

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

Form Approved OMB No. 2050-0038

|                                  |  |                    |   |  |
|----------------------------------|--|--------------------|---|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | 1. Generator ID Number<br>FL1690331300 | 2. Page 1 of _____ | 3. Emergency Response Phone<br>1-800-424-9300 | 4. Manifest Tracking Number<br>014484306 JJK |
|----------------------------------|--|--------------------|---|--|

|   |  |
|---|--|
| 5. Generator's Name and Mailing Address<br>U.S. COAST GUARD BASE<br>1430A Kristina Way<br>CHESAPEAKE, VA 23326<br>Generator's Phone: 305-282-8713 | Generator's Site Address (if different than mailing address)<br>COMMERCIAL INVOICES<br>100 TRUMBO POINT<br>KEY WEST FL 33040 |
|---|--|

|   |                                    |
|---|------------------------------------|
| 6. Transporter 1 Company Name<br>EMC OH | U.S. EPA ID Number<br>FLR000000166 |
|---|------------------------------------|

|  |                                    |
|--|------------------------------------|
| 7. Transporter 2 Company Name<br>TRIUMVIRATE ENVIRONMENTAL (FLORIDA), INC. | U.S. EPA ID Number<br>FLD981018773 |
|--|------------------------------------|

|  |                                    |
|--|------------------------------------|
| 8. Designated Facility Name and Address<br>AMERICAN ENVIRONMENTAL SERVICES, INC.<br>1689 SHAR-CAL ROAD<br>CALVERT CITY, KY 42029<br>Facility's Phone: (270) 395-0504 | U.S. EPA ID Number<br>KYD985073196 |
|--|------------------------------------|

| 9a. H# | 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      | UN1283 WASTE PAINT<br>RELATED MATERIAL, 3, III (RQ: D001)<br>(TOLUENE, XYLENE)                                 | 1              | DM   | 5.5                | 6                 | D001 D035<br>F003 FC05 |
| 2      |  |                |      |                    |                   |                        |
| 3      |  |                |      |                    |                   |                        |
| 4      |  |                |      |                    |                   |                        |

14. Special Handling Instructions and Additional Information  
**APPROVAL NO. MGT-45850**     *Paint Liquid*

15. GENERATOR'S/EXPORTER'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/Exporter's Printed/Typed Name: *ADAM GOLO*     Signature: *[Signature]*     Month: *11* Day: *29* Year: *18*

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

17. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: *JOEL PALOMING*     Signature: *[Signature]*     Month: *11* Day: *27* Year: *18*  
Transporter 2 Printed/Typed Name: *VICTOR PEREZ*     Signature: *[Signature]*     Month: *11* Day: *30* Year: *18*

18. Discrepancy  
18a. Discrepancy Indication Space      Quantity      Type      Residue      Partial Rejection      Full Rejection  
Manifest Reference Number: **174484**

19b. Alternate Facility (or Generator)     U.S. EPA ID Number: \_\_\_\_\_

Facility's Phone: \_\_\_\_\_  
19c. 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 18b. (a) and (b)  
Printed/Typed Name: *[Signature]*     Signature: *[Signature]*     Month: *12* Day: *05* Year: *18*

GENERATOR  
TRANSPORTER INTL  
DESIGNATED FACILITY

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

|                                  |  |                |   |  |
|----------------------------------|--|----------------|---|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | 1. Generator ID Number<br>FLD981469299 | 2. Page 1 of 4 | 3. Emergency Response Phone<br>1-800-424-9300 | 4. Manifest Tracking Number<br>014484300 JJK |
|----------------------------------|--|----------------|---|--|

|   |   |
|---|---|
| 5. Generator's Name and Address<br>CITY COLLISION CENTER<br>7527 W. OAKLAND PARK BLVD<br>LAUDERHILL, FL 33319<br>954-741-7701 | Generator's Site Address (if different than mailing address)<br>CITY COLLISION CENTER<br>7527 W. OAKLAND PARK BLVD<br>LAUDERHILL FL 33319 |
|---|---|

