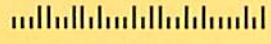




Cliff Berry, Incorporated
Environmental Services
PO Box 13079
Ft. Lauderdale, FL 33316
(800) 899-7745



WORK ORDER (Estimate)

Work Order #: 137692

Purchase Order #: EVERGLADES

Ft. Lauderdale (954) 763-3390 Miami (305) 638-0520 Ft. Pierce (772) 466-4063 Tampa (813) 626-6533 Portsmouth VA (757) 484-6303 Canaveral (321) 639-4199 Jacksonville (904) 356-5516

Send Invoice To:
CLIFF BERRY, INC.

PO BOX 13079

FT LAUDERDALE, FL 33316
Contact Name: DAN STONE
Phone Number: 954-763-6335

Location/Generator/Ship To:
CLIFF BERRY, INC.(TAMPA)
5218 SAINT PAUL STREET
TAMPA, FL 33619

Contact:
Requested By: DAN STONE
Phone Number: 813-626-6533

Salesperson: NONE Project Mgr./Foreman: BRANDON DOW Director/Facility Mgr: DAN STONE

- ☐ Emergency Response ☐ Industrial Services ☐ Transportation ☐ Product Sales/ Purchases ☐ Solid Waste ☒ CBI Internal
☐ Sales/Purchases of Materials/Supplies ☐ Petroleum Services ☐ Analysis/Testing ☐ Waste Water ☐ Hazardous Waste ☐ Other

Department Location: ES / TAMPA

Scheduled Date of Work: 7/15/09 Scheduled Time: 7:00 am Method of Payment: NET 30

Description of Service/Instructions:
RECEIVE ONE LOAD OF USED OIL AND TRANSPORT TO THE MIAMI FACILITY.

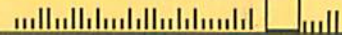
Work Site Remarks:

Time Left Yard (Start): Time Arrived On Site: Date:
Time Left Site: Time Arrived At Yard (Stop): Date:

PRODUCT/SERVICE	DESCRIPTION	START/STOP	EXTENSION
SERVICE 6000 GAL	USED OIL	137692-1 / @ /Per	
		/ @ /Per	
		/ @ /Per	

Authorized Signature: *[Signature]* Total manifest(s) Issued: Estimated Total:
Print Name: Steve Hanger Title: Supervisor

TERMS & CONDITIONS: Customer agrees that work has been performed satisfactorily. Payment is due upon completion of services. Where CBI extends credit, a charge of 1-1/2% per month, 18% per annum, will be added to balances unpaid 30 days after date of invoice. Collection costs and/or reasonable attorney's fees will be due in the event any collection process becomes necessary. This is not an invoice, but merely an estimate of charges. Applicable taxes, tariffs and fuel surcharges will be forwarded on invoice.



BILL OF LADING

1. Generator's US EPA ID No.

FLR000013888

Manifest
Document No.

137692 -1

2. Page 1

of 1

Truck Number

ES 40

3. Name and Mailing Address

CLIFF BERRY, INC.

PO BOX 13079

FT LAUDERDALE, FL 33316

4. Phone 954-763-6335

5. Transporter 1 Company Name

EVERGLADES WASTE REMOVAL SVCS

6. USA EPA ID Number

FLCESQG

A. Transporter's Phone

954-325-7431

7. Transporter 2 Company Name

8. USA EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

CLIFF BERRY, INC. (MIAMI)

3033 NW RIVER DRIVE, MIAMI, FL 33142

10. USA EPA ID Number

FLD058560699

C. Facility's Phone

(305) 638-2030

11. Shipping Name and Description

12. Containers

No.

Type

13. Total
Quantity

14. Unit
Wt/Vol

a. Petroleum oil(Contains Used Oil for Recycle), 3, NA1270, PG-III (contains < 1000ppm Halogens)

1

TT

6000

G

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

11a: USED OIL

E. Pickup Location

CLIFF BERRY, INC.(TAMPA)

5218 SAINT PAUL STREET

TAMPA, FL 33619

15. Special Handling Instructions and Additional Information

16. CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulation of the Department of Transportation. I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name

Steve Haggard for (RT)

Signature

Steve Haggard for (RT)

