   | 2.   |   |   |   |   |
|   | 3.   |   |   |   |   |
| 4.  |  |   |   |   |   |
| 13. Waste Codes   |  |   |   |   |   |
| 14. Special Handling Instructions and Additional Information<br><br><b>H200 716 TPA</b>   |  |   |   |   |   |
| 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<br><b>Lip Chong</b>  |  |   | Signature<br>   |   | Month Day Year<br><b>8 25 22</b>                    |
| 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<br><b>Philip Cook</b>  |  |   | Signature<br>   |   | Month Day Year<br><b>8 25 22</b>                    |
| 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. <b>H141</b>  |  | 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<br><b>Ann Steig</b>  |  |   | Signature<br>   |   | Month Day Year<br><b>8 30 22</b>                    |

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|   |   |  |                    |                                 |  |                                  |                 |
|---|---|--|--------------------|---------------------------------|--|----------------------------------|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number   | 2. Page 1 of       | 3. Emergency Response Phone     | 4. Manifest Tracking Number<br><b>020265292 JJK</b>                      |                                  |                 |
| 5. Generator's Name and Mailing Address<br><b>PLCESQG</b>   |   | Generator's Site Address (if different than mailing address)<br><b>VIDACANN, LLC<br/>5569 BOWDEN ROAD<br/>JACKSONVILLE, FL 32216</b> |                    |                                 | Generator's Phone:<br><b>5569 BOWDEN ROAD<br/>JACKSONVILLE, FL 32216</b> |                                  |                 |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   | 6. Transporter 1 U.S. EPA ID Number<br><b>954-753-3390</b>   |                    |                                 | 6. Transporter 1 U.S. EPA ID Number<br><b>FL0000083071</b>               |                                  |                 |
| 7. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>   |   | 7. Designated Facility U.S. EPA ID Number<br><b>FL0881932404</b>   |                    |                                 | Facility's Phone:<br><b>013-623-5302</b>                                 |                                  |                 |
| GENERATOR   | 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                       | 10. Containers No. | 10. Containers Type             | 11. Total Quantity   | 12. Unit Wt./Vol.                | 13. Waste Codes |
|   | X   | 1. UN1993, Waste, Flammable liquids, n.o.s., (ALCOHOLS) 3. PG II (G181684TPA) 551482.354697  | 9                  | DM                              | 455 G  |                                  | D001, F005      |
|   |   | 2.   |                    |                                 |  |                                  |                 |
|   |   | 3.   |                    |                                 |  |                                  |                 |
|   |   | 4.   |                    |                                 |  |                                  |                 |
| 14. Special Handling Instructions and Additional Information  |   |  |                    |                                 |  |                                  |                 |
| 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<br><b>JACK NEORN</b> Signature<br><i>[Signature]</i> Month Day Year<br><b>8 15 22</b>  |   |  |                    |                                 |  |                                  |                 |
| 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<br>Transporter 1 Printed/Typed Name<br><b>SE Grant</b> Signature<br><i>[Signature]</i> Month Day Year<br><b>8 18 22</b><br>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                       |  |                    |                                 |  |                                  |                 |
|   | 18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number:   |  |                    |                                 |  |                                  |                 |
|   | 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. <b>H141</b>  |   | 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<br><b>ANN STEIGER</b>  |   |  |                    | Signature<br><i>[Signature]</i> |  | Month Day Year<br><b>8 16 22</b> |                 |

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|   |   |  |    |                        |  |   |                                  |   |                   |                      |
|---|---|--|----|------------------------|--|---|----------------------------------|---|-------------------|----------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLR000224121</b>  |    | 2. Page 1 of<br>Page 1 |  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>   |                                  | 4. Manifest Tracking Number<br><b>022158385 JJK</b> |                   |                      |
| 5. Generator's Name and Mailing Address<br><b>AMSPEC - CAPE CANAVERAL<br/>AMSPEC - CAPE CANAVERAL<br/>191 CENTER STREET<br/>CAPE CANAVERAL, FL 32920</b>  |   |  |    |                        |  | Generator's Site Address (if different than mailing address)<br><b>AMSPEC - CAPE CANAVERAL<br/>191 CENTER STREET<br/>CAPE CANAVERAL, FL 32920</b> |                                  |   |                   |                      |
| Generator's Phone: <b>321.855.8900</b>  |   |  |    |                        |  | U.S. EPA ID Number<br><b>FLR000083071</b>   |                                  |   |                   |                      |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |  |    |                        |  | U.S. EPA ID Number  |                                  |   |                   |                      |
| 7. Transporter 2 Company Name   |   |  |    |                        |  | U.S. EPA ID Number  |                                  |   |                   |                      |
| 8. Designated Facility Name<br><b>US ECOLOGY TAMP, INC</b>  |   |  |    |                        |  | U.S. EPA ID Number<br><b>FLD081032404</b>   |                                  |   |                   |                      |
| 2002 N. ORIENT RD, TAMPA, FL<br>Facility's Phone: <b>813-623-5302</b>   |   |  |    |                        |  |   |                                  |   |                   |                      |
| GENERATOR   | 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |    |                        |  | 10. Containers<br>No. Type  |                                  | 11. Total Quantity                                  | 12. Unit WL/Vol   | 13. Waste Codes      |
|   | X   | 1. UN1993, Flammable liquids, n.o.s., 3, PG II, (Gasoline and diesel fuel)(APPV# A18153 TPA) 550540.353273     |    |                        |  | 2 DM  |                                  | 110   | G                 | D001, F003D018, F005 |
|   |   | 2.   |    |                        |  |   |                                  |   |                   |                      |
|   |   | 3.   |    |                        |  |   |                                  |   |                   |                      |
|   |   | 4.   |    |                        |  |   |                                  |   |                   |                      |
| 14. Special Handling Instructions and Additional Information<br><br><b>385 lbs 398 lbs</b>  |   |  |    |                        |  |   |                                  |   |                   |                      |
| 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/Offeror's Printed/Typed Name<br><b>Shardae Stovall</b>  |   |  |    |                        |  | Signature<br><i>Shardae Stovall</i>   |                                  | Month<br><b>8</b>                                   | Day<br><b>15</b>  | Year<br><b>22</b>    |
| 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): _____   |  |    |                        |  |   |                                  |   |                   |                      |
| TRANSPORTER   | 17. Transporter Acknowledgment of Receipt of Materials  |  |    |                        |  |   |                                  |   |                   |                      |
|   | Transporter 1 Printed/Typed Name<br><b>Paul Hagerty</b>   |  |    |                        |  |   | Signature<br><i>Paul Hagerty</i> |   | Month<br><b>8</b> | Day<br><b>15</b>     |
| 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. <b>H141</b>  |   |  | 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<br><b>ANN STEIGER</b>  |   |  |    |                        |  | Signature<br><i>Ann Steiger</i>   |                                  | Month<br><b>8</b>                                   | Day<br><b>18</b>  | Year<br><b>22</b>    |

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|   |  |   |                                 |   |   |                        |
|---|--|---|---------------------------------|---|---|------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLR000214171</b>   | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E @ 800-451-8346</b> | 4. Manifest Tracking Number<br><b>022158386 JJK</b> |                        |
| 5. Generator's Name and Mailing Address<br><b>ARNOTT, LLC</b><br><b>100 SEA RAY DRIVE</b><br><b>MERRITT ISLAND, FL 32953</b><br>Generator's Phone: <b>321-868-3016</b>  |  |   |                                 |   |   |                        |
| Generator's Site Address (if different than mailing address)<br><b>ARNOTT AIR SUSPENSION PRODUCT</b><br><b>100 SEA RAY DRIVE</b><br><b>MERRITT ISLAND, FL 32953</b>   |  |   |                                 |   |   |                        |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |  |   |                                 | U.S. EPA ID Number<br><b>FLR000083071</b>               |   |                        |
| 7. Transporter 2 Company Name   |  |   |                                 | U.S. EPA ID Number                                      |   |                        |
| 8. Designated Facility Name and Site Address<br><b>USECOLOGY TAMPA, INC</b><br><b>2002 N. ORIENT RD, TAMPA, FL</b><br>Facility's Phone: <b>813-623-6502</b>   |  |   |                                 | U.S. EPA ID Number<br><b>FLO081032404</b>               |   |                        |
| GENERATOR   | 9a. HM   | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))    | 10. Containers<br>No. Type      |   | 11. Total Quantity                                  | 12. Unit Wt./Vol.      |
|   | 1  | UN1993, Waste, Flammable liquids, n.o.s., (Benzene and Xylenemixed isomers)3, PG II (APP# F140949EQ 562304.355895 | DB 2 DM 200                     | 220   | G   | D001, D018, F003, F005 |
|   | 2  | UN1993, Waste Flammable liquids, n.o.s. (Benzene and Xylenemixed isomers)3, PG II (APP# F140949EQ                 | 2 DF 110                        | DB G  | D001, D018, F003, F005                              |                        |
|   | 3  |   |                                 |   |   |                        |
|   | 4  |   |                                 |   |   |                        |
| 14. Special Handling Instructions and Additional Information<br><b>565lbs, 571lbs, 514lbs, 310lbs</b>   |  |   |                                 |   |   |                        |
| 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<br><b>[Signature]</b>  |  |   | Signature<br><b>[Signature]</b> |   | Month Day Year<br><b>08 30 22</b>                   |                        |
| 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<br>Transporter 1 Printed/Typed Name<br><b>Gary Butcher</b> Signature<br><b>[Signature]</b> Month Day Year<br><b>08 30 22</b><br>Transporter 2 Printed/Typed Name<br>Signature<br>Month Day Year                       |   |                                 |   |   |                        |
| DESIGNATED FACILITY   | 18. Discrepancy<br>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<br>Manifest Reference Number: _____ |   |                                 |   |   |                        |
|   | 18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____<br>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)<br>1. <b>H141</b> 2. <b>H141</b> 3. 4.   |   |                                 |   |   |                        |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a<br>Printed/Typed Name<br><b>Ann Steiger</b> Signature<br><b>[Signature]</b> Month Day Year<br><b>09 11 22</b>  |  |   |                                 |   |   |                        |

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|   |   |  |   |   |   |                 |
|---|---|--|---|---|---|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLR000226712</b>  | 2. Page 1 of Page 1   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487389 JJK</b> |                 |
| 5. Generator's Name and Mailing Address<br><b>NUTRANEXT LLC<br/>1301 SAWGRASS CORPORATE PARKWAY<br/>SUNRISE, FL 33323-2813<br/>954-233-3300</b>   |   |  | Generator's Site Address (if different than mailing address)<br><b>NUTRANEXT LLC<br/>1301 SAWGRASS CORPORATE PARKWAY<br/>SUNRISE, FL 33323-2813</b> |   |   |                 |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |  | 954-763-3380  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                 |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |  |   |   | U.S. EPA ID Number                                  |                 |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |   |  |   |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |                 |
| 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                                    | 12. Unit Wt./Vol.                                   | 13. Waste Codes |
|   |   | 1X UN1993, Waste flammable liquids, n.o.s. (Isopropanol, Klucel), 3, PG II (APP. G220913TPA) 556856.347384     | 2   | 70  | G   | D001            |
|   |   |  |   |   |   |                 |
|   |   |  |   |   |   |                 |
|   |   |  |   |   |   |                 |
| 14. Special Handling Instructions and Additional Information<br><br>① 167 LBS    ② 307 LBS  |   |  |   |   |   |                 |
| 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<br><b>Kathleen Del Duca B.</b> Signature<br><b>Kathleen</b> Month<br><b>8</b> Day<br><b>9</b> Year<br><b>22</b>  |   |  |   |   |   |                 |
| 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.:  |  |   |   |   |                 |
|   | 17. Transporter Acknowledgment of Receipt of Materials  |  |   |   |   |                 |
| TRANSPORTER   | Transporter 1 Printed/Typed Name<br><b>Ken Hill</b> Signature<br><b>Ken Hill</b> Month<br><b>8</b> Day<br><b>9</b> Year<br><b>22</b>  |  |   |   |   |                 |
|   | Transporter 2 Printed/Typed Name<br>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 |  |   |   |   |                 |
|   | 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. <b>H141</b> 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<br><b>Ann Steiger</b> Signature<br><b>Ann Steiger</b> Month<br><b>8</b> Day<br><b>11</b> Year<br><b>22</b>   |   |  |   |   |   |                 |



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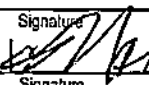
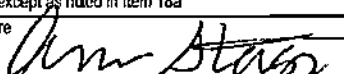
Form Approved. OMB No. 2050-0039

|   |  |  |   |   |   |  |
|---|--|--|---|---|---|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLCESQG</b> | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487393 JJK</b> |  |
| 5. Generator's Name and Mailing Address<br><b>AMSPEC - CAPE CANAVERAL<br/>AMSPEC SERVICES, LLC<br/>191 CENTER STREET<br/>CAPE CANAVERAL, FL 32920</b>   |  |  | Generator's Site Address (if different than mailing address)<br><b>AMSPEC SERVICES, LLC<br/>4370 OAKES ROAD<br/>DAVIE, FL 33314</b> |   |   |  |
| Generator's Phone:<br><b>321.866.8900</b>   |  |  | 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |  |
| 7. Transporter 2 Company Name   |  |  |   |   | U.S. EPA ID Number                                  |  |
| 8. Designate Facility<br><b>USECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD. TAMPA, FL<br/>813-623-6302</b>  |  |  |   |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |  |
| Facility's Phone:   |  |  |   |   |   |  |
| 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |  |   | 10. Containers<br>No.                                 | Type  | 11. Total Quantity                     |
|   | 1X UN1993, Flammable liquids, n.o.s., 3, PG II, (Gasoline and diesel fuel) APP: AMSP001 591366.354533          |  |   | 2   | DM  | 110                                    |
|   |  |  |   |   |   | 12. Unit WL/Vol. G                     |
|   |  |  |   |   |   | 13. Waste Codes D001, F003, D018, F005 |
|   |  |  |   |   |   |  |
|   |  |  |   |   |   |  |
|   |  |  |   |   |   |  |
| 14. Special Handling Instructions and Additional Information<br><b>(1) 409 1b's (2) 446 1b's</b>  |  |  |   |   |   |  |
| 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<br><b>8/15/92</b>       |
| 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<br><b>Matthew Lewis</b>  |  |  |   | Signature<br><i>Matthew Lewis</i>                     |   | Month Day Year<br><b>8/15/92</b>       |
| 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<br><b>GENERATOR SIGNED IN BOX 20 - SHOULD HAVE SIGNED IN BOX 15</b>   |  |  |   |   |   |  |
| 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. <b>H141</b>  |  | 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<br><b>Ann Steiger</b>  |  |  |   | Signature<br><i>Ann Steiger</i>                       |   | Month Day Year<br><b>8/15/92</b>       |

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|   |   |  |   |   |   |                                  |
|---|---|--|---|---|---|----------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>   | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>   | 4. Manifest Tracking Number<br><b>023487395 JJK</b> |                                  |
| 5. Generator's Name and Mailing Address<br><b>CATERPILLAR TRACTOR COM<br/>CITY OF PEMBROKE PINES WWTP<br/>100 NE ADAMS STREET<br/>PEORIA, IL, 61602</b>   |   |  | Generator's Site Address (if different than mailing address)<br><b>CITY OF PEMBROKE PINES WWTP<br/>7960 JOHNSON STREET<br/>PEMBROKE PINES, FL 33024</b> |   |   |                                  |
| Generator's Phone:<br><b>954-485-8800</b>   |   |  | 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   | 954-763-3380  |                                  |
|   |   |  |   |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                  |
| 7. Transporter 2 Company Name   |   |  |   |   | U.S. EPA ID Number                                  |                                  |
| 8. Designated Facility Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |  |   |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |                                  |
| 2002 N. ORIENT RD, TAMPA, FL<br><b>813-823-5302</b>   |   |  |   |   |   |                                  |
| 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.                |
|   |   | 1. <b>X NA3077, Waste Hazardous Waste, Solid, n.o.s., (Lead), 9. PGII APPROV: H221838TPA 581468.354684</b>     |   | <b>2</b>  | <b>DM</b>   | <b>1100 P</b>                    |
|   |   | 2.   |   |   |   |                                  |
|   |   | 3.   |   |   |   |                                  |
|   | 4.  |  |   |   |   |                                  |
| 13. Waste Codes<br><b>D008</b>  |   |  |   |   |   |                                  |
| 14. Special Handling Instructions and Additional Information<br><b>① 496 1b's, ② 572 1b's</b>   |   |  |   |   |   |                                  |
| 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/Offeror's Printed/Typed Name<br><b>Pedro Lopez</b>  |   |  |   | Signature<br> |   | Month Day Year<br><b>8 17 22</b> |
| 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): _____   |  |   |   |   |                                  |
| TRANSPORTER   | 17. Transporter Acknowledgment of Receipt of Materials  |  |   |   |   |                                  |
|   | Transporter 1 Printed/Typed Name<br><b>M. A. Loh</b>  |  | Signature<br>  |   | Month Day Year<br><b>8 17 22</b>                    |                                  |
| 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. <b>H110</b>  |   | 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<br><b>ANN STEIGER</b>  |   |  |   | Signature<br> |   | Month Day Year<br><b>8 25 22</b> |