|  |                                    |
|--|------------------------------------|
| 6. Transporter 1 Company Name<br>EMC OIL | U.S. EPA ID Number<br>FLR000000168 |
|--|------------------------------------|

|  |                                    |
|--|------------------------------------|
| 7. Transporter 2 Company Name<br>TRIUMVIRATE ENVIRONMENTAL (FLORIDA), INC. | U.S. EPA ID Number<br>FLD981018773 |
|--|------------------------------------|

|  |                                    |
|--|------------------------------------|
| 8. Designated Facility Name and Address<br>AMERICAN ENVIRONMENTAL SERVICES, INC.<br>1689 SHAR-CAL ROAD<br>CALVERT CITY, KY 42029<br>(270) 395-0504 | U.S. EPA ID Number<br>KYD985073196 |
|--|------------------------------------|

| 9a. H# | 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/Lb | 13. Waste Codes |      |
|--------|--|----------------|------|--------------------|----------------|-----------------|------|
|        |  | No.            | Type |                    |                |                 |      |
| 1. X   | UN1289 WASTE PAINT RELATED MATERIAL, 3, III (RQ; D001) (TOLUENE, XYLENE)                                       | 1              | DM   | 5379               |                | D001            | D001 |
| 2.     |  |                |      |                    |                | F003            | F003 |
| 3.     |  |                |      |                    |                |                 |      |
| 4.     |  |                |      |                    |                |                 |      |

14. Special Handling Instructions and Additional Information  
MGT-80908 Liquid Paint

15. GENERATOR'S/OFFICER'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(c) (if I am a large quantity generator) or (d) (if I am a small quantity generator) is true.

Generator's/Officer's Printed/Typed Name: Alessandro Bianchini Signature: [Signature] Month: 11 Day: 19 Year: 19

16. International Shipments  Import to U.S.  Export from U.S. Port of export: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: JOEL PALOMINO Signature: [Signature] Month: 11 Day: 19 Year: 19  
Transporter 2 Printed/Typed Name: Victor Perez Signature: [Signature] Month: 11 Day: 10 Year: 18

18. Discrepancy  
18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection  
Manifest Reference Number: 17-4161

18b. Alternate Facility (or Generator)  
Facility's Phone: \_\_\_\_\_ 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. H74 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

20. Designated Facility Owner or Operator: Declaration of receipt of hazardous materials covered by the manifest except as noted in item 19.  
Printed/Typed Name: [Signature] Signature: [Signature] Month: 11 Day: 16 Year: 18

GENERATOR

TRANSPORTER

DESIGNATED FACILITY



ENVIMAN-03

KREILEINT

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/13/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement.

PRODUCER License # 0E67768 Insurance Office of America, Inc. 500 W. Cypress Creek Road Suite 320 Fort Lauderdale, FL 33309

CONTACT NAME: James Janner PHONE (A/C, No, Ext): (954) 334-2395 23915 FAX (A/C, No): (954) 318-1383 E-MAIL ADDRESS: James.Janner@ioausa.com

INSURED Environmental Management Conservation Oil Corp. dba EMC Oil Corporation P.O. Box 520882 Miami, FL 33152

INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: Westchester Surplus Lines Insurance Company 10172 INSURER B: ACE American Insurance Company 22667 INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL SUBR INSD, WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Includes rows for Commercial General Liability, Automobile Liability, Workers Compensation and Employers' Liability, and Pollution Liability.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Proof of Insurance only.