Month

Day

Year

7 15 07

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Brian T. McNamee

Signature

Brian T. McNamee

Month

Day

Year

7 15 07

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month

Day

Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month

Day

Year

SHIPPER/GENERATOR

TRANSPORTER

FACILITY



Cliff Berry, Incorporated
Environmental Services
PO Box 13079
Ft. Lauderdale, FL 33316
(800) 899-7745

WORK ORDER (Estimate)



Work Order #: 137816

Purchase Order #: EVERGLADES

Ft. Lauderdale (954) 763-3390 Miami (305) 638-0520 Ft. Pierce (772) 466-4063 Tampa (813) 626-6533 Portsmouth VA (757) 484-6303 Canaveral (321) 639-4199 Jacksonville (904) 356-5516

Send Invoice To:
CLIFF BERRY, INC.

PO BOX 13079

FT LAUDERDALE, FL 33316
Contact Name: DAN STONE
Phone Number: 954-763-6335

Location/Generator/Ship To:

CLIFF BERRY, INC.(TAMPA)
5218 SAINT PAUL STREET
TAMPA, FL 33619

Contact:
Requested By: DAN STONE
Phone Number: 813-626-6533

Salesperson: NONE Project Mgr./Foreman: BRANDON DOW Director/Facility Mgr: DAN STONE

☐ Emergency Response ☐ Industrial Services ☐ Transportation ☐ Product Sales/ Purchases ☐ Solid Waste ☒ CBI Internal

☐ Sales/Purchases of Materials/Supplies ☐ Petroleum Services ☐ Analysis/Testing ☐ Waste Water ☐ Hazardous Waste ☐ Other

Department Location: ES / TAMPA

Scheduled Date of Work: 7/16/09 Scheduled Time: 7:00 am Method of Payment: NET 30

Description of Service/Instructions:
RECEIVE ONE LOAD OF USED OIL AND TRANSPORT TO THE MIAMI FACILITY.

Work Site Remarks:

Time Left Yard (Start): 3:00 Time Arrived On Site: 2:00 Date: 7-16-09

Time Left Site: Time Arrived At Yard (Stop): Date: 7-16-09

PRODUCT/SERVICE	GAL	DESCRIPTION	START/STOP			EXTENSION
SERVICE		USED OIL	137816-1 /	@	/Per	
			/	@	/Per	
			/	@	/Per	

EVERGLADES

Authorized Signature:

Print Name: Steve Hays

Total manifest(s) Issued:

Estimated Total:

Date: 7-16-09

Title: Supervisor

TERMS & CONDITIONS: Customer agrees that work has been performed satisfactorily. Payment is due upon completion of services. Where CBI extends credit, a charge of 1-1/2% per month, 18% per annum, will be added to balances unpaid 30 days after date of invoice. Collection costs and/or reasonable attorney's fees will be due in the event any collection process becomes necessary. This is not an invoice, but merely an estimate of charges. Applicable taxes, tariffs and fuel surcharges will be forwarded on invoice.



BILL OF LADING

1. Generator's US EPA ID No.

FLR000013888

Manifest
Document No.

137816 -1

2. Page 1

of 1

Truck Number

ES 40

3. Name and Mailing Address CLIFF BERRY, INC.

PO BOX 13079

4. Phone 954-763-6335

FT LAUDERDALE, FL 33316

5. Transporter 1 Company Name

EVERGLADES WASTE REMOVAL SVCS

6. USA EPA ID Number

FLCESQG

A. Transporter's Phone

954-325-7431

7. Transporter 2 Company Name

8. USA EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

CLIFF BERRY, INC. (MIAMI)

3033 NW RIVER DRIVE, MIAMI, FL 33142

10. USA EPA ID Number

FLD058560699

C. Facility's Phone

(305) 638-2030

11. Shipping Name and Description

12. Containers

No.