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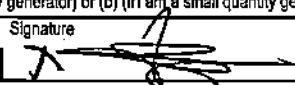
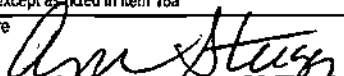
Form Approved, OMB No. 2050-0039

|   |   |  |   |   |   |                                  |                                  |
|---|---|--|---|---|---|----------------------------------|----------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLR000166751</b>  | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487396 JJK</b> |                                  |                                  |
| 5. Generator's Name and Mailing Address<br><b>IRL LABS<br/>6381 NW 33RD AVENUE<br/>FORT LAUDERDALE, FL 33309<br/>954-777-0018</b>   |   |  | Generator's Site Address (if different than mailing address)<br><b>IRL LABS<br/>5361 NW 33RD AVENUE<br/>FORT LAUDERDALE, FL 33309</b> |   |   |                                  |                                  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |  | 854-763-3380  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                  |                                  |
| 7. Transporter 2 Company Name   |   |  |   |   | U.S. EPA ID Number                                  |                                  |                                  |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-6302</b>  |   |  |   |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |                                  |                                  |
| 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<br>No. Type                            | 11. Total Quantity                                  | 12. Unit Wt./Vol.                | 13. Waste Codes                  |
|   |   | 1. <b>UN1993, Waste, Flammable liquids, n.o.s., (contains xylene) 3, PG II (APPROVAL IRL001) 561565.354795</b> |   | <b>1</b> <b>DF</b>                                    | <b>55</b>   | <b>G</b>                         | <b>D001, F003</b>                |
|   |   | 2.   |   |   |   |                                  |                                  |
|   |   | 3.   |   |   |   |                                  |                                  |
|   |   | 4.   |   |   |   |                                  |                                  |
| 14. Special Handling Instructions and Additional Information<br><b>279 lbs</b>  |   |  |   |   |   |                                  |                                  |
| 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/Offeror's Printed/Typed Name<br><b>ALFREDO R GARCIA</b>   |   |  |   | Signature<br><b>[Signature]</b>                       |   | Month Day Year<br><b>8 17 22</b> |                                  |
| 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.:  |  |   |   |   |                                  |                                  |
|   | 17. Transporter Acknowledgment of Receipt of Materials  |  |   |   |   |                                  |                                  |
| TRANSPORTER   | Transporter 1 Printed/Typed Name<br><b>John Lewis</b>   |  |   |   | Signature<br><b>[Signature]</b>                     |                                  | Month Day Year<br><b>8 17 22</b> |
|   | 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 |  |   |   |   |                                  |                                  |
|   | 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. <b>H111</b>  |   | 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<br><b>ANN STEIGER</b>  |   |  |   | Signature<br><b>[Signature]</b>                       |   | Month Day Year<br><b>8 25 22</b> |                                  |

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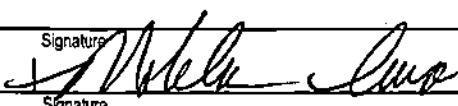
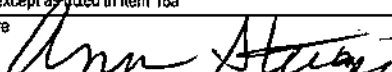
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|   |   |  |  |   |   |                  |
|---|---|--|--|---|---|------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>   | 2. Page 1 of<br><b>Page 1</b>  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487398 JJK</b> |                  |
| 5. Generator's Name and Mailing Address<br><b>TERE AUTO SERVICES INC<br/>TERE AUTO SERVICES INC<br/>590 S DIXIE HWY EAST<br/>POMPANO BEACH, FL 33060</b>  |   |  | Generator's Site Address (if different than mailing address)<br><b>TERE AUTO SERVICES INC<br/>590 S Dixie Hwy E,<br/>POMPANO BEACH, FL 33060</b> |   |   |                  |
| Generator's Phone: <b>(954) 784-7668</b>  |   |  | 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                  |
|   |   |  | 7. Transporter 2 Company Name  |   | U.S. EPA ID Number                                  |                  |
| 8. Designated Facility Name and Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>  |   |  | U.S. EPA ID Number<br><b>FLD981932494</b>  |   |   |                  |
| Facility's Phone: <b>813-623-5302</b>   |   |  |  |   |   |                  |
| 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. |
|   |   |  | No.  | Type  |   |                  |
|   | 1   | <b>X UN1263, Waste, Paint related material, 3, PG II (A221569TPA) 681715.355008</b>                            | 1  | DM  | 55  | G                |
|   | 2   |  |  |   |   |                  |
|   | 3   |  |  |   |   |                  |
|   |   |  |  |   |   |                  |
|   |   |  |  |   |   |                  |
|   |   |  |  |   |   |                  |
| 14. Special Handling Instructions and Additional Information<br><b>① 449 lbs</b>  |   |  |  |   |   |                  |
| 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/Offoror's Printed/Typed Name<br><b>LUIZ MEDeiros</b>  |   |  | Signature<br>  |   | Month Day Year<br><b>8 22 22</b>                    |                  |
| 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<br><b>Ken Hill</b>   |  | Signature<br><b>Ken Hill</b>   |   | Month Day Year<br><b>8 22 22</b>                    |                  |
|   | 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. <b>H141</b>  | 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<br><b>Ann Steiger</b>  |   |  | Signature<br>  |   | Month Day Year<br><b>8 25 22</b>                    |                  |

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| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLCESQG</b> |      | 2. Page 1 of <b>2</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8348</b> | 4. Manifest Tracking Number<br><b>023487400 JJK</b> |  |
|---|--|--|------|---|---|---|--|
| 5. Generator's Name and Mailing Address<br><b>LAN CARGO REPAIR STATION</b><br><b>6900 NW 18 St.</b><br><b>B. 754</b><br><b>MIAMI, FL 33128</b>  |  |  |      |   |   |   |  |
| Generator's Site Address (if different than mailing address)<br><b>BUILDING 754 - LATAM AIRLINES HANGAR</b><br><b>6900 NORTH WEST 18TH STREET</b><br><b>MIAMI, FL 33128-0000</b>  |  |  |      |   |   |   |  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |  |  |      | 954-763-3380  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |  |
| 7. Transporter 2 Company Name   |  |  |      |   |   | U.S. EPA ID Number                                  |  |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC</b><br><b>2002 N. ORIENT RD, TAMPA, FL</b>   |  |  |      |   |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |  |
| Facility's Phone: <b>813-823-5302</b>   |  |  |      |   |   |   |  |
| 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 |   |   |   |  |
| 1. X  | UN1263, Waste, Paint related material, 3, PG II Approv. D211928TPA 581871355351                                | 2  | CF   | 1477<br>2000<br>850   | P   | D001, F003, F005                                    |  |
| 2. X  | UN1950, Waste, Aerosols, flammable, (each not exceeding 1 L capacity), 2.1 APPROV. C161921TPA 581871355352     | 1  | DF   | 40  | P   | D001  |  |
| 3.  |  |  |      |   |   |   |  |
| 4.  |  |  |      |   |   |   |  |
| 14. Special Handling Instructions and Additional Information<br><b>(1) 784, 669 (2) 40/16'S</b><br><b>40</b>  |  |  |      |   |   |   |  |
| 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/Offeree's Printed/Typed Name<br><b>OSWALD &amp; L...</b>  |  |  |      | Signature<br> |   | Month Day Year<br><b>8 22 22</b>                    |  |
| 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<br><b>MATCOLE Lewis</b>  |  |  |      | Signature<br> |   | Month Day Year<br><b>8 22 22</b>                    |  |
| Transporter 2 Printed/Typed Name<br><b>Fuel Blend</b>   |  |  |      | Signature   |   | Month Day Year                                      |  |
| 18. Discrepancy   |  |  |      |   |   |   |  |
| 18a. Discrepancy Indication Space <input checked="" type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection  |  |  |      |   |   |   |  |
| <b>LINE 1 BOX 11 SHOULD BE 1477</b>   |  |  |      |   |   |   |  |
| 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. <b>H141</b>  |  | 2. <b>H141</b>                           |      | 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<br><b>ANN STEIGER</b>  |  |  |      | Signature<br> |   | Month Day Year<br><b>8 25 22</b>                    |  |

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|---|---|---|-------------------------------|--|---|---|----------------------------------|------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>  | 2. Page 1 of<br><b>Page 1</b> | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>  | 4. Manifest Tracking Number<br><b>023487402 JJK</b> |   |                                  |                  |
| 5. Generator's Name and Mailing Address<br><b>FONTAINEBLEAU RESORT<br/>FONTAINEBLEAU RESORT<br/>4441 COLLINS AVENUE<br/>MIAMI BEACH, FL 33140-0000</b>  |   |   |                               | Generator's Site Address (if different than mailing address)<br><b>FONTAINEBLEAU RESORT<br/>4441 COLLINS AVENUE<br/>MIAMI BEACH, FL 33140-0000</b> |   |   |                                  |                  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |   |                               | 854-763-3380   |   | U.S. EPA ID Number<br><b>FLR000083071</b> |                                  |                  |
| 7. Transporter 2 Company Name   |   |   |                               |  |   | U.S. EPA ID Number                        |                                  |                  |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC.<br/>2002 N. ORIENT RD, TAMPA, FL</b>  |   |   |                               |  |   | U.S. EPA ID Number<br><b>FLD981932494</b> |                                  |                  |
| Facility's Phone:<br><b>813-823-5302</b>  |   |   |                               |  |   |   |                                  |                  |
| GENERATOR   | 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))              |                               | 10. Containers<br>No. Type   |   | 11. Total Quantity                        | 12. Unit Wt/Vol                  | 13. Waste Codes  |
|   | 1   | <b>X UN1263, Waste Paint (Including paint, lacquer, enamel, stain, shellac solutions, varnish, polish, ll 562095.355551</b> |                               | 2  | CF  | 2000                                      | P                                | D001, F003, F005 |
|   | 2   |   |                               |  |   |   |                                  |                  |
|   | 3   |   |                               |  |   |   |                                  |                  |
|   | 4   |   |                               |  |   |   |                                  |                  |
| 14. Special Handling Instructions and Additional Information<br><b>① 529 lbs      ② 200 lbs</b>   |   |   |                               |  |   |   |                                  |                  |
| 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<br><b>Emmanuel Sanchez</b>   |   |   |                               | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>8 29 22</b>          |                                  |                  |
| 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.: _____  |   |                               |  |   |   |                                  |                  |
|   | 17. Transporter Acknowledgment of Receipt of Materials  |   |                               |  |   |   |                                  |                  |
| TRANSPORTER   | Transporter 1 Printed/Typed Name<br><b>Ken Hill</b>   |   |                               |  | Signature<br><i>[Signature]</i>                     |   | Month Day Year<br><b>8 29 22</b> |                  |
|   | 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. <b>H141</b>  |   | 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<br><b>Ann Stanger</b>  |   |   |                               | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>9 1 22</b>           |                                  |                  |

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|   |   |  |  |   |   |   |                                     |
|---|---|--|--|---|---|---|-------------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>   |  | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487404 JJK</b> |                                     |
| 5. Generator's Name and Mailing Address<br><b>BILL MCWEENY<br/>4971 SW 29 WAY<br/>DANIA BEACH, FL 33312<br/>954-205-8468</b>  |   |  |  | Generator's Site Address (if different than mailing address)<br><b>BMI<br/>3232 SW 2ND AVENUE<br/>FORT LAUDERDALE, FL 33316</b> |   |   |                                     |
| 6. Transporter 1 Company Name<br><b>Cliff Barry (DANIA)</b>   |   |  |  | 954-763-3390  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                     |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |  |  |   |   | U.S. EPA ID Number                                  |                                     |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |   |  |  |   |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |                                     |
| 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 UN1993, Waste, Flammable liquids, n.o.s., (Toluene and Xylene), 3, PG II (APPV # <del>L471604TPA</del> 560968.353970)<br><b>H211892TPA</b> |  |   | 1   | DM  | 55                                  |
|   |   |  |  |   |   |   | G                                   |
|   |   |  |  |   |   |   |                                     |
|   |   |  |  |   |   |   | 13. Waste Codes<br>D001, F003, F005 |
| 14. Special Handling Instructions and Additional Information<br><b>① 46816</b>  |   |  |  |   |   |   |                                     |
| 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/Offoror's Printed/Typed Name<br><b>Bill Mcweeny</b>   |   |  |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>8 29 22</b>                    |                                     |
| TRANSPORTER   | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. |  |  |   | Port of entry/exit: _____                             |   |                                     |
|   | Transporter signature (for exports only): _____   |  |  |   | Date leaving U.S.: _____                              |   |                                     |
| DESIGNATED FACILITY   | 17. Transporter Acknowledgment of Receipt of Materials  |  |  |   |   |   |                                     |
|   | Transporter 1 Printed/Typed Name<br><b>MAICOLA Lewis</b>  |  |  |   | Signature<br><i>[Signature]</i>                       |   | Month Day Year<br><b>8 29 22</b>    |
| 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. <b>H141</b>  |   | 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<br><b>ANN STAGER</b>   |   |  |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>9 1 22</b>                     |                                     |

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|---|---|---|-------------------------------|---|---|---|----------------------------------|---------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>  | 2. Page 1 of<br><b>Page 1</b> | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>   | 4. Manifest Tracking Number<br><b>023487407 JJK</b> |   |                                  |                     |
| 5. Generator's Name and Mailing Address<br><b>SENTRY MANUFACTURING<br/>16760 NW 59TH AVENUE<br/>MIAMI, FL 33014-0000</b>  |   |   |                               | Generator's Site Address (if different than mailing address)<br><b>SENTRY MANUFACTURING<br/>16760 NW 59TH AVENUE<br/>MIAMI, FL 33014-0000</b> |   |   |                                  |                     |
| Generator's Phone: <b>786-264-3011</b>  |   |   |                               |   |   |   |                                  |                     |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |   |                               | 954-763-3380  |   | U.S. EPA ID Number<br><b>FLR000083071</b> |                                  |                     |
| 7. Transporter 2 Company Name   |   |   |                               |   |   | U.S. EPA ID Number                        |                                  |                     |
| 8. Designated Facility Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |   |                               |   |   | U.S. EPA ID Number<br><b>FLD981932494</b> |                                  |                     |
| 2002 N. ORIENT RD, TAMPA, FL  |   |   |                               |   |   |   |                                  |                     |
| Facility's Phone: <b>813-823-5302</b>   |   |   |                               |   |   |   |                                  |                     |
| GENERATOR   | 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))            |                               | 10. Containers<br>No. Type  |   | 11. Total Quantity                        | 12. Unit Wt./Vol.                | 13. Waste Codes     |
|   | X   | NA3082, Hazardous waste, liquid, n.o.s. (methylene chloride), 9, PG III (APPV # A180725TPA) 562207.355750                 |                               | 1 TP  |   | 250 G                                     |                                  | F002, F003, F005    |
|   | X   | <del>UN1993, Waste, Flammable liquids, n.o.s., 3, PG II (Acetonitrile and Methanol) (APPV # SENT 001) 562207.355751</del> |                               | <del>DF</del>   |   |   |                                  | <del>F003D001</del> |
|   | 3.  |   |                               |   |   |   |                                  |                     |
|   | 4.  |   |                               |   |   |   |                                  |                     |
| 14. Special Handling Instructions and Additional Information<br><b>① 2305 1615</b>  |   |   |                               |   |   |   |                                  |                     |
| 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<br><b>Antonio Juncz</b>  |   |   |                               | Signature<br>   |   | Month Day Year<br><b>8 29 22</b>          |                                  |                     |
| 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<br><b>Approval A180725TPA</b>  |   |                               |   | Signature<br>                                       |   | Month Day Year<br><b>8 29 22</b> |                     |
| DESIGNATED FACILITY   | Transporter 2 Printed/Typed Name<br><b>Approval SENT 001</b>  |   |                               |   | Signature<br>                                       |   | Month Day Year<br><b>8 29 22</b> |                     |
|   | 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. <b>H141</b>  |   | 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<br><b>ANN STAGEX</b>   |   |   |                               | Signature<br>   |   | Month Day Year<br><b>9 1 22</b>           |                                  |                     |