CERTIFICATE HOLDER Department of Environmental Protection 2600 Blair Stone Road Mail Station 4560 Tallahassee, FL 32399

CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE [Signature]



**Florida Department of  
Environmental Protection**

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Rick Scott  
Governor

Carlos Lopez-Cantera  
Lt. Governor

Noah Valenstein  
Secretary

June 18, 2018

Maria Leon  
Environmental Management Conservation Oil Corp  
PO Box 520882  
Miami, FL 33152

**BE IT KNOWN THAT**

Environmental Management Conservation Oil Corp  
8470 NW 68th St  
Miami, FL 33166- 2661

**IS HEREBY REGISTERED AS A USED OIL**

Transporter, Transfer Facility, Marketer, Filter Transporter, Filter Transfer Facility, Filter Processor, Filter End User

pursuant to Chapter 62-710, Florida Administrative Code (F.A.C)  
For regulatory guidance, go to:

[http://www.dep.state.fl.us/waste/categories/used\\_oil/default.htm](http://www.dep.state.fl.us/waste/categories/used_oil/default.htm)

The Department of Environmental Protection hereby issues  
Registration Number **FLR000000166** on June 18, 2018  
Transporter Type: **FH**

**This registration will expire on 6/30/2019**

This certificate documents receipt of your annual registration  
and annual report. It shall be displayed in a prominent place  
at your facility. This certificate and your cancelled check  
are your receipts.

A handwritten signature in black ink that reads "Janet K. Ashwood".

**Janet Ashwood  
Environmental Consultant  
Waste Compliance Assistance Program**



## Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Rick Scott  
Governor

Carlos Lopez-Cantera  
Lt. Governor

Noah Valenstein  
Secretary

June 14, 2018

Maria Leon  
Environmental Management Conservation Oil Corp  
PO Box 520882  
Miami, FL 33152

Re: Florida Hazardous Waste Transporter Approval

Dear Maria Leon:

Your Florida Hazardous Waste Transporter Approval Certificate is enclosed. The terms and conditions of approval are specified in Sections 62-730.170 and 62-730.171 of Chapter 62-730, Florida Administrative Code, <https://www.firules.org/gateway/ChapterHome.asp?Chapter=62-730>. Please note the following.

1. You must demonstrate proof of liability coverage on an annual basis, even if your insurance policy is issued on a multi-year basis. If no changes in status or insurance coverage have occurred, you can meet this requirement by submitting a certificate of liability coverage form.
2. A copy of your insurance policy, together with any endorsements, must be maintained at your principal place of business.
3. Your insurer can not terminate your coverage until 30 days after filing written notice with DEP, by Certified mail, that your policy has expired or has been canceled.
4. Any changes to the information specified on your approval certificate will render it null and void. It is your responsibility to advise DEP of any changes in liability coverage or status.
5. A copy of the Department approval shall be carried in each vehicle transporting hazardous waste for the transportation company.
6. RENEWAL DATE: If you are also a registered used oil handler, you must submit the 8700-12FL – Florida Notification of Regulation Waste Activity [Form 62-730.900(1)(b)] and evidence of casualty/liability insurance by **March 1** of each year, with your annual used oil registration. If you are not a registered used oil handler, you must submit these documents by **September 1** of each year.



# Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Rick Scott  
Governor

Carlos Lopez-Cantera  
Lt. Governor

Noah Valenstein  
Secretary

\*\*\*\*\*

## HAZARDOUS WASTE TRANSPORTER CERTIFICATE OF APPROVAL

\*\*\*\*\*

This is to certify that the carrier specified below has been approved as a hazardous waste transporter in Florida. The terms and conditions of this certificate require that the holder comply with all applicable portions of Chapter 62-730, Florida Administrative Code. This certificate shall be rendered null and void if any information contained within becomes obsolete. The certificate shall remain valid through the expiration date specified below.

TRANSPORTER: Environmental Management Conservation Oil Corp

FACILITY ID NO: FLR000000166

FACILITY ADDRESS: 8470 NW 68th St  
Miami, FL 33166-2661

EXPIRATION DATE: June 30, 2019

APPROVED TRANSFER FACILITY: NO

APPROVAL ISSUED BY: *Susan L Horlick* \_\_\_\_\_ DATE: June 14, 2018

Susan Horlick  
Environmental Specialist III  
Hazardous Waste Regulation Section  
850/245-8778