Type

13.
Total
Quantity14.
Unit
Wt/Vol

a. Petroleum oil(Contains Used Oil for Recycle), 3, NA1270, PG-III (contains < 1000ppm Halogens)

1

TT

6425

G

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

11a: USED OIL

E. Pickup Location

CLIFF BERRY, INC.(TAMPA)
5218 SAINT PAUL STREET
TAMPA, FL 33619

15. Special Handling Instructions and Additional Information

16. CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulation of the Department of Transportation. I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name

Steve Hargrave for CB

Signature

Steve Hargrave

Month

Day

Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Tom Hargrave

Signature

Tom Hargrave

Month

Day

Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month

Day

Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month

Day

Year

Cliff Berry, Incorporated
Environmental Services
PO Box 13079
Ft. Lauderdale, FL 33316
(800) 899-7745



WORK ORDER (Estimate)

Work Order #: 137817

Purchase Order #: EVERGLADES

Ft. Lauderdale (954) 763-3390 Miami (305) 638-0520 Ft. Pierce (772) 466-4063 Tampa (813) 626-6533 Portsmouth VA (757) 484-6303 Canaveral (321) 639-4199 Jacksonville (904) 356-5516

Send Invoice To:
CLIFF BERRY, INC.

PO BOX 13079

FT LAUDERDALE, FL 33316
Contact Name: DAN STONE

Phone Number: 954-763-6335

Location/Generator/Ship To:

CLIFF BERRY, INC.(TAMPA)
5218 SAINT PAUL STREET
TAMPA, FL 33619

Contact:

Requested By: DAN STONE

Phone Number: 813-626-6533

Salesperson: NONE Project Mgr./Foreman: BRANDON DOW Director/Facility Mgr: DAN STONE

☐ Emergency Response ☐ Industrial Services ☐ Transportation ☐ Product Sales/
Purchases ☐ Solid Waste ☒ CBI Internal

☐ Sales/Purchases of Materials/Supplies ☐ Petroleum Services ☐ Analysis/Testing ☐ Waste Water ☐ Hazardous Waste ☐ Other

Department Location: ES / TAMPA

Scheduled Date of Work: 7/16/09 Scheduled Time: 7:00 am Method of Payment: NET 30

Description of Service/Instructions:

RECEIVE ONE LOAD OF ~~USED~~ OIL AND TRANSPORT TO THE MIAMI FACILITY.
OILY WATER

Work Site Remarks:

Time Left Yard (Start): Time Arrived On Site: Date:

Time Left Site: Time Arrived At Yard (Stop): Date:

PRODUCT/SERVICE	SERVICE	GAL	DESCRIPTION	START/STOP			EXTENSION
			OILY WATER	137817-1 /	@	/Per	
				/	@	/Per	
				/	@	/Per	

EVERGLADES

Total manifest(s) Issued:

Estimated Total:

Authorized Signature: Steve Hays

Date: 7-16-09

Print Name: Steve Hays

Title: Supervisor

TERMS & CONDITIONS: Customer agrees that work has been performed satisfactorily. Payment is due upon completion of services. Where CBI extends credit, a charge of 1-1/2% per month, 18% per annum, will be added to balances unpaid 30 days after date of invoice. Collection costs and/or reasonable attorney's fees will be due in the event any collection process becomes necessary. This is not an invoice, but merely an estimate of charges. Applicable taxes, tariffs and fuel surcharges will be forwarded on invoice.



BILL OF LADING

1. Generator's US EPA ID No.

FLR000013888

Manifest
Document No.

137817 -1

2. Page 1

of 1

Truck Number

3. Name and Mailing Address

CLIFF BERRY, INC.

PO BOX 13079

FT LAUDERDALE, FL 33316

ES 40

4. Phone 954-763-6335

5. Transporter 1 Company Name

EVERGLADES WASTE REMOVAL SVCS

6. USA EPA ID Number

FLCESQG

A. Transporter's Phone

954-325-7431

7. Transporter 2 Company Name

8. USA EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

CLIFF BERRY, INC. (MIAMI)

3033 NW RIVER DRIVE, MIAMI, FL 33142

10. USA EPA ID Number

FLD058560699

C. Facility's Phone

(305) 638-2030

11. Shipping Name and Description

12. Containers

No.