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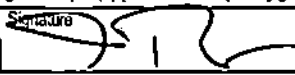
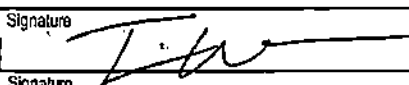
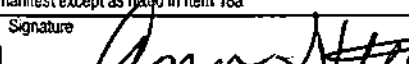
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|   |   |  |                               |   |  |   |                                  |                  |
|---|---|--|-------------------------------|---|--|---|----------------------------------|------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FIVSQG</b>  | 2. Page 1 of<br><b>Page 1</b> | 3. Emergency Response Phone<br><b>3E @ 800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487408 JJK</b>  |   |                                  |                  |
| 5. Generator's Name and Mailing Address<br><b>ALL TANK SERVICES LLC<br/>ALL TANK SERVICES LLC<br/>1903 W. MCNAB RD.<br/>POMPAHO BEACH, FL 33069</b>   |   |  |                               |   | Generator's Site Address (if different than mailing address)<br><b>ALL TANK SERVICES LLC<br/>1903 W. MCNAB RD.<br/>POMPAHO BEACH, FL 33069</b> |   |                                  |                  |
| Generator's Phone: <b>954-260-9443</b>  |   |  |                               |   |  |   |                                  |                  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |  |                               | 954-763-3390  |  | U.S. EPA ID Number<br><b>FLR000083071</b> |                                  |                  |
| 7. Transporter 2 Company Name   |   |  |                               |   |  | U.S. EPA ID Number                        |                                  |                  |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>   |   |  |                               |   | U.S. EPA ID Number<br><b>FLD981932494</b>  |   |                                  |                  |
| Facility's Phone: <b>813-623-6302</b>   |   |  |                               |   |  |   |                                  |                  |
| GENERATOR   | 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |                               | 10. Containers<br>No. Type                              |  | 11. Total Quantity                        | 12. Unit Wt./Vol.                | 13. Waste Codes  |
|   | 1. X  | UN1263, Waste, Paint related material, 3, PG II (B220603TPA) 562408.358050                                     |                               | TW 2 DM   |  | TD 55 110                                 | G                                | D001, F003, F005 |
|   | 2.  |  |                               |   |  |   |                                  |                  |
|   | 3.  |  |                               |   |  |   |                                  |                  |
|   | 4.  |  |                               |   |  |   |                                  |                  |
| 14. Special Handling Instructions and Additional Information<br><br><b>① 433 LB ② 391 LB</b>  |   |  |                               |   |  |   |                                  |                  |
| 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/Offeror's Printed/Typed Name<br><b>SA Driener</b>   |   |  |                               | Signature<br>   |  | Month Day Year<br><b>8 20 22</b>          |                                  |                  |
| 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.: _____  |  |                               |   |  |   |                                  |                  |
|   | 17. Transporter Acknowledgment of Receipt of Materials  |  |                               |   |  |   |                                  |                  |
|   | Transporter 1 Printed/Typed Name<br><b>Tariq Wallace</b>  |  |                               |   | Signature<br>  |   | Month Day Year<br><b>8 30 22</b> |                  |
| DESIGNATED FACILITY   | 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. <b>H141</b>  |   | 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<br><b>ANN STEIGER</b>  |   |  |                               | Signature<br>   |  | Month Day Year<br><b>9 1 20</b>           |                                  |                  |

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|---|---|--|--|-------------------------------|---|---|---|----------------------------------|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLR000166751</b>  |  | 2. Page 1 of<br><b>Page 1</b> | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>   |   | 4. Manifest Tracking Number<br><b>023487410 JJK</b> |                                  |                 |
| 5. Generator's Name and Mailing Address<br><b>IRL LABS<br/>6361 NW 33RD AVENUE<br/>FORT LAUDERDALE, FL 33309<br/>854-777-0018</b>   |   |  |  |                               | Generator's Site Address (if different than mailing address)<br><b>IRL LABS<br/>6361 NW 33RD AVENUE<br/>FORT LAUDERDALE, FL 33309</b> |   |   |                                  |                 |
| 6. Transporter 1 Company Name<br><b>Cliff Betty (DANIA)</b>   |   |  |  |                               | 954-763-3390  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                  |                 |
| 7. Transporter 2 Company Name   |   |  |  |                               | U.S. EPA ID Number  |   |   |                                  |                 |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |   |  |  |                               | U.S. EPA ID Number<br><b>FLD981932494</b>   |   |   |                                  |                 |
| 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                                  | 12. Unit Wt./Vol.                | 13. Waste Codes |
|   |   | X UN1993, Waste, Flammable liquids, n.o.s., (contains xylene)<br>3, PG II (APPROVAL IRL001) 662639.356410      |  |                               | No.   | Type  |   |                                  |                 |
|   |   |  |  |                               | 2   | DF  | 110   | G                                | D001, F003      |
|   |   |  |  |                               |   |   |   |                                  |                 |
|   |   |  |  |                               |   |   |   |                                  |                 |
| 14. Special Handling Instructions and Additional Information<br><br>① 183 LBS ② 407 LBS   |   |  |  |                               |   |   |   |                                  |                 |
| 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/Offoror's Printed/Typed Name<br><b>John Bowling</b>   |   |  |  |                               | Signature<br>                                     |   | Month Day Year<br><b>8 31 22</b>                    |                                  |                 |
| 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<br><b>IRL 001</b>  |  |  |                               |   | Signature<br> |   | Month Day Year<br><b>8 31 22</b> |                 |
| DESIGNATED FACILITY   | 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. <b>H141</b>  |   | 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<br><b>ANN STEIGER</b>  |   |  |  |                               | Signature<br>                                     |   | Month Day Year<br><b>9 1 22</b>                     |                                  |                 |

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|---|---|--|---|---|---|----------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>   | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E @ 800-451-8348</b> | 4. Manifest Tracking Number<br><b>020265275 JJK</b> |                                  |
| 5. Generator's Name and Mailing Address<br><b>VIDACANN, LLC<br/>5569 BOWDEN ROAD<br/>JACKSONVILLE, FL 32216</b>   |   |  | Generator's Site Address (if different than mailing address)<br><b>VIDACANN<br/>5569 BOWDEN ROAD<br/>JACKSONVILLE, FL 32216</b> |   |   |                                  |
| Generator's Phone: <b>772-672-1178</b>  |   |  |   |   |   |                                  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |  | 954-763-3390  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                  |
| 7. Transporter 2 Company Name   |   |  |   |   | U.S. EPA ID Number                                  |                                  |
| 8. Designated Facility Name and Address<br><b>ESPECULO CITY TAMP, INC<br/>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>   |   |  | U.S. EPA ID Number<br><b>FLD091032404</b>   |   |   |                                  |
| 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<br>No. Type                              |   | 11. Total Quantity               |
|   | X   | 1. UN1993, Waste, Flammable liquids, n.o.s. (ALCOHOLS) 3. PG II (G181604TPA) 547596.333609                     |   | 7 DM  |   | 385                              |
|   |   | 2.   |   |   |   |                                  |
|   |   | 3.   |   |   |   |                                  |
|   |   | 4.   |   |   |   |                                  |
| 13. Waste Codes<br>0001, F005   |   |  |   |   |   |                                  |
| 14. Special Handling Instructions and Additional Information<br><b>① 250 lbs ② 415 lbs ③ 399 lbs ④ 412 lbs ⑤ 338 lbs ⑥ 334 lbs ⑦ 484 lbs</b>  |   |  |   |   |   |                                  |
| 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<br><b>Kassidy Wallert</b>  |   |  | Signature<br><i>Kassidy Wallert</i>   |   | Month Day Year<br><b>1 31 22</b>                    |                                  |
| INT'L   | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. |  | Port of entry/exit:<br>Date leaving U.S.:   |   |   |                                  |
|   | Transporter signature (for exports only):   |  |   |   |   |                                  |
| TRANSPORTER   | 17. Transporter Acknowledgment of Receipt of Materials  |  |   |   |   |                                  |
|   | Transporter 1 Printed/Typed Name<br><b>JAY SMITH</b>  |  |   | Signature<br><i>Jay Smith</i>                           |   | Month Day Year<br><b>1 31 22</b> |
| DESIGNATED FACILITY   | 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. <b>H141</b>  |   | 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<br><b>HANN STEIGER</b>   |   |  | Signature<br><i>Hann Steiger</i>  |   | Month Day Year<br><b>2 10 22</b>                    |                                  |

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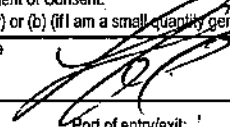
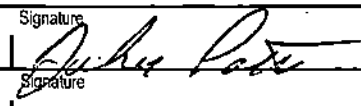
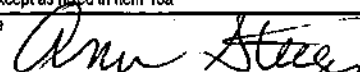
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|   |  |  |   |   |   |                   |                 |
|---|--|--|---|---|---|-------------------|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>GAR000088827</b>  | 2. Page 1 of<br><b>Page 1</b>             | 3. Emergency Response Phone<br><b>3E@800-451-8348</b> | 4. Manifest Tracking Number<br><b>020265276 JJK</b> |                   |                 |
| 5. Generator's Name and Mailing Address<br><b>TAURUS HOLDINGS INC<br/>TAURUS HOLDINGS INC<br/>100 TAURUS WAY<br/>BAINBRIDGE, GA 39817</b>   |  | Generator's Site Address (if different than mailing address)<br><b>TAURUS HOLDINGS INC<br/>100 TAURUS WAY<br/>BAINBRIDGE, GA 39817</b> |   |   |   |                   |                 |
| Generator's Phone: <b>805-607-0845</b>  |  |  |   |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                   |                 |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |  | 954-763-3390   |   |   | U.S. EPA ID Number                                  |                   |                 |
| 7. Transporter 2 Company Name   |  |  |   |   | U.S. EPA ID Number                                  |                   |                 |
| 8. Designated Facility Name and Site Address<br><b>USECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>  |  | U.S. EPA ID Number<br><b>FLD081032404</b>  |   |   |   |                   |                 |
| Facility's Phone: <b>813-623-5302</b>   |  |  |   |   |   |                   |                 |
| GENERATOR   | 9a. HM   | 9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                         | 10. Containers<br>No. Type                |   | 11. Total Quantity                                  | 12. Unit Wt./Vol. | 13. Waste Codes |
|   | X  | 1. UN1824, Waste, Sodium hydroxide solution, 8, PG II (APPV # G20D560TPA) S47610.333520  | 4   | DM  | 220   | G                 | 0002            |
|   |  | 2.   |   |   |   |                   |                 |
|   |  | 3.   |   |   |   |                   |                 |
|   |  | 4.   |   |   |   |                   |                 |
| 14. Special Handling Instructions and Additional Information<br><b>① 2,510 lbs</b>  |  |  |   |   |   |                   |                 |
| 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<br><b>FRED BARBER</b>  |  | Signature<br><i>Fred Barber</i>  |   | Month Day Year<br><b>1 31 22</b>                      |   |                   |                 |
| INT'L   | 16. International Shipments<br><input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.   |  | Port of entry/exit:<br>Date leaving U.S.: |   |   |                   |                 |
| TRANSPORTER   | 17. Transporter Acknowledgment of Receipt of Materials   |  |   |   |   |                   |                 |
|   | Transporter 1 Printed/Typed Name<br><b>SC Grant</b>  |  | Signature<br><i>SC Grant</i>              |   | Month Day Year<br><b>1 31 22</b>                    |                   |                 |
| DESIGNATED FACILITY   | Transporter 2 Printed/Typed Name   |  | Signature                                 |   | Month Day Year                                      |                   |                 |
|   | 18. Discrepancy  |  |   |   |   |                   |                 |
|   | 18a. Discrepancy Indication Space<br><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. <b>HI10</b>  |  | 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<br><b>ANN STEIGER</b>  |  | Signature<br><i>Ann Steiger</i>  |   | Month Day Year<br><b>2 10 22</b>                      |   |                   |                 |

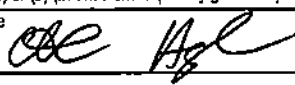
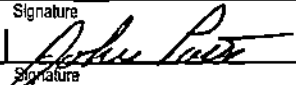
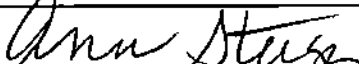
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|   |   |  |    |   |   |   |                                  |
|---|---|--|----|---|---|---|----------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLD 982115677</b>   |    | 2. Page 1 of<br>Page 1  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>   | 4. Manifest Tracking Number<br><b>022158354 JJK</b> |                                  |
| 5. Generator's Name and Mailing Address<br><b>MC ASSEMBLY<br/>425 NORTH DRIVE<br/>MELBOURNE, FL 32934-0000</b>  |   |  |    | Generator's Site Address (if different than mailing address)<br><b>MC ASSEMBLY<br/>425 NORTH DRIVE<br/>MELBOURNE, FL 32934-0000</b> |   |   |                                  |
| Generator's Phone: <b>321-253-0541</b>  |   |  |    |   |   |   |                                  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |  |    | 954-763-3390  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                  |
| 7. Transporter 2 Company Name   |   |  |    |   |   | U.S. EPA ID Number                                  |                                  |
| 8. Designated Facility Name<br><b>USECOTOLOBY TAMP, INC</b>   |   |  |    |   |   | U.S. EPA ID Number<br><b>FLD081032404</b>           |                                  |
| 2002 N. ORIENT RD, TAMPA, FL  |   |  |    |   |   |   |                                  |
| Facility's Phone: <b>813-623-5302</b>   |   |  |    |   |   |   |                                  |
| 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.                |
|   |   |  |    | No.   | Type  |   |                                  |
|   | X 1.  | UN1993, Waste flammable liquids, n.o.s. (Xylene, Toluene). PG II 547257.333015                                 |    | 1   | DM  | 55  | L                                |
|   | 2.  | <del>NON HAZ LIQUID</del> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">FP</span>   |    | 7   | DM  | 38.5  | 6                                |
|   | 3.  |  |    |   |   |   |                                  |
| 13. Waste Codes   |   |  |    |   |   |   |                                  |
|   |   |  |    |   |   |   |                                  |
|   |   |  |    |   |   |   |                                  |
|   |   |  |    |   |   |   |                                  |
|   |   |  |    |   |   |   |                                  |
| 14. Special Handling Instructions and Additional Information<br><b>①. 308 lbs</b>   |   |  |    |   |   |   |                                  |
| 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<br><b>Lonnie Chen</b>  |   |  |    | Signature<br>                                   |   | Month Day Year<br><b>1/31/22</b>                    |                                  |
| 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): _____   |  |    |   |   |   |                                  |
| TRANSPORTER   | 17. Transporter Acknowledgment of Receipt of Materials  |  |    |   |   |   |                                  |
|   | Transporter 1 Printed/Typed Name<br><b>Jane Pato</b>  |  |    |   | Signature<br> |   | Month Day Year<br><b>1/31/22</b> |
|   | 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. <b>H111</b>  | 2.   | 3. | 4.  |   |   |                                  |
|   | 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 16a  |  |    |   |   |   |                                  |
|   | Printed/Typed Name<br><b>Ann Steiger</b>  |  |    |   | Signature<br> |   | Month Day Year<br><b>2/10/22</b> |