## Florida Department of Environmental Protection

Bob Martinez Center  
2600 Blair Stone Road  
Tallahassee, Florida 32399-2400

Rick Scott  
Governor

Carlos Lopez-Cantera  
Lt. Governor

Noah Valenstein  
Secretary

03/20/2018

Maria Leon  
Environmental Management Conservation Oil Corp  
8470 NW 68th St  
Miami, FL 33166-

The Florida Department of Environmental Protection has reviewed your application for registration as a transporter or handler for universal waste lamps and devices destined for recycling. Based on the information received, the facility located at **8470 NW 68th St, Miami, FL 33166-2661** has been registered through **March 1, 2019** with the following status:

Facility ID # **FLR000000166**  
**Transporter of Universal Waste Lamps and Devices**  
**Transfer Facility for Universal Waste Lamps**  
**Transfer Facility for Universal Waste Devices**  
**Small Quantity Handler Facility for Universal Waste Lamps and Devices**  
(Less than 2,000kg of Lamps (8,000) and/or 100kg of Devices at any one time)

Requirements for packaging, training and recordkeeping for transporters and handlers of universal waste lamps or devices destined for recycling are contained in Chapter 62-737, Florida Administrative Code (F.A.C.). These requirements are simple, flexible, and make good business and environmental sense. The requirements and fact sheets summarizing them can be found on the following website: <http://www.dep.state.fl.us/waste/categories/mercury/pages/registration.htm>

This registration does not allow you to transport or handle universal waste lamps or devices which are destined for landfill or any other disposal. The transportation or handling of universal waste lamps or devices destined for disposal is subject to our hazardous waste management regulations under Chapter 62-730, Florida Administrative Code (F.A.C.).

The renewal notice for this registration will be sent to the contact person on your application. If any of your facility's information changes, please notify the Department using the Florida Notification of Regulated Waste Activity, DEP Form 62-730.900(1)(b), F.A.C.

If you have any questions, you may contact me at (850)245-8705 or [Glen.Perrigan@dep.state.fl.us](mailto:Glen.Perrigan@dep.state.fl.us).

Sincerely,

A handwritten signature in cursive script that reads "Susan L. Harlick for".

Glen Perrigan  
Environmental Manager  
Hazardous Waste Regulation Section

Enclosure: Florida Notification of Regulated Waste Activity

#75388

Hazmat

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

|   |        |  |              |                               |   |
|---|--------|--|--------------|-------------------------------|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |        | 1. Generator ID Number<br>FLD982161382   | 2. Page 1 of | 3. Emergency Respo<br>1-800-4 |   |
| 5. Generator's Name and Mailing Address<br>15800 NW 49 AVE<br>OPA LOCKA, FL 33014<br>Generator's Phone: 305-230-4305  |        | Generator's Site Addr<br>NEXT M<br>15800 N<br>OPA LO   |              |                               |   |
| 6. Transporter 1 Company Name<br>EMC Oil  |        |  |              |                               |   |
| 7. Transporter 2 Company Name<br>TRIUMVIRATE ENVIRONMENTAL (FLORIDA), INC.  |        |  |              |                               |   |
| 8. Designated Facility Name and Site Address<br>AMERICAN ENVIRONMENTAL SERVICES, INC.<br>1689 SHAR-CAL ROAD<br>CALVERT CITY, KY 42029<br>Facility's Phone: (270) 395-0504   |        |  |              |                               |   |
| GENERATOR   | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) |              | 10. Container                 |   |
|   | X      | 1. UN1263, WASTE PAINT RELATED MATERIAL, 3, III (RQ: D001)   |              | No. 1                         | Type D/F                                    |
|   |        | 2. RECEIVED  |              |                               | Quantity 55                                 |
|   |        | 3. JAN 22 2019   |              |                               | Wt./Vol.                                    |
|   |        | 4. FL DEP WEST PALM BEACH  |              |                               | D001 D006<br>D007 D008<br>D005 E003<br>FD05 |
| 14. Special Handling Instructions and Additional Information<br>MGT-66431 Paint Related Material  |        |  |              |                               |   |
| 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>A. ALI  |        | Signature<br><i>[Signature]</i>  |              | Month Day Year<br>10/16/19    |   |
| 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>JOEL ALOMINO  |        | Signature<br><i>[Signature]</i>  |              | Month Day Year<br>11/14/19    |   |
| Transporter 2 Printed/Typed Name<br>Victor Perez  |        | Signature<br><i>[Signature]</i>  |              | Month Day Year<br>10/14/19    |   |
| 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)   |        |  |              |                               |   |
| 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                |   |