Type

13.
Total
Quantity14.
Unit
Wt/Vol

a. Petroleum oil(Contains Oily Water for Recycle), 3, NA1270, PG-III

1

TT

582

G

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

11a: OILY WATER

E. Pickup Location

CLIFF BERRY, INC.(TAMPA)

5218 SAINT PAUL STREET

TAMPA, FL 33619

15. Special Handling Instructions and Additional Information

16. CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulation of the Department of Transportation. I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name

Steve Haggard for CBT

Signature

Steve Haggard for CBT

Month

Day

Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

DAVID C. WILKINSON

Signature

David C. Wilkin

Month

Day

Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month

Day

Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month

Day

Year

WORK ORDER (Estimate)

Work Order #: 138078

Purchase Order #: EVERGLADES

Ft. Lauderdale (954) 763-3390 Miami (305) 638-0520 Ft. Pierce (772) 466-4063 Tampa (813) 626-6533 Portsmouth VA (757) 484-6303 Canaveral (321) 639-4199 Jacksonville (904) 356-5516

Send Invoice To:
CLIFF BERRY, INC.

PO BOX 13079

FT LAUDERDALE, FL 33316

Contact Name: DAN STONE

Phone Number: 954-763-6335

Location/Generator/Ship To:

CLIFF BERRY, INC.(TAMPA)

5218 SAINT PAUL STREET

TAMPA, FL 33619

Contact:

Requested By: DAN STONE

Phone Number: 813-626-6533

Salesperson: NONE Project Mgr./Foreman: BRANDON DOW Director/Facility Mgr: DAN STONE

☐ Emergency Response ☐ Industrial Services ☐ Transportation ☐ Product Sales/ Purchases ☐ Solid Waste ☒ CBI Internal

☐ Sales/Purchases of Materials/Supplies ☐ Petroleum Services ☐ Analysis/Testing ☐ Waste Water ☐ Hazardous Waste ☐ Other

Department Location: ES / TAMPA

Scheduled Date of Work: 7/20/09 Scheduled Time: 7:00 am Method of Payment: NET 30

Description of Service/Instructions:

RECEIVE ONE LOAD OF USED OIL AND TRANSPORT TO THE MIAMI FACILITY.

Work Site Remarks:

Time Left Yard (Start): Time Arrived On Site: Date:

Time Left Site: Time Arrived At Yard (Stop): Date:

PRODUCT/SERVICE	DESCRIPTION	START/STOP	EXTENSION
SERVICE 6.063 GAL	USED OIL	138078-1 / @ /Per	
		/ @ /Per	
		/ @ /Per	

Authorized Signature: *[Signature]* Total manifest(s) Issued: Estimated Total: *7-20-09*
Print Name: Gene Harper Title: Supervisor

TERMS & CONDITIONS: Customer agrees that work has been performed satisfactorily. Payment is due upon completion of services. Where CBI extends credit, a charge of 1-1/2% per month, 18% per annum, will be added to balances unpaid 30 days after date of invoice. Collection costs and/or reasonable attorney's fees will be due in the event any collection process becomes necessary. This is not an invoice, but merely an estimate of charges. Applicable taxes, tariffs and fuel surcharges will be forwarded on invoice.



BILL OF LADING

1. Generator's US EPA ID No.

FLR000013888

Manifest
Document No.

138078 -1

2. Page 1

of 1

Truck Number

3. Name and Mailing Address

CLIFF BERRY, INC.

PO BOX 13079

4. Phone 954-763-6335

FT LAUDERDALE, FL 33316

5. Transporter 1 Company Name

EVERGLADES WASTE REMOVAL SVCS

6. USA EPA ID Number

FLCESQG

A. Transporter's Phone

954-325-7431

7. Transporter 2 Company Name

8. USA EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

CLIFF BERRY, INC. (MIAMI)

3033 NW RIVER DRIVE, MIAMI, FL 33142

10. USA EPA ID Number

FLD058560699

C. Facility's Phone

(305) 638-2030

11. Shipping Name and Description

12. Containers

No.

Type

13.
Total
Quantity14.
Unit
Wt/Vol

a. Petroleum oil(Contains Used Oil for Recycle), 3, NA1270, PG-III (contains < 1000ppm Halogens)

1

TT

6063

G

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

11a: USED OIL

E. Pickup Location

CLIFF BERRY, INC.(TAMPA)
5218 SAINT PAUL STREET
TAMPA, FL 33619

15. Special Handling Instructions and Additional Information

16. CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulation of the Department of Transportation. I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name

Steve Hargrave for (B)

Signature

Steve Hargrave for (B)

Month

Day

Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Tom Louys

Signature

Tom Louys

Month

Day

Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month

Day

Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month

Day

Year



Cliff Berry, Incorporated
Environmental Services
PO Box 13079
Ft. Lauderdale, FL 33316
(800) 899-7745

WORK ORDER (Estimate)



Work Order #: 138396

Purchase Order #: EVERGLADES

Ft. Lauderdale (954) 763-3390 Miami (305) 638-0520 Ft. Pierce (772) 466-4063 Tampa (813) 626-6533 Portsmouth VA (757) 484-6303 Canaveral (321) 639-4199 Jacksonville (904) 356-5516

Send Invoice To:
CLIFF BERRY, INC.