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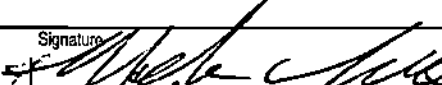
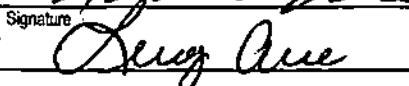
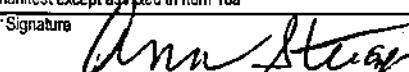
Form Approved. OMB No. 2050-0039

|  |   |  |  |                               |  |   |  |   |                   |                       |  |
|--|---|--|--|-------------------------------|--|---|--|---|-------------------|-----------------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>  |   | 1. Generator ID Number<br><b>FLR000224124</b>  |  | 2. Page 1 of<br><b>Page 1</b> |  | 3. Emergency Response Phone<br><b>352-800-451-8248</b>  |  | 4. Manifest Tracking Number<br><b>022158356 JJK</b>   |                   |                       |  |
|  |   | 5. Generator's Name and Mailing Address<br><b>AMSPEC - CAPE CANAVERAL<br/>AMSPEC - CAPE CANAVERAL<br/>191 CENTER STREET<br/>CAPE CANAVERAL, FL 32920</b> |  |                               |  |   |  | Generator's Site Address (if different than mailing address)<br><b>AMSPEC - CAPE CANAVERAL<br/>191 CENTER STREET<br/>CAPE CANAVERAL, FL 32920</b> |                   |                       |  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>  |   | 954-753-3390   |  |                               |  | U.S. EPA ID Number<br><b>FLR000083071</b>   |  |   |                   |                       |  |
| 7. Transporter 2 Company Name  |   |  |  |                               |  | U.S. EPA ID Number  |  |   |                   |                       |  |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>  |   |  |  |                               |  | U.S. EPA ID Number<br><b>FLD081032404</b>   |  |   |                   |                       |  |
| Facility's Phone: <b>813-523-5302</b>  |   |  |  |                               |  |   |  |   |                   |                       |  |
| GENERATOR  | 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))   |  |                               |  | 10. Containers<br>No. Type  |  | 11. Total Quantity  | 12. Unit Wt./Vol. | 13. Waste Codes       |  |
|  | X   | 1. UN1993, Flammable liquids, n.o.s., 3, PG II, (Gasoline and diesel fuel)(APPV# A181531TPA) 546557.332750   |  |                               |  | 3 DM  |  | 165<br>9  | g                 | D001 F0030018<br>F005 |  |
|  |   | 2.   |  |                               |  |   |  |   |                   |                       |  |
|  |   | 3.   |  |                               |  |   |  |   |                   |                       |  |
|  |   | 4.   |  |                               |  |   |  |   |                   |                       |  |
| 14. Special Handling Instructions and Additional Information<br><b>① 376 lbs ② 363 lbs ③ 383 lbs</b>   |   |  |  |                               |  |   |  |   |                   |                       |  |
| 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.<br>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<br><b>Christina Aguilar</b>   |   |  |  |                               |  | Signature<br> |  | Month Day Year<br><b>1 31 22</b>  |                   |                       |  |
| TRANSPORTER  | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____<br>Transporter signature (for exports only): _____ Date leaving U.S.: _____   |  |  |                               |  |   |  |   |                   |                       |  |
|  | 17. Transporter Acknowledgment of Receipt of Materials<br>Transporter 1 Printed/Typed Name <b>JOHN PATE</b> Signature  Month Day Year <b>1 31 22</b><br>Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year _____ |  |  |                               |  |   |  |   |                   |                       |  |
| DESIGNATED FACILITY  | 18. Discrepancy<br>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<br>Manifest Reference Number: _____  |  |  |                               |  |   |  |   |                   |                       |  |
|  | 18b. Alternate Facility (or Generator) U.S. EPA ID Number _____<br>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)<br>1. <b>H141</b> 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<br>Printed/Typed Name <b>ANN STEIGER</b> Signature  Month Day Year <b>2 10 22</b>   |   |  |  |                               |  |   |  |   |                   |                       |  |

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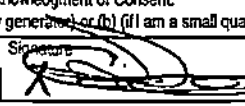
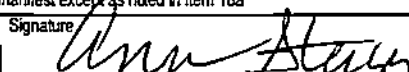
Form Approved. OMB No. 2050-0039

|   |   |  |    |                               |  |   |   |   |                                  |                  |  |  |
|---|---|--|----|-------------------------------|--|---|---|---|----------------------------------|------------------|--|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>   |    | 2. Page 1 of<br><b>Page 1</b> |  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>   |   | 4. Manifest Tracking Number<br><b>023487183 JJK</b> |                                  |                  |  |  |
| 5. Generator's Name and Mailing Address<br><b>CREATIVE WORKSHOP<br/>118 NW HILL STREET<br/>DANIA, FL 33004<br/>854-920-3303</b>   |   |  |    |                               |  | Generator's Site Address (if different than mailing address)<br><b>CREATIVE WORKSHOP<br/>118 NW HILL STREET<br/>DANIA, FL 33004</b> |   |   |                                  |                  |  |  |
| Generator's Phone:<br><b>Cliff Berry (DANIA)</b>  |   |  |    |                               |  | <b>954-763-3390</b>   |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                  |                  |  |  |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |  |    |                               |  | <b>Cliff Berry (Dania)</b>  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                  |                  |  |  |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |   |  |    |                               |  |   |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |                                  |                  |  |  |
| 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                                  | 12. Unit Wt./Vol.                | 13. Waste Codes  |  |  |
|   | X   | 1. UN1263, Waste, Paint related material, 3, PG II, APP; D150570EQF 545517.330258                              |    |                               |  | 1   | DM  | 55  | G                                | D001, F003, F005 |  |  |
|   |   | 2.   |    |                               |  |   |   |   |                                  |                  |  |  |
|   |   | 3.   |    |                               |  |   |   |   |                                  |                  |  |  |
|   |   | 4.   |    |                               |  |   |   |   |                                  |                  |  |  |
| 14. Special Handling Instructions and Additional Information<br><b>① 491 1b's</b>   |   |  |    |                               |  |   |   |   |                                  |                  |  |  |
| 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<br><b>Trey Tyner</b>   |   |  |    |                               |  | Signature<br>                                   |   | Month Day Year<br><b>1 10 22</b>                    |                                  |                  |  |  |
| 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<br><b>MAKAL Lewis</b>  |  |    |                               |  |   | Signature<br> |   | Month Day Year<br><b>1 10 22</b> |                  |  |  |
|   | Transporter 2 Printed/Typed Name<br><b>Leroy Arce</b>   |  |    |                               |  |   | Signature<br> |   | Month Day Year<br><b>1 10 22</b> |                  |  |  |
| 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. <b>H141</b>  | 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<br><b>Ann Stager</b>   |  |    |                               |  |   | Signature<br> |   | Month Day Year<br><b>1 10 22</b> |                  |  |  |

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| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLCESQG</b>   | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487193 JJK</b> |                 |
|---|--|--|---|---|---|-----------------|
| 5. Generator's Name and Mailing Address<br><b>FLORIDA SPECTRUM ENVIRONMENT SERVICE<br/>1460 WEST MCNAB ROAD<br/>FORT LAUDERDALE, FL 33309</b>   |  |  | Generator's Site Address (if different than mailing address)<br><b>FLORIDA SPECTRUM ENVIRONMENT SERVICES<br/>1460 WEST MCNAB ROAD<br/>FORT LAUDERDALE, FL 33309</b> |   |   |                 |
| Generator's Phone: <b>954-977-4138</b>  |  |  | U.S. EPA ID Number<br><b>FLR000083071</b>   |   |   |                 |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |  |  | U.S. EPA ID Number  |   |   |                 |
| 7. Transporter 2 Company Name   |  |  | U.S. EPA ID Number  |   |   |                 |
| 8. Designated Facility Name<br><b>US ECOLOGY TAMPA, INC</b>   |  |  | U.S. EPA ID Number<br><b>FLD981932494</b>   |   |   |                 |
| 2002 N. ORIENT RD, TAMPA, FL<br>Facility's Phone: <b>813-623-5302</b>   |  |  |   |   |   |                 |
| 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. UN3264, Waste, Corrosive liquid, acidic, inorganic, n.o.s., 8, PG II, (Mercuric Sulfate, Sulfuric a 645949.330917 | 1  | DF  | 30  | 0   | D002, D009      |
|   | 2.   |  |   |   |   |                 |
|   | 3.   |  |   |   |   |                 |
|   | 4.   |  |   |   |   |                 |
| 14. Special Handling Instructions and Additional Information<br><br><b>Line 1 # 293</b>   |  |  |   |   |   |                 |
| 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(e) (if I am a large quantity generator) or (f) (if I am a small quantity generator) is true. |  |  |   |   |   |                 |
| Generator's/Officer's Printed/Typed Name <b>CLIVE DUDLEY</b> Signature  Month <b>1</b> Day <b>17</b> Year <b>22</b>   |  |  |   |   |   |                 |
| 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 <b>Ken Hill</b>  |  | Signature <b>Ken Hill</b>  |   | Month <b>1</b> Day <b>17</b> Year <b>22</b>           |   |                 |
| 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. <b>HUO</b>   |  | 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 <b>Ann Stager</b>  |  | Signature  |   | Month <b>1</b> Day <b>20</b> Year <b>20</b>           |   |                 |



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|   |   |   |                        |   |  |                  |
|---|---|---|------------------------|---|--|------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br>FLCE996   | 2. Page 1 of<br>Page 1 | 3. Emergency Response Phone<br>352-888-451-8348 | 4. Manifest Tracking Number<br>023487195 JJK |                  |
| 5. Generator's Name and Mailing Address<br>JOE VS YACHT REFINISHING INC<br>3764 SOUTHWEST 30TH AVENUE<br>FORT LAUDERDALE, FL 33312  |   | Generator's Site Address (if different than mailing address)<br>JOE VS YACHT REFINISHING INC<br>3764 SOUTHWEST 30TH AVENUE<br>FORT LAUDERDALE, FL 33312 |                        |   |  |                  |
| Generator's Phone<br>54-306-3301  |   | U.S. EPA ID Number<br>FLR000083071  |                        |   |  |                  |
| 6. Transporter 1 Company Name<br>Cliff Berry (DANIA)  |   | 854-763-3390  |                        | U.S. EPA ID Number                              |  |                  |
| 7. Transporter 2 Company Name   |   | U.S. EPA ID Number  |                        |   |  |                  |
| 8. Designated Facility Name and Site Address<br>US ECOLOGY TAMPA, INC<br>2002 N. ORIENT RD, TAMPA, FL   |   | U.S. EPA ID Number<br>FLD981932494  |                        |   |  |                  |
| Facility's Phone: 813-623-5302  |   |   |                        |   |  |                  |
| 9a. HM  | 9b. U.S. DOT Description: (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers<br>No. Type  |                        | 11. Total Quantity                              | 12. Unit Wt./Vol.                            | 13. Waste Codes  |
| X   | 1. UN1993, Waste, Flammable liquids, n.o.s., (Toluene and Xylene), 3, PG II (APP# L201713TPA) 546002.331001     | 1   | DF                     | 30  | G  | D001, F003, F005 |
|   | 2.  |   |                        |   |  |                  |
|   | 3.  |   |                        |   |  |                  |
|   | 4.  |   |                        |   |  |                  |
| 14. Special Handling Instructions and Additional Information<br># 248   |   |   |                        |   |  |                  |
| 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<br>X Dennis Mulally  |   | Signature<br>X Dennis Mulally   |                        | Month Day Year<br>1 11 22                       |  |                  |
| 16. International Shipments<br>Transporter signature (for exports only):  |   | <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.   |                        | Port of entry/exit:<br>Date leaving U.S.:       |  |                  |
| 17. Transporter Acknowledgment of Receipt of Materials  |   |   |                        |   |  |                  |
| Transporter 1 Printed/Typed Name<br>Ken Hill  |   | Signature<br>Ken Hill   |                        | Month Day Year<br>1 11 22                       |  |                  |
| 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. 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<br>Ann Steiger   |   | Signature<br>Ann Steiger  |                        | Month Day Year<br>1 20 22                       |  |                  |

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|   |   |  |  |                     |                                 |   |                                    |   |                   |                 |  |
|---|---|--|--|---------------------|---------------------------------|---|------------------------------------|---|-------------------|-----------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLR000081075</b>  |  | 2. Page 1 of Page 1 |                                 | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>   |                                    | 4. Manifest Tracking Number<br><b>023487197 JJK</b> |                   |                 |  |
| 5. Generator's Name and Mailing Address<br><b>LAUDERDALE MARINE CENTER<br/>2029 SW 20TH STREET<br/>FORT LAUDERDALE, FL 33315<br/>954-527-2700</b>   |   |  |  |                     |                                 | Generator's Site Address (if different than mailing address)<br><b>LAUDERDALE MARINE CENTER<br/>2029 SW 20TH STREET<br/>FORT LAUDERDALE, FL 33315</b> |                                    |   |                   |                 |  |
| 6. Generator's Phone:<br><b>CLIFF BERRY (DANIA)</b>   |   |  |  |                     |                                 | 6. Generator's Company Name<br><b>854-763-3390</b>  |                                    | U.S. EPA ID Number<br><b>FLR000083071</b>           |                   |                 |  |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |  |  |                     |                                 | 7. Transporter 2 Company Name   |                                    | U.S. EPA ID Number                                  |                   |                 |  |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>913-623-5302</b>  |   |  |  |                     |                                 | 8. Designated Facility Name and Site Address  |                                    | U.S. EPA ID Number<br><b>FLD981932494</b>           |                   |                 |  |
| 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                                  | 12. Unit Wt./Vol. | 13. Waste Codes |  |
|   | X   | 1. UN3264, Waste, Corrosive liquid, acidic, inorganic, n.o.s., (Muriatic Acid, Phosphoric Acid), 8, PG II<br><b>548292.331422</b> <i>APPROX: 12108 24 TPA</i>                        |  |                     |                                 | 1   | DM                                 | 65  | G                 | D002, D007      |  |
|   | X   | 2. UN3014, Hydrogen peroxide, aqueous solutions with more than 20 percent but not more than 60 percent hydrogen peroxide, 5.1(b)<br><b>548292.331425</b> <i>APPROX: 12108 70 TPA</i> |  |                     |                                 | 1   | DF                                 | 5   | G                 | D001, D002      |  |
|   |   | 3.   |  |                     |                                 |   |                                    |   |                   |                 |  |
|   |   | 4.   |  |                     |                                 |   |                                    |   |                   |                 |  |
| 14. Special Handling Instructions and Additional Information<br><br><i>Line 1 #111 Line 2 #42</i>   |   |  |  |                     |                                 |   |                                    |   |                   |                 |  |
| 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<br><b>Tyler Sutter</b>   |   |  |  |                     |                                 | Signature<br><i>[Signature]</i>   |                                    | Month Day Year<br><b>1 11 2022</b>                  |                   |                 |  |
| 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<br><b>Ken Hill</b>   |  |  |                     | Signature<br><i>[Signature]</i> |   | Month Day Year<br><b>1 11 2022</b> |   |                   |                 |  |
|   | 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. <b>H110</b>  |   | 2. <b>H141</b>   |  | 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<br><b>ANN STEIGER</b>  |   |  |  |                     |                                 | Signature<br><i>[Signature]</i>   |                                    | Month Day Year<br><b>1 20 22</b>                    |                   |                 |  |

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|  |  |  |    |                               |  |  |                              |   |                    |                  |                  |  |
|--|--|--|----|-------------------------------|--|--|------------------------------|---|--------------------|------------------|------------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>  |  | 1. Generator ID Number<br><b>FLCESQG</b>   |    | 2. Page 1 of<br><b>Page 1</b> |  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>  |                              | 4. Manifest Tracking Number<br><b>023487198 JJK</b> |                    |                  |                  |  |
| 5. Generator's Name and Mailing Address<br><b>OWLAEROSPACE<br/>2311 THOMAS STREET<br/>HOLLYWOOD, FL 33020<br/>854-362-3971</b>   |  |  |    |                               |  | Generator's Site Address (if different than mailing address)<br><b>OWLAEROSPACE<br/>2311 THOMAS STREET<br/>HOLLYWOOD, FL 33020</b> |                              |   |                    |                  |                  |  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>  |  |  |    |                               |  | 854-763-3390   |                              | U.S. EPA ID Number<br><b>FLR000083071</b>           |                    |                  |                  |  |
| 7. Transporter 2 Company Name  |  |  |    |                               |  | U.S. EPA ID Number   |                              |   |                    |                  |                  |  |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>   |  |  |    |                               |  | U.S. EPA ID Number<br><b>FLD981932494</b>  |                              |   |                    |                  |                  |  |
| 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                                  | 12. Unit Wt./Vol.  | 13. Waste Codes  |                  |  |
|  | X  | 1. Waste, Flammable liquids, n.o.s., (Toluene, Xylene) 3, PG II<br>Approv: A220915TPA 546419.331651            |    |                               |  | 1  | DF                           | 15  | G                  | D001             |                  |  |
|  |  | 2.   |    |                               |  |  |                              |   |                    |                  |                  |  |
|  |  | 3.   |    |                               |  |  |                              |   |                    |                  |                  |  |
|  |  | 4.   |    |                               |  |  |                              |   |                    |                  |                  |  |
| 14. Special Handling Instructions and Additional Information<br><br><b>Line 1 # 44</b>   |  |  |    |                               |  |  |                              |   |                    |                  |                  |  |
| 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.<br>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<br><b>X Josue Escorcia</b>  |  |  |    |                               |  | Signature<br><b>X</b>  |                              | Month<br><b>11</b>                                  |                    | Day<br><b>17</b> |                  |  |
| 15. International Shipments<br><input type="checkbox"/> Import to U.S.   |  |  |    |                               |  | <input type="checkbox"/> Export from U.S.  |                              | Part of entry/exit:<br>Date leaving U.S.:           |                    |                  |                  |  |
| TRANSPORTER INT'L  | 17. Transporter Acknowledgment of Receipt of Materials   |  |    |                               |  |  |                              |   |                    |                  |                  |  |
|  | Transporter 1 Printed/Typed Name<br><b>Ken Hill</b>  |  |    |                               |  |  | Signature<br><b>Ken Hill</b> |   | Month<br><b>11</b> |                  | Day<br><b>17</b> |  |
|  | Transporter 2 Printed/Typed Name   |  |    |                               |  |  | Signature                    |   | Month              |                  | Day              |  |
| DESIGNATED FACILITY  | 18. Discrepancy  |  |    |                               |  |  |                              |   |                    |                  |                  |  |
|  | 18a. Discrepancy Indication Space<br><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)<br>U.S. EPA ID Number   |  |    |                               |  |  |                              |   |                    |                  |                  |  |
|  | Facility's Phone:  |  |    |                               |  |  |                              |   |                    |                  |                  |  |
| 18c. Signature of Alternate Facility (or Generator)  |  |  |    |                               |  |  |                              |   |                    |                  |                  |  |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)  |  |  |    |                               |  |  |                              |   |                    |                  |                  |  |
| 1. <b>H141</b>   |  |  | 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<br><b>Ann Stager</b>  |  |  |    |                               |  | Signature<br><b>Ann Stager</b>   |                              | Month<br><b>11</b>                                  |                    | Day<br><b>20</b> |                  |  |