#175389

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

Form Approved. OMB No. 2050-0039

|   |   |              |  |   |
|---|---|--------------|--|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b> | 1. Generator ID Number<br><b>FLDD10428985</b> | 2. Page 1 of | 3. Emergency Response Phone<br><b>1-800-424-9300</b> | 4. Manifest Tracking Number<br><b>014484312 JJK</b> |
|---|---|--------------|--|---|

|   |  |
|---|--|
| 5. Generator's Name and Mailing Address<br><b>APPROVED PERFORMANCE TO<br/>8405 N.W. 66 ST<br/>MIAMI, FL 33166</b> | Generator's Site Address (if different than mailing address)<br><b>APPROVED PERFORMANCE TOOLI<br/>8405 N.W. 66 ST<br/>MIAMI FL 33166</b> |
| Generator's Phone:<br><b>305-592-7775</b>   |  |

|   |   |
|---|---|
| 6. Transporter 1 Company Name<br><b>EMC Oil</b> | U.S. EPA ID Number<br><b>FLR000000168</b> |
|---|---|

|   |   |
|---|---|
| 7. Transporter 2 Company Name<br><b>TRIUMVIRATE ENVIRONMENTAL (FLORIDA), INC.</b> | U.S. EPA ID Number<br><b>FLD981018773</b> |
|---|---|

|  |   |
|--|---|
| 8. Designated Facility Name and Site Address<br><b>AMERICAN ENVIRONMENTAL SERVICES, INC.<br/>1689 SHAR-CAL ROAD<br/>CALVERT CITY, KY 42029</b> | U.S. EPA ID Number<br><b>KYD985Q73196</b> |
| Facility's Phone:<br><b>(270) 395-0504</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>UN1993 WASTE FLAMMABLE LIQUIDS N.O.S. 3 III (MINERAL SPIRITS)</b>   | <b>1</b>       | <b>DRUM</b> | <b>6</b>           |                   | <b>DD01</b>     |
| 2      |  |                |             |                    |                   |                 |
| 3      |  |                |             |                    |                   |                 |
| 4      |  |                |             |                    |                   |                 |

14. Special Handling Instructions and Additional Information  
**MSF-51380 mineral spirits**

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/Owner's Printed/Typed Name: **[Signature]** Month: **11** Day: **14** Year: **19**

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: <b>Joel Robinson</b> | Signature: <b>[Signature]</b> | Month: <b>12</b> Day: <b>14</b> Year: <b>19</b> |
| Transporter 2 Printed/Typed Name: <b>Victor Perez</b>  | Signature: <b>[Signature]</b> | Month: <b>10</b> Day: <b>14</b> Year: <b>19</b> |

18. Discrepancy

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

Manifest Reference Number: **175292**

18b. Alternate Facility (or Generator) \_\_\_\_\_ 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. _____ | 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: \_\_\_\_\_

| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br>FLI690331300    | 2. Page 1 of  | 3. Emergency Response Phone<br>1-800-424-9300 | 4. Manifest Tracking Number<br><b>014484306 JJK</b> |                               |
|---|--|---|---|---|---|-------------------------------|
| 5. Generator's Name and Mailing Address<br><b>U.S. COAST GUARD BASE<br/>1430A Kristina Way<br/>CHESAPEAKE, VA 23326<br/>305-292-8713</b>  |  |   | Generator's Site Address (if different than mailing address)<br><b>COMMERCIAL INVOICES<br/>100 TRUMBO POINT<br/>KEY WEST FL 33040</b> |   |   |                               |
| 6. Transporter 1 Company Name<br><b>EMC OIL</b>   |  | U.S. EPA ID Number<br><b>FLR00000166</b>  |   |   |   |                               |
| 7. Transporter 2 Company Name<br><b>TRIUMVIRATE ENVIRONMENTAL (FLORIDA), INC.</b>   |  | U.S. EPA ID Number<br><b>FLD981018773</b> |   |   |   |                               |
| 8. Designated Facility Name and Address<br><b>AMERICAN ENVIRONMENTAL SERVICES, INC.<br/>1689 SHAR-CAL ROAD<br/>CALVERT CITY, KY 42029<br/>Facility's Phone: (270) 395-0504</b>  |  | U.S. EPA ID Number<br><b>KYD985073196</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>UN1263 WASTE PAINT RELATED MATERIAL, 3, III (RQ: D001) (TOLUENE, XYLENE)</b>                                | 1   | DM  | 53  |   | <b>D001, D035, F003, F005</b> |
| 2   |  |   |   |   |   |                               |
| 3   |  |   |   |   |   |                               |
| 4   |  |   |   |   |   |                               |
| 14. Special Handling Instructions and Additional Information<br><br><b>APPROVAL NO. MGT-45850      Paint Liquid</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>ADAM GOVO</b>  |  | Signature<br>                             |   | Month Day Year<br><b>11 29 18</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>JOEL PALOMINO</b>  |  | Signature<br>                             |   | Month Day Year<br><b>11 29 18</b>             |   |                               |
| Transporter 2 Printed/Typed Name<br><b>Victor Perez</b>   |  | Signature<br>                             |   | Month Day Year<br><b>11 30 18</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<br><b>174484</b>  |  |   |   |   |   |                               |
| Manifest Reference Number:  |  |   |   |   |   |                               |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number   |  |   |   |   |   |                               |
| Facility's Phone:   |  |   |   |   |   |                               |
| 18c. Signature of Alternate Facility (or Generator)   |  |   |   |   |   | Month Day Year                |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)   |  |   |   |   |   |                               |
| 1.  | 2.   | 3.  | 4.  |   |   |                               |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a  |  |   |   |   |   |                               |
| Printed/Typed Name  |  | Signature                                 |   | Month Day Year                                |   |                               |

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

Form Approved. OMB No. 2050-0039

|  |  |  |   |   |   |
|--|--|--|---|---|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>  |  | 1. Generator ID Number<br>FLR000173369 | 2. Page 1 of  | 3. Emergency Response Phone<br>1-800-424-9300 | 4. Manifest Tracking Number<br><b>014484301 JJK</b> |
| 5. Generator's Name and Mailing Address<br>FUJI'S AUTOMOTIVE INC<br>2242 FOWLER ST.<br>FORT MYERS, FL 33901<br>239-337-3444                              |  |  | Generator's Site Address (if different than mailing address)<br>FUJI'S AUTOMOTIVE INC<br>2242 FOWLER ST.<br>FORT MYERS FL 33901 |   |   |
| 6. Transporter 1 Company Name<br>EMC OIL   |  | U.S. EPA ID Number<br>FLR000000166     |   |   |   |
| 7. Transporter 2 Company Name<br>TRIUMVIRATE ENVIRONMENTAL (FLORIDA), INC.   |  | U.S. EPA ID Number<br>FLD981018773     |   |   |   |
| 8. Designated Facility Name<br>AMERICAN ENVIRONMENTAL SERVICES, INC.<br>1689 SHAR-CAL ROAD<br>CALVERT CITY, KY 42029<br>Facility's Phone: (270) 395-0504 |  | U.S. EPA ID Number<br>KYD985073196     |   |   |   |

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.     | UN1263 WASTE PAINT RELATED MATERIAL, 3, III (RQ: D001) (TOLUENE, XYLENE)                                       | 1              | DM   | 55                 | G                 | D001 D035<br>F003 F005 |
| 2.     |  |                |      |                    |                   |                        |
| 3.     |  |                |      |                    |                   |                        |
| 4.     |  |                |      |                    |                   |                        |