PO BOX 13079

FT LAUDERDALE, FL 33316
Contact Name: DAN STONE

Phone Number: 954-763-6335

Location/Generator/Ship To:

CLIFF BERRY, INC.(TAMPA)
5218 SAINT PAUL STREET
TAMPA, FL 33619

Contact:

Requested By: DAN STONE

Phone Number: 813-626-6533

Salesperson: NONE Project Mgr./Foreman: BRANDON DOW Director/Facility Mgr: DAN STONE

☐ Emergency Response ☐ Industrial Services ☐ Transportation ☐ Product Sales/ Purchases ☐ Solid Waste ☒ CBI Internal

☐ Sales/Purchases of Materials/Supplies ☐ Petroleum Services ☐ Analysis/Testing ☐ Waste Water ☐ Hazardous Waste ☐ Other

Department Location: ES / TAMPA

Scheduled Date of Work: 7/22/09 Scheduled Time: 7:00 am Method of Payment: NET 30

Description of Service/Instructions:

RECEIVE ONE LOAD OF USED OIL AND TRANSPORT TO THE MIAMI FACILITY.

Work Site Remarks:

Time Left Yard (Start): Time Arrived On Site: Date:

Time Left Site: Time Arrived At Yard (Stop): Date:

PRODUCT/SERVICE	DESCRIPTION	START/STOP	EXTENSION
SERVICE 6.211 GAL	USED OIL	138396-1 / @ /Per	
		/ @ /Per	
		/ @ /Per	

Everglades

Total manifest(s) Issued:

Estimated Total: 1200

Authorized Signature: *[Signature]*

Date: 7/22/09

Print Name: Steve Haywood

Title: Supervisor

TERMS & CONDITIONS: Customer agrees that work has been performed satisfactorily. Payment is due upon completion of services. Where CBI extends credit, a charge of 1-1/2% per month, 18% per annum, will be added to balances unpaid 30 days after date of invoice. Collection costs and/or reasonable attorney's fees will be due in the event any collection process becomes necessary. This is not an invoice, but merely an estimate of charges. Applicable taxes, tariffs and fuel surcharges will be forwarded on invoice.



BILL OF LADING

1. Generator's US EPA ID No.

FLR000013888

Manifest
Document No.

138396 -1

2. Page 1

of 1

Truck Number

ES 40

3. Name and Mailing Address

CLIFF BERRY, INC.

PO BOX 13079

4. Phone 954-763-6335

FT LAUDERDALE, FL 33316

5. Transporter 1 Company Name

EVERGLADES WASTE REMOVAL SVCS

6. USA EPA ID Number

FLCESQG

A. Transporter's Phone

954-325-7431

7. Transporter 2 Company Name

8. USA EPA ID Number

B. Transporter's Phone

9. Designated Facility Name and Site Address

CLIFF BERRY, INC. (MIAMI)

3033 NW RIVER DRIVE, MIAMI, FL 33142

10. USA EPA ID Number

FLD058560699

C. Facility's Phone

(305) 638-2030

11. Shipping Name and Description

12. Containers

No.

Type

13.
Total
Quantity14.
Unit
Wt/Vol

a. Petroleum oil(Contains Used Oil for Recycle), 3, NA1270, PG-III (contains < 1000ppm Halogens)

1

TT

625

G

b.

c.

d.

D. Additional Descriptions for Materials Listed Above

11a: USED OIL

E. Pickup Location

CLIFF BERRY, INC.(TAMPA)
5218 SAINT PAUL STREET
TAMPA, FL 33619

15. Special Handling Instructions and Additional Information

16. CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulation of the Department of Transportation. I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name

Steve Haggerty for PBT

Signature

Steve Haggerty for PBT

Month

Day

Year

22 07

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month

Day

Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month

Day

Year

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month

Day

Year