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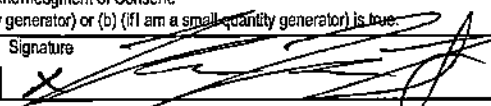
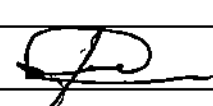
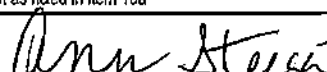
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|   |   |   |                                 |  |   |                  |                 |
|---|---|---|---------------------------------|--|---|------------------|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCS06</b>   | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>352-800-4518</b> | 4. Manifest Tracking Number<br><b>020265267 JJK</b> |                  |                 |
| 5. Generator's Name and Mailing Address<br><br><b>VIDACANN, LLC<br/>5559 BOWDEN ROAD<br/>JACKSONVILLE, FL 32216</b>   |   | Generator's Site Address (if different than mailing address)<br><br><b>VIDACANN<br/>5559 BOWDEN ROAD<br/>JACKSONVILLE, FL 32216</b> |                                 |  |   |                  |                 |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   | 954-763-3390  |                                 | U.S. EPA ID Number<br><b>FLR000083071</b>          |   |                  |                 |
| 7. Transporter 2 Company Name   |   |   |                                 | U.S. EPA ID Number                                 |   |                  |                 |
| 8. Designated Facility Name and Site Address<br><b>E. Q. OF FLORIDA INC. USECOLOGY TAMPA INC<br/>2002 N. Orient Rd<br/>Tampa, FL</b>  |   | U.S. EPA ID Number<br><b>FLD981932444</b>   |                                 |  |   |                  |                 |
| Facility's Phone: <b>813-523-5302</b>   |   |   |                                 |  |   |                  |                 |
| GENERATOR   | 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))                      | 10. Containers<br>No.           | Type   | 11. Total Quantity                                  | 12. Unit Wt/Vol. | 13. Waste Codes |
|   | X   | 1. UN1993, Waste, Flammable liquids, n.p.s. (ALCOHOLS) 3. PG I (G 181864TPA) 542053.325120  | 3                               | DM   | 165   |                  | D001, F005      |
|   |   | 2.  |                                 |  |   |                  |                 |
|   |   | 3.  |                                 |  |   |                  |                 |
|   |   | 4.  |                                 |  |   |                  |                 |
| 14. Special Handling Instructions and Additional Information<br><b>① 419/165 ② 464/165 ③ 409/165</b>  |   |   |                                 |  |   |                  |                 |
| 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<br><b>Kassidy Wollert</b>  |   |   |                                 |  |   |                  |                 |
| Signature<br><b>Kassidy Wollert</b>   |   |   |                                 |  |   |                  |                 |
| Month Day Year<br><b>11 08 21</b>   |   |   |                                 |  |   |                  |                 |
| 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<br><b>SC Grant</b>   |   | Signature<br><b>SC Grant</b>    |  | Month Day Year<br><b>11 18 21</b>                   |                  |                 |
|   | 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. <b>H141</b>  | 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<br><b>ANN STEIGER</b>  |   | Signature<br><b>Ann Steiger</b> |  | Month Day Year<br><b>11 11 21</b>                   |                  |                 |

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|   |  |  |   |   |   |                                    |
|---|--|--|---|---|---|------------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br>FLR000213059   | 2. Page 1 of 2  | 3. Emergency Response Phone<br>352-893-1511   | 4. Manifest Tracking Number<br><b>022158035 JJK</b> |                                    |
| 5. Generator's Name and Mailing Address<br><b>ALLTECH ENVIRONMENTAL<br/>LENGO MARINE<br/>PO BOX 501<br/>STEECHOSSEE, FL 34973</b>   |  |  |   | Generator's Site Address (if different than mailing address)<br><b>LENGO MARINE<br/>4700 SE MUNICIPAL COURT<br/>STUART, FL 34997-0000</b> |   |                                    |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |  |  |   | 954-763-3390  |   | U.S. EPA ID Number<br>FLR000083071 |
| 7. Transporter 2 Company Name   |  |  |   |   |   | U.S. EPA ID Number                 |
| 8. Designated Facility Name and Site Address<br><b>USECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>  |  |  |   | U.S. EPA ID Number<br>FLD0021032404   |   |                                    |
| Facility's Phone: <b>813-623-5302</b>   |  |  |   |   |   |                                    |
| 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. RQ, UN3264, Waste, Corrosive liquid, acidic, inorganic, n.o.s., 8, PG II, ( App# E150658EQF) 541726.324510  |   | Z   | TP  | 500 G                              |
|   |  | 2.   |   |   |   |                                    |
|   |  | 3.   |   |   |   |                                    |
|   | 4.   |  |   |   |   |                                    |
| 13. Waste Codes   |  |  |   |   |   |                                    |
| 0002  |  |  |   |   |   |                                    |
| 14. Special Handling Instructions and Additional Information<br><b>① 3664/lbs    ② 3938/lbs</b>   |  |  |   |   |   |                                    |
| 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<br><b>X Kevin Kortum</b>   |  |  |   | Signature<br>   |   | Month Day Year<br><b>11 8 21</b>   |
| 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.: _____   |  |   |   |   |                                    |
|   | 17. Transporter Acknowledgment of Receipt of Materials   |  |   |   |   |                                    |
| TRANSPORTER   | Transporter 1 Printed/Typed Name<br><b>JAMES RICHARD</b>   |  | Signature<br> |   | Month Day Year<br><b>11 8 21</b>                    |                                    |
|   | 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: _____   |  |   |   |   |                                    |
| DESIGNATED FACILITY   | Facility's Phone: _____  |  |   |   |   |                                    |
|   | 18c. Signature of Alternate Facility (or Generator) _____ Month Day Year <b>11 11 21</b>   |  |   |   |   |                                    |
|   | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)  |  |   |   |   |                                    |
|   | 1. <b>HI10</b>   |  | 2.  |   | 3.  |                                    |
| 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<br><b>Ann Steiger</b>  |  |  |   | Signature<br>   |   | Month Day Year<br><b>11 11 21</b>  |

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|   |   |  |                                    |  |   |               |                                     |
|---|---|--|------------------------------------|--|---|---------------|-------------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br>FLCESQG  | 2. Page 1 of 1                     | 3. Emergency Response Phone<br>3E @ 800-451-5345 | 4. Manifest Tracking Number<br><b>022158037 JJK</b> |               |                                     |
| 5. Generator's Name and Mailing Address<br>HWR WAREHOUSE<br>HWR WAREHOUSE<br>1100 17 TH STREET<br>(772) 812-0371<br>VERO BEACH, FL 32960  |   | Generator's Site Address (if different than mailing address)<br>HWR WAREHOUSE<br>1100 17 TH STREET<br>VERO BEACH, FL 32960 |                                    |  |   |               |                                     |
| 6. Transporter's Name<br>US ECOLOGY TAMP<br>954-763-3890  |   | U.S. EPA ID Number<br>PER000083071   |                                    |  |   |               |                                     |
| 7. Designated Facility Name and Site Address<br>US ECOLOGY TAMP, INC<br>2002 N. ORIENT RD, TAMPA, FL<br>813-623-5302  |   | U.S. EPA ID Number<br>FL0861832484   |                                    |  |   |               |                                     |
| Facility's Phone:   |   |  |                                    |  |   |               |                                     |
| 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))<br>UN1002, Waste flammable liquids, n.o.s. (Xylene, Toluene), 3,<br>PG II 543046.326551 APPROV: W210746TBA |  | 10. Containers<br>No. Type<br>1 DM |  | 11. Total Quantity<br>55                            | 12. Unit<br>G | 13. Waste Codes<br>0001, F003, F005 |
| 14. Special Handling Instructions and Additional Information<br>① 193 lbs   |   |  |                                    |  |   |               |                                     |
| 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<br>DANIEL COPE   |   | Signature<br><i>[Signature]</i>  |                                    | Month Day Year<br>11 30 21                       |   |               |                                     |
| 16. International Shipments<br><input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.  |   | Port of entry/exit:<br>Date leaving U.S.:  |                                    |  |   |               |                                     |
| 17. Transporter Acknowledgment of Receipt of Materials<br>Transporter 1 Printed/Typed Name<br>John Kozian   |   | Signature<br><i>[Signature]</i>  |                                    | Month Day Year<br>11 30 21                       |   |               |                                     |
| Transporter 2 Printed/Typed Name  |   | Signature  |                                    | Month Day Year                                   |   |               |                                     |
| 18. Discrepancy   |   |  |                                    |  |   |               |                                     |
| 18a. Discrepancy Indication Space<br><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)   |   |  |                                    |  |   |               |                                     |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a<br>Printed/Typed Name<br>Kassidy Hines   |   | Signature<br><i>[Signature]</i>  |                                    | Month Day Year<br>12 19 21                       |   |               |                                     |

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| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLR000214171</b> | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E @ 800-451-8346</b> | 4. Manifest Tracking Number<br><b>022158346 JJK</b> |                        |
|---|--|---|---|---|---|------------------------|
| 5. Generator's Name and Mailing Address<br><b>ARNOTT, LLC<br/>100 SEA RAY DRIVE<br/>MERRITT ISLAND, FL 32953</b>  |  |   | Generator's Site Address (if different than mailing address)<br><b>ARNOTT AIR SUSPENSION PRODUCT<br/>100 SEA RAY DRIVE<br/>MERRITT ISLAND, FL 32953</b> |   |   |                        |
| Generator's Phone: <b>321-858-3016</b>  |  |   | 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   | 954-753-3390  |                        |
|   |  |   | 7. Transporter 2 Company Name   |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                        |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>   |  |   | U.S. EPA ID Number<br><b>FLD981032404</b>   |   |   |                        |
| Facility's Phone: <b>813-623-5302</b>   |  |   |   |   |   |                        |
| 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  |   |   |                        |
| X1  | UN1993, Waste, Flammable liquids, n.o.s., (Benzene and Xylenemixed isomers)3, PG II 542253.325419              | 1   | DM  | 250   | 6   | D001, D018, F003, F005 |
| X2  | UN1325, Waste, Flammable solids, organic, n.o.s., 4.1, PG II (Xylene, Toluene) 542253.325428                   | 1   | DM  | 100   | P   | D001, D018, F003, F005 |
| 3.  |  |   |   |   |   |                        |
| 4.  |  |   |   |   |   |                        |
| 14. Special Handling Instructions and Additional Information<br><b>① 321 lbs    ② 86 lbs</b>  |  |   |   |   |   |                        |
| 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                                  |                        |
| 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<br><b>JOHN ROTT</b>  |  |   | Signature<br><i>John Rott</i>   |   | Month   Day   Year<br><b>11   9   21</b>            |                        |
| 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<br><b>Generator signed in box 20. Signature should be in box 15.</b>  |  |   |   |   |   |                        |
| 18b. Alternate Facility (or Generator)  |  |   | U.S. EPA ID Number  |   |   |                        |
| Facility's Phone:   |  |   |   |   |   |                        |
| 18c. Signature of Alternate Facility (or Generator)   |  |   | Signature   |   | Month   Day   Year                                  |                        |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)   |  |   |   |   |   |                        |
| 1. <b>H141</b>  |  | 2. <b>H141</b>                                |   | 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<br><b>Ann Steiger</b>  |  |   | Signature<br><i>Ann Steiger</i>   |   | Month   Day   Year<br><b>11   18   21</b>           |                        |

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|  |  |   |   |  |   |                   |
|--|--|---|---|--|---|-------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>  |  | 1. Generator ID Number<br><b>FLR000166751</b> | 2. Page 1 of <b>1</b>   | 3. Emergency Response Phone<br><b>352-800-451-8348</b> | 4. Manifest Tracking Number<br><b>023487116 JJK</b> |                   |
| 5. Generator's Name and Mailing Address<br><b>IRL LABS<br/>5381 NW 33RD AVENUE<br/>FORT LAUDERDALE, FL 33309</b>   |  |   | Generator's Site Address (if different than mailing address)<br><b>IRL LABS<br/>5381 NW 33RD AVENUE<br/>FORT LAUDERDALE, FL 33309</b> |  |   |                   |
| Generator's Phone: <b>352-777-0018</b>   |  |   | U.S. EPA ID Number  |  |   |                   |
| 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<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>  |  |   | U.S. EPA ID Number<br><b>FLD981932494</b>   |  |   |                   |
| Facility's Phone: <b>813-623-5302</b>  |  |   |   |  |   |                   |
| 9a. HM   | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))     | 10. Containers<br>No. Type                    |   | 11. Total Quantity                                     | 12. Unit WL/Vol.                                    | 13. Waste Codes   |
| X  | 1. <b>UN1993, Waste, Flammable liquids, n.o.s., (contains xylene)<br/>3, PG II (APPROVAL IRL001) 541938.324688</b> | <b>2 DF</b>                                   |   | <b>55</b>  | <b>G</b>  | <b>D001, F003</b> |
|  | 2.   |   |   |  |   |                   |
|  | 3.   |   |   |  |   |                   |
|  | 4.   |   |   |  |   |                   |
| 14. Special Handling Instructions and Additional Information<br><b>① 285lbs ② 385lbs</b>   |  |   |   |  |   |                   |
| 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.<br>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<br><b>X John Boning</b>   |  | Signature<br><b>[Signature]</b>               |   | Month Day Year<br><b>11 3 21</b>                       |   |                   |
| 16. International Shipments<br><input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.   |  | Port of entry/exit:<br>Date leaving U.S.:     |   |  |   |                   |
| 17. Transporter Acknowledgment of Receipt of Materials   |  |   |   |  |   |                   |
| Transporter 1 Printed/Typed Name<br><b>L001 Ken Hill</b>   |  | Signature<br><b>Ken Hill</b>                  |   | Month Day Year<br><b>11 3 21</b>                       |   |                   |
| 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. <b>H141</b>   |  | 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<br><b>Ann Steiger</b>   |  | Signature<br><b>Ann Steiger</b>               |   | Month Day Year<br><b>11 11 21</b>                      |   |                   |



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|---|--|---|--------------------------|--|---|--------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>J</b>  | 2. Page 1 of<br><b>1</b> | 3. Emergency Response Phone<br><b>360-451-8348</b>                           | 4. Manifest Tracking Number<br><b>023487124 JJK</b> |                    |
| 5. Generator's Name and Mailing Address<br><b>JOE VS YACHT REFINISHING INC</b><br><b>3764 SOUTHWEST 30TH AVENUE</b><br><b>FORT LAUDERDALE, FL 33312</b>   |  | Page 1  |                          | Generator's Phone (if different than mailing address)<br><b>813-623-5302</b> |   |                    |
| 6. Generator's Phone<br><b>813-623-5302</b>   |  | 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC</b><br><b>2002 N. ORIENT RD, TAMPA, FL</b> |                          | U.S. EPA ID Number<br><b>FLD981932494</b>                                    |   |                    |
| 7. Transporter 1 (Company Name)<br><b>CHL BERTY (DANIA)</b>   |  | 9. Transporter 2 (Company Name)<br><b>854-763-3380</b>  |                          | U.S. EPA ID Number<br><b>FLR000083071</b>                                    |   |                    |
| 9a. HM  |  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))      |                          | 10. Containers<br>No. Type   |   | 11. Total Quantity |
| 1.  |  | UN1993, Waste, Flammable liquids, n.o.s., (Toluene and Xylene)3, PG II (APPV# 1 201713TPA) 542324 325532            |                          | 1  |   | 15                 |
| 2.  |  |   |                          |  |   |                    |
| 3.  |  |   |                          |  |   |                    |
| 4.  |  |   |                          |  |   |                    |
| 14. Special Handling Instructions and Additional Information<br><b>122 lbs</b>  |  |   |                          |  |   |                    |
| 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<br><b>X Nelson</b>   |  | Signature<br><b>X Michael S.</b>  |                          | Month Day Year<br><b>11/10/21</b>  |   |                    |
| 16. International Shipments<br><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<br><b>Ken Hill</b>   |  | Signature<br><b>Ken Hill</b>  |                          | Month Day Year<br><b>11/10/21</b>  |   |                    |
| Transporter 2 Printed/Typed Name  |  | Signature   |                          | Month Day Year   |   |                    |
| 18. Discrepancy   |  |   |                          |  |   |                    |
| 18a. Discrepancy Indication Space<br><input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection<br>Manifest Reference Number: _____  |  |   |                          |  |   |                    |
| 18b. Alternate Facility (or Generator)<br>U.S. EPA ID Number  |  |   |                          |  |   |                    |
| Facility's Phone: _____   |  |   |                          |  |   |                    |
| 18c. Signature of Alternate Facility (or Generator)<br>Month Day Year   |  |   |                          |  |   |                    |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)   |  |   |                          |  |   |                    |
| 1. <b>H141</b>  |  | 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<br><b>Ann Steger</b>   |  | Signature<br><b>Ann Steger</b>  |                          | Month Day Year<br><b>11/18/21</b>  |   |                    |

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|   |  |  |  |   |   |                                 |                               |                                |  |
|---|--|--|--|---|---|---------------------------------|-------------------------------|--------------------------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLCESQG</b>   | 2. Page 1 of<br><b>Page 1</b>  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487133 JJK</b> |                                 |                               |                                |  |
| 5. Generator's Name and Mailing Address<br><b>A &amp; M TAPE &amp; PACKAGING<br/>5201 NOB HILL ROAD<br/>SUNRISE, FL 33351<br/>954-572-2500</b>  |  |  | Generator's Site Address (if different than mailing address)<br><b>A &amp; M TAPE &amp; PACKAGING<br/>5201 NOB HILL ROAD<br/>SUNRISE, FL 33351</b> |   |   |                                 |                               |                                |  |
| 6. Transporter 1 Company Name<br><b>CLIFF BERRY (DANEA)</b>   |  |  | 954-763-3390   |   | U.S. EPA ID Number<br><b>FLR 000083071</b>          |                                 |                               |                                |  |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA INC</b>  |  |  |  |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |                                 |                               |                                |  |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |  |  | U.S. EPA ID Number<br><b>FLD981932494</b>  |   |   |                                 |                               |                                |  |
| Facility's Phone:   |  |  |  |   |   |                                 |                               |                                |  |
| GENERATOR   | 9a. HM<br><b>X</b>   | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))<br><b>UN1210, Waste printing ink, flammable, 3, PG II<br/>541840.324693</b> |  | 10. Containers<br>No. Type<br><b>1 DF</b>             |   | 11. Total Quantity<br><b>55</b> | 12. Unit Wt./Vol.<br><b>G</b> | 13. Waste Codes<br><b>D001</b> |  |
|   |  |  |  |   |   |                                 |                               |                                |  |
|   |  |  |  |   |   |                                 |                               |                                |  |
|   |  |  |  |   |   |                                 |                               |                                |  |
|   |  |  |  |   |   |                                 |                               |                                |  |
| 14. Special Handling Instructions and Additional Information<br><b>04891bs</b>  |  |  |  |   |   |                                 |                               |                                |  |
| 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/Offeror's Printed/Typed Name<br><b>[Signature]</b> Date<br><b>11/16/21</b>  |  |  |  |   |   |                                 |                               |                                |  |
| 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<br>Transporter 1 Printed/Typed Name<br><b>[Signature]</b> Signature<br><b>[Signature]</b> Date<br><b>11/16/21</b>   |  |  |   |   |                                 |                               |                                |  |
| DESIGNATED FACILITY   | 18. Discrepancy<br>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<br>Manifest Reference Number: _____ |  |  |   |   |                                 |                               |                                |  |
|   | 18b. Alternate Facility (or Generator) U.S. EPA ID Number _____  |  |  |   |   |                                 |                               |                                |  |
|   | Facility's Phone: _____  |  |  |   |   |                                 |                               |                                |  |
|   | 18c. Signature of Alternate Facility (or Generator) _____ Date<br>Month Day Year<br><b>11 16 21</b>  |  |  |   |   |                                 |                               |                                |  |
|   | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)<br>1. <b>H141</b> 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<br>Printed/Typed Name<br><b>ANN. STEIGER</b> Signature<br><b>[Signature]</b> Date<br><b>11/18/21</b>   |  |  |  |   |   |                                 |                               |                                |  |

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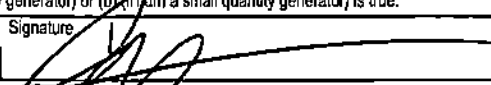

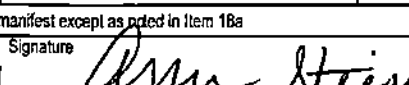
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|  |  |   |   |   |   |                 |
|--|--|---|---|---|---|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>  |  | 1. Generator ID Number<br><b>FLR000218859</b> | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487139 JJK</b> |                 |
| 5. Generator's Name and Mailing Address<br><b>ASSURA WINDOWS AND DOORS LLC<br/>1543 NORTH POWERLINE RD<br/>POMPANO BEACH, FL 33069<br/>954-781-4430</b>  |  |   | Generator's Site Address (if different than mailing address)<br><b>ASSURA WINDOWS AND DOORS LLC<br/>1543 NORTH POWERLINE RD<br/>POMPANO BEACH, FL 33069</b> |   |   |                 |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>  |  |   | 954-763-3390  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                 |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>  |  |   |   |   | U.S. EPA ID Number                                  |                 |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-6302</b>   |  |   |   |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |                 |
| Facility's Phone:  |  |   |   |   |   |                 |
| 9a. HM   | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers<br>No. Type                    |   | 11. Total Quantity                                    | 12. Unit WL/Vol.                                    | 13. Waste Codes |
| X  | 1. UN1325, Flammable solids, organic, n.o.s., 4.1, PG II<br>APPROV: K210639TPA 542498.325784                   | 1 CF  |   | 540<br>1614   | P   | 0001, F003      |
| X  | 2. UN1993, Waste flammable liquids, n.o.s. (Xylene), 3, PG II<br>542498.325787                                 | 7 DM<br>6                                     |   | 365<br>330  | G   | 0001, F003      |
|  | 3.   |   |   |   |   |                 |
|  | 4.   |   |   |   |   |                 |
| 14. Special Handling Instructions and Additional Information<br><b>① 460lbs ② 45lbs ③ 46lbs ④ 469lbs ⑤ 475lbs ⑥ 468lbs ⑦ 447lbs</b>  |  |   |   |   |   |                 |
| 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.<br>I certify that the waste minimization statement identified in 40 CFR 262.27(e) (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<br><b>X Adelle Aristi</b>   |  |   | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>11 29 21</b>                   |                 |
| 16. International Shipments<br><input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.   |  |   | Port of export:<br>Date leaving U.S.:   |   |   |                 |
| Transporter signature (for exports only):  |  |   |   |   |   |                 |
| 17. Transporter Acknowledgment of Receipt of Materials   |  |   |   |   |   |                 |
| Transporter 1 Printed/Typed Name<br><b>Custer</b>  |  |   | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>11 29 21</b>                   |                 |
| Transporter 2 Printed/Typed Name   |  |   | Signature   |   | Month Day Year                                      |                 |
| 18. Discrepancy  |  |   |   |   |   |                 |
| 18a. Discrepancy Indication Space <input checked="" type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection   |  |   |   |   |   |                 |
| <b>LINE 2 BOX 10 &amp; 11 SHOULD BE 6 &amp; 330</b>  |  |   |   |   |   |                 |
| 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. <b>H141</b> 2. <b>H141</b> 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<br><b>ANN STEIGER</b>   |  |   | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>11 21 21</b>                   |                 |

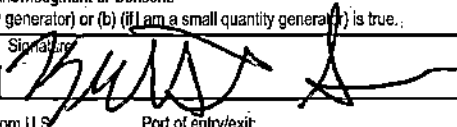
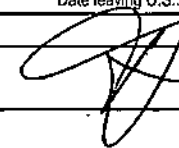
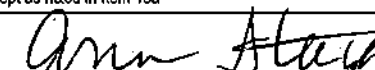
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|---|---|--|--|-------------------------------|--|---|---|---|-------------------|-----------------|--|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FL- CESQG</b>   |  | 2. Page 1 of<br><b>Page 1</b> |  | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>   |   | 4. Manifest Tracking Number<br><b>023487141 JJK</b> |                   |                 |  |  |
| 5. Generator's Name and Mailing Address<br><b>SIGNATURE FLIGHT SUPPORT<br/>201 SOUTH ORANGE AVENUE<br/>ORLANDO, FL 32801<br/>321-228-1069</b>   |   |  |  |                               |  | Generator's Site Address (if different than mailing address)<br><b>SIGNATURE FLIGHT SUPPORT - BOCA<br/>3300 AIRPORT ROAD<br/>BOCA RATON, FL 33431</b> |   |   |                   |                 |  |  |
| Generator's Phone:<br><b>Cliff Berry (DANIA) 954-763-3390</b>   |   |  |  |                               |  | U.S. EPA ID Number<br><b>FLRD00083071</b>   |   |   |                   |                 |  |  |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |  |  |                               |  | U.S. EPA ID Number<br><b>FLD981932494</b>   |   |   |                   |                 |  |  |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-823-5302</b>  |   |  |  |                               |  | U.S. EPA ID Number<br><b>FLD981932494</b>   |   |   |                   |                 |  |  |
| 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                                  | 12. Unit Wt./Vol. | 13. Waste Codes |  |  |
|   | X   | 1. UN1993, Waste flammable liquids, n.o.s. (Acetone), 3, P's II, APP; K210655TPA 542546.325862                 |  |                               |  | 1   | DF  | 30  | G                 | 0001, 0002      |  |  |
|   |   | 2.   |  |                               |  |   |   |   |                   |                 |  |  |
|   |   | 3.   |  |                               |  |   |   |   |                   |                 |  |  |
|   |   | 4.   |  |                               |  |   |   |   |                   |                 |  |  |
| 14. Special Handling Instructions and Additional Information<br><b>① 207 lbs</b>  |   |  |  |                               |  |   |   |   |                   |                 |  |  |
| 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<br><b>X Carlsten Sabusap</b>   |   |  |  |                               |  | Signature<br>   |   | Month Day Year<br><b>11 24 21</b>                   |                   |                 |  |  |
| TRANSPORTER   | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. <input type="checkbox"/>  |  |  |                               |  |   |   |   |                   |                 |  |  |
|   | Transporter signature (for exports only):   |  |  |                               |  |   | Port of entry/exit: _____<br>Date leaving U.S.: _____ |   |                   |                 |  |  |
|   | 17. Transporter Acknowledgment of Receipt of Materials  |  |  |                               |  |   |   |   |                   |                 |  |  |
|   | Transporter 1 Printed/Typed Name<br><b>Castro</b>   |  |  |                               |  | Signature<br>   |   | Month Day Year<br><b>11 24 21</b>                   |                   |                 |  |  |
|   | 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. <b>H141</b>  |  |  | 2.                            |  |   | 3.  |   |                   | 4.              |  |  |
| 20. Designated Facility Owner/Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a   |   |  |  |                               |  |   |   |   |                   |                 |  |  |
| Printed/Typed Name<br><b>ANN STEIGER</b>  |   |  |  |                               |  | Signature<br>   |   | Month Day Year<br><b>12 21</b>                      |                   |                 |  |  |

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|---|---|--|--|-------------------------------|---|--|------|---|-----------------------------------|-----------------|--|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLD000015321</b>  |  | 2. Page 1 of<br><b>Page 1</b> |   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b>  |      | 4. Manifest Tracking Number<br><b>023487142 JJK</b> |                                   |                 |  |  |
| 5. Generator's Name and Mailing Address<br><b>BRADFORD MARINE<br/>3051 STATE ROAD 84<br/>FORT LAUDERDALE, FL 33312<br/>602-803-6646</b>   |   |  |  |                               |   | Generator's Site Address (if different than mailing address)<br><b>BRADFORD MARINE STATE RD 84<br/>3051 STATE ROAD 84<br/>FORT LAUDERDALE, FL 33312-0000</b> |      |   |                                   |                 |  |  |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |  |  |                               |   | 954-763-3390   |      | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                   |                 |  |  |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |  |  |                               |   |  |      | U.S. EPA ID Number<br><b>FLD981932494</b>           |                                   |                 |  |  |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |   |  |  |                               |   |  |      | U.S. EPA ID Number<br><b>FLD981932494</b>           |                                   |                 |  |  |
| 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                                  | 12. Unit Wt./Vol.                 | 13. Waste Codes |  |  |
|   |   |  |  |                               |   | No.  | Type |   |                                   |                 |  |  |
|   | X   | 1. "UN3267, Waste, Corrosive liquid, basic, organic, n.o.s., 8, PG II, (3,3'-Methylenbis(5-methyloxazol        |  |                               |   | 1  | DF   | 5   | 0                                 | D002            |  |  |
|   |   | 2.   |  |                               |   |  |      |   |                                   |                 |  |  |
|   |   | 3.   |  |                               |   |  |      |   |                                   |                 |  |  |
|   |   | 4.   |  |                               |   |  |      |   |                                   |                 |  |  |
| 14. Special Handling Instructions and Additional Information<br><b>030165</b>   |   |  |  |                               |   |  |      |   |                                   |                 |  |  |
| 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/Offoror's Printed/Typed Name<br><b>Kristen Snyder</b>   |   |  |  |                               |   |  |      |   |                                   |                 |  |  |
| Signature<br>   |   |  |  |                               |   |  |      |   |                                   |                 |  |  |
| Month: Day: Year: <b>11 12 21</b>   |   |  |  |                               |   |  |      |   |                                   |                 |  |  |
| 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<br><b>Cash</b>   |  |  |                               | Signature<br> |  |      |   | Month: Day: Year: <b>11 26 21</b> |                 |  |  |
|   | 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. <b>H110</b>  |  |  |                               | 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<br><b>Ann Steiger</b>  |   |  |  |                               |   |  |      |   |                                   |                 |  |  |
| Signature<br>   |   |  |  |                               |   |  |      |   |                                   |                 |  |  |
| Month: Day: Year: <b>12 2 21</b>  |   |  |  |                               |   |  |      |   |                                   |                 |  |  |

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| UNIFORM HAZARDOUS WASTE MANIFEST  |  | 1. Generator ID Number                                       | 2. Page 1 of | 3. Emergency Response Phone               | 4. Manifest Tracking Number |   |      |
|---|--|--|--------------|---|-----------------------------|---|------|
|   |  | FLCESQ4  |              | 3E0800451-8346                            | 020265299 JJK               |   |      |
| 5. Generator's Name and Mailing Address   |  | Generator's Site Address (if different than mailing address) |              |   |                             |   |      |
| Vidacann LLC<br>5569 Bowden Rd<br>Jacksonville, FL 32216  |  | Vidacann LLC<br>5569 Bowden Rd<br>Jacksonville, FL 32216     |              |   |                             |   |      |
| Generator's Phone:  |  |  |              |   |                             |   |      |
| 6. Transporter 1 Company Name   |  | U.S. EPA ID Number   |              |   |                             |   |      |
| CLIFF Berry (Dania)   |  | FLR000083071   |              |   |                             |   |      |
| 7. Transporter 2 Company Name   |  | U.S. EPA ID Number   |              |   |                             |   |      |
|   |  |  |              |   |                             |   |      |
| 8. Designated Facility Name and Site Address  |  | U.S. EPA ID Number   |              |   |                             |   |      |
| US Ecology Tampa, Inc<br>2002 N. Orient Rd<br>Tampa, FL   |  | FLD981932494   |              |   |                             |   |      |
| Facility's Phone:   |  |  |              |   |                             |   |      |
| 813-623-5302  |  |  |              |   |                             |   |      |
| 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. UN1993, Waste, Flammable Liquids, n.o.s. (ALCOHOLS) 3, PGII (G181664 TPA)                                   | 9  | DM           | 495                                       | G                           | 0001                                      | 0005 |
|   | 2.   |  |              |   |                             |   |      |
|   | 3.   |  |              |   |                             |   |      |
|   | 4.   |  |              |   |                             |   |      |
| 14. Special Handling Instructions and Additional Information  |  |  |              |   |                             |   |      |
| 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              |   |      |
| Amber Horvath   |  | [Signature]  |              |   | 10 25 22                    |   |      |
| 16. International Shipments   |  | <input type="checkbox"/> Import to U.S.                      |              | <input type="checkbox"/> Export from U.S. |                             | Port of entry/exit:<br>Date leaving U.S.: |      |
| Transporter signature (for exports only):   |  |  |              |   |                             |   |      |
| 17. Transporter Acknowledgment of Receipt of Materials  |  |  |              |   |                             |   |      |
| Transporter 1 Printed/Typed Name  |  | Signature  |              |   | Month Day Year              |   |      |
| JAY Smother   |  | [Signature]  |              |   | 10 25 22                    |   |      |
| 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. 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  |  | Signature  |              |   | Month Day Year              |   |      |
| Kenneth S. Dean   |  | [Signature]  |              |   | 10 26 22                    |   |      |

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|   |        |  |  |  |                |   |                    |   |                 |
|---|--------|--|--|--|----------------|---|--------------------|---|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |        | 1. Generator ID Number<br><b>GA000086827</b>   |  | 2. Page 1 of 1   |                | 3. Emergency Response Phone<br><b>350800-457-8346</b> |                    | 4. Manifest Tracking Number<br><b>020265300 JJK</b> |                 |
|   |        | 5. Generator's Name and Mailing Address<br><b>Taurus Holding Inc<br/>100 Taurus Way<br/>Bainbridge, GA 39817</b> |  | Generator's Site Address (if different than mailing address)<br><b>Taurus Holdings Inc<br/>100 Taurus Way<br/>Bainbridge, GA 39817</b> |                |   |                    |   |                 |
| 6. Transporter 1 Company Name<br><b>Chipp Berry (Daniel)</b>  |        | 7. Transporter 2 Company Name  |  | U.S. EPA ID Number<br><b>FLR000083071</b>  |                | U.S. EPA ID Number                                    |                    |   |                 |
| 8. Designated Facility Name and Site Address<br><b>US Ecology Tampa Inc<br/>2002 N. Orient Rd<br/>Tampa, FL</b>   |        | Facility's Phone: <b>813-623-5302</b>  |  | U.S. EPA ID Number<br><b>FLD981932494</b>  |                |   |                    |   |                 |
| 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 |
|   | X      | 1. <b>UN1824, Waste, Sodium hydroxide solution, 8, PG11 (APP# G700506TPA)</b>                                    |  |  | No.            | Type  | <b>55</b>          | <b>G</b>  | <b>D002</b>     |
|   |        |  |  |  |                |   |                    |   |                 |
|   |        |  |  |  |                |   |                    |   |                 |
|   |        |  |  |  |                |   |                    |   |                 |
| 14. Special Handling Instructions and Additional Information  |        |  |  |  |                |   |                    |   |                 |
| 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<br><b>FRED BARBER</b>  |        |  |  |  |                |   |                    |   |                 |
| Signature<br><i>Fred Barber</i>   |        |  |  |  |                |   |                    |   |                 |
| 16. International Shipments<br><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<br><b>JL Gronk</b>   |        |  |  |  |                |   |                    |   |                 |
| Signature<br><i>JL Gronk</i>  |        |  |  |  |                |   |                    |   |                 |
| Transporter 2 Printed/Typed Name  |        |  |  |  |                |   |                    |   |                 |
| Signature   |        |  |  |  |                |   |                    |   |                 |
| 18. Discrepancy   |        |  |  |  |                |   |                    |   |                 |
| 18a. Discrepancy Indication Space<br><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. <b>H110</b> 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<br><b>Kenneth S. D...</b>  |        |  |  |  |                |   |                    |   |                 |
| Signature<br><i>Kenneth S. D...</i>   |        |  |  |  |                |   |                    |   |                 |
| Month Day Year<br><b>10 26 22</b>   |        |  |  |  |                |   |                    |   |                 |

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|  |  |  |                          |  |   |                 |             |
|--|--|--|--------------------------|--|---|-----------------|-------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>  |  | 1. Generator ID Number<br><b>FLCES06</b>   | 2. Page 1 of<br><b>1</b> | 3. Emergency Response Phone<br><b>350 800-451-8346</b> | 4. Manifest Tracking Number<br><b>020265302 JJK</b> |                 |             |
| 5. Generator's Name and Mailing Address<br><b>Commercial Construction Svc<br/>3621 Saint Augustine Rd<br/>Jacksonville, FL 32207</b>   |  | Generator's Site Address (if different than mailing address)<br><b>Commercial Construction Services<br/>3621 Saint Augustine Road<br/>Jacksonville, FL 32207</b> |                          |  |   |                 |             |
| Generator's Phone: <b>(904) 551-9637</b>   |  | U.S. EPA ID Number<br><b>FLR000083071</b>  |                          |  |   |                 |             |
| 6. Transporter 1 Company Name<br><b>CLIFF Berry Inc (Daniel)</b>   |  | U.S. EPA ID Number   |                          |  |   |                 |             |
| 7. Transporter 2 Company Name  |  | U.S. EPA ID Number   |                          |  |   |                 |             |
| 8. Designated Facility Name and Site Address<br><b>US Ecology Tampa Inc<br/>2002 N. Orient Rd<br/>Tampa, FL</b>  |  | U.S. EPA ID Number<br><b>FLD981932494</b>  |                          |  |   |                 |             |
| Facility's Phone: <b>(813) 623-6302</b>  |  |  |                          |  |   |                 |             |
| 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. <b>UN1263, waste, paint related material<br/>3. PG11</b>  | <b>2</b>   | <b>DM</b>                | <b>E<br/>700</b>                                       | <b>P</b>  | <b>D001</b>     | <b>F003</b> |
|  | 2.   |  |                          |  |   |                 |             |
|  | 3.   |  |                          |  |   |                 |             |
|  | 4.   |  |                          |  |   |                 |             |
| 14. Special Handling Instructions and Additional Information   |  |  |                          |  |   |                 |             |
| 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.<br>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<br><b>Colt Parson</b>   |  | Signature<br>  |                          | Month Day Year<br><b>10/25/22</b>                      |   |                 |             |
| 16. International Shipments<br><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<br><b>JAY Smothers</b>  |  | Signature<br>  |                          | Month Day Year<br><b>10/25/22</b>                      |   |                 |             |
| 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  |  |  |                          |  |   |                 |             |
| 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. <b>H141</b>   | 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<br><b>Kenneth S. Dain</b>   |  | Signature<br>  |                          | Month Day Year<br><b>10/26/22</b>                      |   |                 |             |



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|   |   |  |                                 |  |   |   |                                     |                  |
|---|---|--|---------------------------------|--|---|---|-------------------------------------|------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLD982129886</b>  |                                 | 2. Page 1 of<br>Page 1   | 3. Emergency Response Phone<br><b>3E@800-451-8348</b> | 4. Manifest Tracking Number<br><b>022158056 JJK</b> |                                     |                  |
| 5. Generator's Name and Mailing Address<br><b>ALLTECH ENVIRONMENTAL<br/>WILLIS CUSTOM YACHTS, LLC<br/>PO BOX 501<br/>OKEECHOBEE, FL 34973</b>   |   |  |                                 | Generator's Site Address (if different than mailing address)<br><b>WILLIS CUSTOM YACHTS, LLC<br/>6800 SW JACK JAMES DRIVE<br/>STUART, FL 34997</b> |   |   |                                     |                  |
| Generator's Phone: <b>561-762-3309</b>  |   |  |                                 | 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                     |                  |
|   |   |  |                                 | 954-763-3390   |   |   |                                     |                  |
| 7. Transporter 2 Company Name<br><b>Cliff Berry (Dania)</b>   |   |  |                                 |  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                                     |                  |
| 8. Designated Facility Name<br><b>ECO LOGIC TAMPAS INC</b>  |   |  |                                 |  |   | U.S. EPA ID Number<br><b>FLD981932484</b>           |                                     |                  |
| <b>2002 N. ORIENT RD, TAMPA, FL</b>   |   |  |                                 |  |   |   |                                     |                  |
| Facility's Phone: <b>813-623-6302</b>   |   |  |                                 |  |   |   |                                     |                  |
| GENERATOR   | 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |                                 | 10. Containers<br>No. Type   |   | 11. Total Quantity                                  | 12. Unit Wt./Vol.                   | 13. Waste Codes  |
|   | X   | 1. UN1263, Waste, Paint related material, 3, PG II APPROVAL: A221575TPA 555238.344710                          |                                 | 1 2 <sup>3L</sup> DM   |   | 110 <sup>3L</sup> 380 G                             |                                     | D001, F003, F005 |
|   |   | 2.   |                                 |  |   |   |                                     |                  |
|   |   | 3.   |                                 |  |   |   |                                     |                  |
|   |   | 4.   |                                 |  |   |   |                                     |                  |
| 14. Special Handling Instructions and Additional Information<br><br><b>2821b5</b>   |   |  |                                 |  |   |   |                                     |                  |
| 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: <b>DAN REARDON</b> Signature: <i>[Signature]</i> Month: <b>11</b> Day: <b>07</b> Year: <b>2022</b>  |   |  |                                 |  |   |   |                                     |                  |
| INT'L   | 16. International Shipments <input type="checkbox"/> Import to U.S. <input checked="" 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<br><b>JANET RICHARD</b>  |  | Signature<br><i>[Signature]</i> |  | Month: <b>11</b> Day: <b>07</b> Year: <b>2022</b>     |   |                                     |                  |
|   | Transporter 2 Printed/Typed Name<br><b>Larig Wallace</b>  |  | Signature<br><i>[Signature]</i> |  | Month: <b>10</b> Day: <b>18</b> Year: <b>2022</b>     |   |                                     |                  |
| 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. <b>H141</b>  |  | 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<br><b>ANN STEIGER</b>  |  | Signature<br><i>[Signature]</i> |  | Month: <b>10</b> Day: <b>20</b> Year: <b>2022</b>     |   |                                     |                  |

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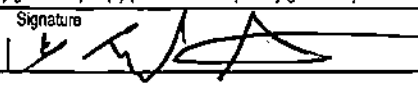
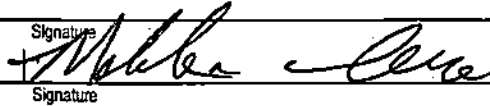
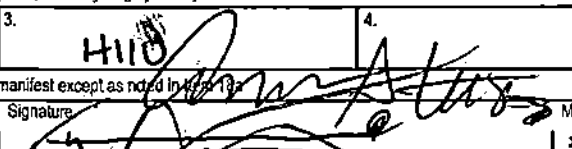
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|   |  |   |   |   |   |                           |                               |
|---|--|---|---|---|---|---------------------------|-------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLR000166751</b> | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487439 JJK</b> |                           |                               |
| 5. Generator's Name and Mailing Address<br><b>IRL LABS<br/>5361 NW 33RD AVENUE<br/>FORT LAUDERDALE, FL 33309<br/>954-777-0018</b>   |  |   | Generator's Site Address (if different than mailing address)<br><b>IRL LABS<br/>5361 NW 33RD AVENUE<br/>FORT LAUDERDALE, FL 33309</b> |   |   |                           |                               |
| 6. Transporter 1 Company Name<br><b>Chif Bery (DANIA)</b>   |  |   | 954-763-3390  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                           |                               |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |  |   |   |   | U.S. EPA ID Number                                  |                           |                               |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |  |   |   |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |                           |                               |
| Facility's Phone:   |  |   |   |   |   |                           |                               |
| 9a. HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |   |   | 10. Containers<br>No. Type                            |   | 11. Total Quantity        | 12. Unit Wt./Vol.             |
| 1   | UN1993, Waste, Flammable liquids, n.o.s., (contains xylene)<br>3, PG II (APPROVAL IRL001) 564350.359098        |   |   | 2 DF  |   | 600 P                     | 13. Waste Codes<br>D001, F003 |
| 2   |  |   |   |   |   |                           |                               |
| 3   |  |   |   |   |   |                           |                               |
| 4   |  |   |   |   |   |                           |                               |
| 14. Special Handling Instructions and Additional Information<br><br>423 282   |  |   |   |   |   |                           |                               |
| 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<br><i>Cornel Knapp</i>   |  |   |   | Signature<br><i>[Signature]</i>                       |   | Month Day Year<br>10 5 22 |                               |
| 16. International Shipments<br><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<br>Generator's/Officer's Printed/Typed Name<br><b>IRL 001</b> <i>Tarig Wallace</i> Signature <i>[Signature]</i> Month Day Year 10 5 22<br>Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year _____  |  |   |   |   |   |                           |                               |
| 18. Discrepancy<br>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<br>Manifest Reference Number: _____  |  |   |   |   |   |                           |                               |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number _____<br>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)<br>1. <b>H141</b> 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<br>Printed/Typed Name <b>ANN STEIGER</b> Signature <i>[Signature]</i> Month Day Year 10 13 22  |  |   |   |   |   |                           |                               |

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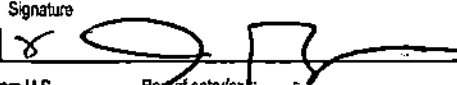
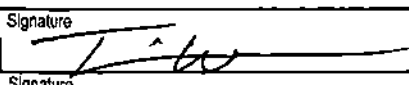
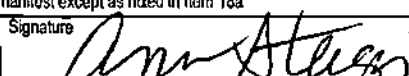
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|---|---|---|--|--|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLR000081075</b> | 2. Page 1 of 1   | 3. Emergency Response Phone<br><b>954 527 2700</b> | 4. Manifest Tracking Number<br><b>023487445 JJK</b> |
| 5. Generator's Name and Mailing Address<br><b>LAUDERDALE MARINE CENTER<br/>2029 SW 20TH STREET<br/>FORT LAUDERDALE, FL 33315</b>  |   |   |  |  |   |
| Generator's Phone: <b>954 527 2700</b>  |   |   |  |  |   |
| 6. Transporter 1 Company Name<br><b>Gulf Breeze (DANIA)</b>   |   |   |  |  |   |
| 7. Transporter 2 Company Name<br><b>954 763 3390</b>  |   |   |  |  |   |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>   |   |   |  |  |   |
| Facility's Phone: <b>813 823 8302</b>   |   |   |  |  |   |
| GENERATOR   | 9a. HM  |   | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |  | 10. Containers                                      |
|   |   |   |  |  | No. Type  |
|   | 1. X UN2478, waste, isocyanates, flammable, toxic, n.o.s. (HDI) (APP. L201749TPA RX) 565209.360487  |   | 1  | DM   | 5 G   |
|   | 2. X UN2733, Waste, Amines, flammable, corrosive, n.o.s. (Triethylenetetramine), 3(8), PG II APP. A221524T 565209.360559  |   | 1  | DF   | 30 G  |
|   | 3. X UN3266, Waste corrosive liquid, basic, inorganic, n.o.s. (Sodium Hydroxide, Sodium hypochlorite), 8, 565209.360560   |   | 1  | DF   | 15 G  |
| 13. Waste Codes   |   |   |  |  |   |
| 1. D001, D003   |   |   |  |  |   |
| 2. D001, D002   |   |   |  |  |   |
| 3. D002   |   |   |  |  |   |
| 14. Special Handling Instructions and Additional Information<br><b>① 23 16's ② 174 16's ③ 33 16's</b>   |   |   |  |  |   |
| 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(e) (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<br><b>Tyler Sutton</b>   |   |   |  |  |   |
| Signature<br>   |   |   |  |  |   |
| Month Day Year<br><b>10 6 22</b>  |   |   |  |  |   |
| 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<br><b>Michael Lewis</b>  |   |  |  |   |
| Signature<br>   |   |   |  |  |   |
| Month Day Year<br><b>10 6 22</b>  |   |   |  |  |   |
| Transporter 2 Printed/Typed Name<br><b>ALKALINE CLEANER</b>   |   |   |  |  |   |
| Signature<br>_____  |   |   |  |  |   |
| Month Day Year<br>____  |   |   |  |  |   |
| 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<br>____  |   |   |  |  |   |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)   |   |   |  |  |   |
| 1. H141 2. H141 3. H118 4. _____  |   |   |  |  |   |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in 19a   |   |   |  |  |   |
| Printed/Typed Name<br><b>Tyler Sutton &amp; ANN STEIGER</b>   |   |   |  |  |   |
| Signature<br>   |   |   |  |  |   |
| Month Day Year<br><b>10 6 22</b>  |   |   |  |  |   |

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|---|--------|--|---|---|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |        | 1. Generator ID Number<br><b>FLR000166751</b>  | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487446 JJK</b> |
| 5. Generator's Name and Mailing Address<br><b>IRL LABS<br/>PO Box 1087<br/>Mandan, ND, 58554<br/>954-777-0018</b>   |        |  | Generator's Site Address (if different than mailing address)<br><b>IRL LABS<br/>5361 NW 33RD AVENUE<br/>FORT LAUDERDALE, FL 33309</b> |   |   |
| 6. Transporter 1 Company Name<br><b>Cliff Betty (DANIA)</b>   |        |  | 954-763-3390  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |
| 7. Transporter 2 Company Name   |        |  |   |   | U.S. EPA ID Number                                  |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL<br/>813-623-5302</b>  |        |  |   |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |
| 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<br>No. Type                            | 11. Total Quantity                                  |
|   |        | 1. <b>UN1993, Waste, Flammable liquids, n.o.s., (contains xylene) 3, PG II (APPROVAL IRL001) 565368.360746</b> |   | 1. DF   | 55  |
|   |        | 2.   |   |   |   |
|   |        | 3.   |   |   |   |
|   |        | 4.   |   |   |   |
| 13. Waste Codes<br><b>D001, F003</b>  |        |  |   |   |   |
| 14. Special Handling Instructions and Additional Information<br><b>429 LB</b>   |        |  |   |   |   |
| 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<br><b>John Bowring</b>   |        | Signature<br>              |   | Month Day Year<br><b>10 17 22</b>                     |   |
| 16. International Shipments<br><input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.  |        | Port of entry/exit:<br>Date leaving U.S.:  |   |   |   |
| 17. Transporter Acknowledgment of Receipt of Materials  |        |  |   |   |   |
| Transporter 1 Printed/Typed Name<br><b>IRL 001 Tariq Walkace</b>  |        | Signature<br>              |   | Month Day Year<br><b>10 12 22</b>                     |   |
| 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. <b>H141</b>  |        | 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<br><b>Ann Steiger</b>  |        | Signature<br>              |   | Month Day Year<br><b>10 13 22</b>                     |   |

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|   |   |  |                               |   |  |   |                                   |
|---|---|--|-------------------------------|---|--|---|-----------------------------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>   | 2. Page 1 of<br><b>Page 1</b> | 3. Emergency Response Phone<br><b>3E @ 800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487449 JJK</b>  |   |                                   |
| 5. Generator's Name and Mailing Address<br><b>DR. VON D. MIZELL EULA JOHNSON STATE PARK</b>   |   |  |                               |   | Generator's Site Address (if different than mailing address)<br><b>PINE ISLAND - ACID DRUM<br/>2651 Bridgeview St<br/>Maitland, FL 32751</b> |   |                                   |
| Generator's Phone: <b>954-658-8021</b>  |   |  |                               |   | Generator's Site Address (if different than mailing address)<br><b>PINE ISLAND - ACID DRUM<br/>2651 Bridgeview St<br/>Maitland, FL 32751</b> |   |                                   |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |   |  |                               | 854-763-3390  |  | U.S. EPA ID Number<br><b>FLR000083071</b> |                                   |
| 7. Transporter 2 Company Name   |   |  |                               |   |  | U.S. EPA ID Number                        |                                   |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC<br/>2002 N. ORIENT RD, TAMPA, FL</b>   |   |  |                               |   |  | U.S. EPA ID Number<br><b>FLD981932494</b> |                                   |
| Facility's Phone: <b>813-623-5302</b>   |   |  |                               |   |  |   |                                   |
| 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  |  |   |                                   |
|   | 1.  | <b>X UN3264, Waste, Corrosive liquid, acidic, inorganic, n.o.s., (Hydrochloric acid), 8, PG II 565434.360869</b> | 1                             | DF  | 20   | G   | D002                              |
|   | 2.  |  |                               |   |  |   |                                   |
|   | 3.  |  |                               |   |  |   |                                   |
| 4.  |   |  |                               |   |  |   |                                   |
| 14. Special Handling Instructions and Additional Information<br><br><b>113lbs</b>   |   |  |                               |   |  |   |                                   |
| 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<br><b>X Earl Whibbs</b>  |   |  |                               |   | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>10 9 22</b>  |
| 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<br><b>Ken Hull</b>   |  |                               |   | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>10 9 22</b>  |
|   | 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. <b>H14</b>   |  | 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<br><b>ANN STEIGER</b>  |   |  |                               |   | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>10 13 02</b> |

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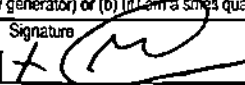
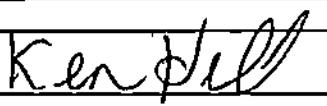
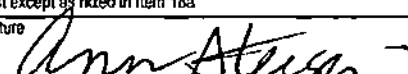
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| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLD982150710</b> | 2. Page 1 of 2<br><b>Page 1</b> | 3. Emergency Response Phone<br><b>305-800-4518346</b> | 4. Manifest Tracking Number<br><b>023487452-JJK</b> |                                   |
|---|--|---|---------------------------------|---|---|-----------------------------------|
| 5. Generator's Name and Mailing Address<br><b>RYBOVICH BOAT COMPANY, LLP</b><br><b>RYBOVICH BOAT COMPANY, LLP</b><br><b>4200 NORTH FLAGER DRIVE</b><br><b>WEST PALM BEACH, FL 33407</b>   |  |   |                                 |   |   |                                   |
| Generator's Phone: <b>561-840-8167</b>  |  |   |                                 |   |   |                                   |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b>   |  |   |                                 | U.S. EPA ID Number<br><b>FLR000083071</b>             |   |                                   |
| 7. Transporter 2 Company Name   |  |   |                                 | U.S. EPA ID Number                                    |   |                                   |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC</b><br><b>2002 N. ORIENT RD, TAMPA, FL</b>   |  |   |                                 | U.S. EPA ID Number<br><b>FLD981932494</b>             |   |                                   |
| Facility's Phone: <b>813-623-5302</b>   |  |   |                                 |   |   |                                   |
| 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                            |   |   |                                   |
| 1.  | <b>X UN1993, Waste, Flammable liquids, n.o.s. (Xylene and Toluene), 3, PG II (APPV# RYZ010) 665724.381281</b>  | <b>4</b>                                      | <b>DM</b>                       | <b>820</b>  | <b>G</b>  | <b>D001, F003, F005</b>           |
| 2.  |  |   |                                 |   |   |                                   |
| 3.  |  |   |                                 |   |   |                                   |
| 4.  |  |   |                                 |   |   |                                   |
| 14. Special Handling Instructions and Additional Information<br><b>① @ 310 lbs    2 @ 513 lbs    3 @ 448 lbs    4 @ 546 lbs</b>   |  |   |                                 |   |   |                                   |
| 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<br><b>Lawrence Paul Thomas III</b>   |  |   |                                 | Signature<br>   |   | Month Day Year<br><b>10 14 22</b> |
| 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<br><b>GREG EREK</b>  |  |   |                                 | Signature<br>   |   | Month Day Year<br><b>10 14 22</b> |
| 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. <b>H 141</b>   |  | 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<br><b>ANN STEIGER</b>  |  |   |                                 | Signature<br>   |   | Month Day Year<br><b>10 20 22</b> |

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|   |   |  |    |   |   |   |   |                   |                 |
|---|---|--|----|---|---|---|---|-------------------|-----------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |   | 1. Generator ID Number<br><b>FLCESQG</b>   |    | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> |   | 4. Manifest Tracking Number<br><b>023487453 JJK</b> |                   |                 |
| 5. Generator's Name and Mailing Address<br><b>ADVANTAGE TRITON LLC<br/>2751 COMMERCE CENTER WAY- SUITE 400<br/>PEMBROKE PARK, FL 33023<br/>954-790-8416</b>   |   |  |    | Generator's Site Address (if different than mailing address)<br><b>ADVANTAGE TRITON LLC<br/>2751 COMMERCE CENTER WAY-<br/>SUITE 400<br/>PEMBROKE PARK, FL 33023</b> |   |   |   |                   |                 |
| 6. Transporter 1 Company Name<br><b>CLIMBERRY (DANIA)</b>   |   |  |    | 954-763-3390  |   | U.S. EPA ID Number<br><b>FLR000083071</b> |   |                   |                 |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>   |   |  |    |   |   | U.S. EPA ID Number                        |   |                   |                 |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-823-5302</b>  |   |  |    | U.S. EPA ID Number<br><b>FLD981932494</b>   |   |   |   |                   |                 |
| 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                                  | 12. Unit Wt./Vol. | 13. Waste Codes |
|   |   | 1. <b>UN1950, Waste, Aerosols, flammable, (each not exceeding L capacity), 2.1, (C221752TPA) 585742381318</b>  |    |   | No.   | Type                                      |   |                   |                 |
|   |   |  |    |   | <b>2</b>  | <b>CF</b>                                 | <b>600</b>  | <b>P</b>          | <b>D001</b>     |
|   |   | 2.   |    |   |   |   |   |                   |                 |
|   |   | 3.   |    |   |   |   |   |                   |                 |
|   | 4.  |  |    |   |   |   |   |                   |                 |
| 14. Special Handling Instructions and Additional Information<br><br><b>278 365</b>  |   |  |    |   |   |   |   |                   |                 |
| 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/Offendor's Printed/Typed Name<br><b>MARCUS BRADER</b>   |   |  |    | Signature<br>   |   | Month Day Year<br><b>10 17 22</b>         |   |                   |                 |
| 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<br><b>Ken Hill</b>   |  |    | Signature<br>   |   | Month Day Year<br><b>10 17 22</b>         |   |                   |                 |
|   | 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 |  |    |   |   |   |   |                   |                 |
|   | 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. <b>H111</b>  |  | 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<br><b>ANN STAGER</b>   |   |  |    | Signature<br>   |   | Month Day Year<br><b>10 20 22</b>         |   |                   |                 |

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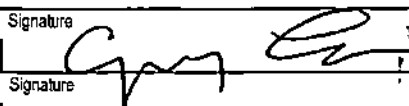
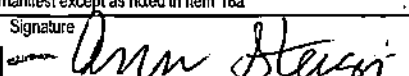
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|  |   |   |   |   |   |                       |                     |                                      |                   |  |
|--|---|---|---|---|---|-----------------------|---------------------|--------------------------------------|-------------------|--|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>  |   | 1. Generator ID Number<br><b>FLR000166751</b> | 2. Page 1 of<br><b>Page 1</b>   | 3. Emergency Response Phone<br><b>3E@800-451-8346</b> | 4. Manifest Tracking Number<br><b>023487455 JJK</b> |                       |                     |                                      |                   |  |
| 5. Generator's Name and Mailing Address<br><b>IRL LABS<br/>PO Box 1087<br/>Mandan, ND, 58554<br/>954-777-0018</b>  |   |   | Generator's Site Address (if different than mailing address)<br><b>IRL LABS<br/>5381 NW 33RD AVENUE<br/>FORT LAUDERDALE, FL 33309</b> |   |   |                       |                     |                                      |                   |  |
| 6. Transporter 1 Company Name<br><b>CITIBURY (DANIA)</b>   |   |   | 954-763-3390  |   | U.S. EPA ID Number<br><b>FLR000083071</b>           |                       |                     |                                      |                   |  |
| 7. Transporter 2 Company Name<br><b>US ECOLOGY TAMPA, INC</b>  |   |   |   |   | U.S. EPA ID Number                                  |                       |                     |                                      |                   |  |
| 8. Designated Facility Name and Site Address<br><b>2002 N. ORIENT RD, TAMPA, FL<br/>813-823-5302</b>   |   |   |   |   | U.S. EPA ID Number<br><b>FLD981932494</b>           |                       |                     |                                      |                   |  |
| Facility's Phone:  |   |   |   |   |   |                       |                     |                                      |                   |  |
| 9a.<br>HM  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))<br><b>UN1993, Waste, Flammable liquids, n.o.s., (contains xylene)<br/>3, PG II (APPROVAL IRL001) 585822.381432</b> |   |   | 10. Containers  |   | 11. Total<br>Quantity | 12. Unit<br>WL/Vol. | 13. Waste Codes<br><b>D001, F003</b> |                   |  |
|  |   |   |   | No.   | Type  |                       |                     |                                      |                   |  |
|  |   |   |   | 1   | DF  |                       |                     |                                      |                   |  |
|  |   |   |   | 2   |   |                       |                     |                                      |                   |  |
|  |   |   |   | 3   |   |                       |                     |                                      |                   |  |
| 14. Special Handling instructions and Additional Information<br><b>1 @ 423 lbs</b>   |   |   |   |   |   |                       |                     |                                      |                   |  |
| 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.<br>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<br><b>Corinne Kneeger</b>   |   |   | Signature<br><i>[Signature]</i>   |   | Month<br><b>10</b>                                  |                       | Day<br><b>19</b>    |                                      | Year<br><b>22</b> |  |
| 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<br><b>IRL 001</b>   |   |   | Signature<br><i>[Signature]</i>   |   | Month<br><b>10</b>                                  |                       | Day<br><b>19</b>    |                                      | Year<br><b>22</b> |  |
| 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. <b>H141</b>   |   | 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<br><b>ANN STEIGER</b>   |   |   | Signature<br><i>[Signature]</i>   |   | Month<br><b>10</b>                                  |                       | Day<br><b>20</b>    |                                      | Year<br><b>22</b> |  |



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| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLR000226712</b>   |           | 2. Page 1 of <b>Page 1</b> | 3. Emergency Response Phone<br><b>3E0600-451-8348</b> |                  | 4. Manifest Tracking Number<br><b>023487458 JJK</b> |                   |
|---|--|---|-----------|----------------------------|---|------------------|---|-------------------|
| 5. Generator's Name and Mailing Address<br><b>NUTRANEXT LLC</b><br><b>1301 SAWGRASS CORPORATE PARKWAY</b><br><b>SUNRISE, FL 33323-2813</b><br>Generator's Phone: <b>954-233-3300</b>  |  |   |           |                            |   |                  |   |                   |
| 6. Transporter 1 Company Name<br><b>Cliff Berry (DANIA)</b><br>954-763-3380<br>U.S. EPA ID Number: <b>FLR000083071</b>  |  |   |           |                            |   |                  |   |                   |
| 7. Transporter 2 Company Name<br>U.S. EPA ID Number   |  |   |           |                            |   |                  |   |                   |
| 8. Designated Facility Name and Site Address<br><b>US ECOLOGY TAMPA, INC</b><br><b>2002 N. ORIENT RD, TAMPA, FL</b><br>Facility's Phone: <b>813-823-5302</b><br>U.S. EPA ID Number: <b>FLD981932494</b>   |  |   |           |                            |   |                  |   |                   |
| 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      |                            |   |                  |   |                   |
| 1.  | <b>X UN3264, Waste, Corrosive liquid, acidic, inorganic, n.o.s., (Nitric acid, Hydrochloric acid) 8, PG II</b> | <b>1</b>  | <b>DF</b> | <b>55</b>                  | <b>G</b>  | <b>D002</b>      |   |                   |
| 2.  |  |   |           |                            |   |                  |   |                   |
| 3.  |  |   |           |                            |   |                  |   |                   |
| 4.  |  |   |           |                            |   |                  |   |                   |
| 14. Special Handling Instructions and Additional Information:<br><b>@ 350 lbs</b>   |  |   |           |                            |   |                  |   |                   |
| 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. |  |   |           |                            |   |                  |   |                   |
| Generators/Offeror's Printed/Typed Name<br><b>METECK ZAMLY</b>  |  | Signature<br> |           | Month<br><b>10</b>         |   | Day<br><b>19</b> |   | Year<br><b>22</b> |
| 16. International Shipments<br><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<br>Transporter 1 Printed/Typed Name<br><b>GREGG ESTER</b> Signature<br> Month<br><b>10</b> Day<br><b>19</b> Year<br><b>22</b><br>Transporter 2 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____   |  |   |           |                            |   |                  |   |                   |
| 18. Discrepancy<br>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<br>Manifest Reference Number: _____  |  |   |           |                            |   |                  |   |                   |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number _____<br>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)<br>1. <b>H110</b> 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<br>Printed/Typed Name<br><b>ANN STEIGER</b> Signature<br> Month<br><b>10</b> Day<br><b>20</b> Year<br><b>22</b>  |  |   |           |                            |   |                  |   |                   |