14. Special Handling Instructions and Additional Information  
APPROVAL #MGT-45326 *paint liquid*

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/Offere's Printed/Typed Name: *ALHEM PEREZ*  
Signature: *[Signature]* Month: *11* Day: *20* Year: *1998*

16. International Shipments:  Import to U.S.  Export from U.S. Port of entry: *[Signature]* Date leaving U.S.: *[Signature]*

17. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: *JOEL PALOMINO* Signature: *[Signature]* Month: *11* Day: *20* Year: *1998*  
Transporter 2 Printed/Typed Name: *[Signature]* Signature: *[Signature]* Month: *11* Day: *21* Year: *1998*

18. Discrepancy  
18a. Discrepancy Indication Space:  Quantity  Type  Residue  Partial Rejection  Full Rejection  
Manifest Reference Number: *174276*

18b. Alternate Facility (or Generator) 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. \_\_\_\_\_ 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: \_\_\_\_\_

|   |  |  |  |  |   |
|---|--|--|--|--|---|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator ID Number<br><b>FLD981469299</b>  | 2. Page 1 of   | 3. Emergency Response Phone<br><b>1-800-424-9300</b> | 4. Manifest Tracking Number<br><b>014484300 JJK</b> |
| 5. Generator's Name and Mailing Address<br><b>CITY COLLISION CENTER<br/>7527 W. OAKLAND PARK BLVD<br/>LAUDERHILL, FL 33319<br/>954-741-7701</b>   |  |  | Generator's Site Address (if different than mailing address)<br><b>CITY COLLISION CENTER<br/>7527 W. OAKLAND PARK BLVD<br/>LAUDERHILL FL 33319</b> |  |   |
| 6. Transporter 1 Company Name<br><b>EMC Oil</b>   |  |  | U.S. EPA ID Number<br><b>FLR000000166</b>  |  |   |
| 7. Transporter 2 Company Name<br><b>TRIUMVIRATE ENVIRONMENTAL (FLORIDA), INC.</b>   |  |  | U.S. EPA ID Number<br><b>FLD981018773</b>  |  |   |
| 8. Designated Facility Name and Address<br><b>AMERICAN ENVIRONMENTAL SERVICES, INC.<br/>1689 SHAR-CAL ROAD<br/>CALVERT CITY, KY 42029<br/>(270) 395-0504</b>  |  |  | U.S. EPA ID Number<br><b>KYD985073196</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. X  |  | UN1263 WASTE PAINT RELATED MATERIAL, 3, III (RQ: D001) (TOLUENE, XYLENE)                                       |  | 1  | DM 5359   |
| 2.  |  |  |  |  | D001 D005<br>6 F003 R003                            |
| 3.  |  |  |  |  |   |
| 4.  |  |  |  |  |   |
| 14. Special Handling Instructions and Additional Information<br><br><b>MGT-80908 Liquid Paint</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>Alessandro Bianchini</b>   |  |  |  | Signature<br><i>[Signature]</i>                      |   |
|   |  |  |  | Month Day Year<br><b>11/9/18</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>JOEL PALOMINO</b>  |  |  |  | Signature<br><i>[Signature]</i>                      |   |
|   |  |  |  | Month Day Year<br><b>11/9/18</b>                     |   |
| Transporter 2 Printed/Typed Name<br><b>Victor Perez</b>   |  |  |  | Signature<br><i>[Signature]</i>                      |   |
|   |  |  |  | Month Day Year<br><b>11/10/18</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<br><b>174161</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.  |  | 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 _____  |  |  |  | Signature _____                                      |   |
|   |  |  |  | Month Day Year _____                                 |   |



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

8/17/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

|  |   |                                      |
|--|---|--------------------------------------|
| <b>PRODUCER</b><br>Advanced Insurance Underwriters, LLC<br>3250 N. 29th Ave<br>Hollywood, FL 33020         | <b>CONTACT NAME:</b> Fabian Piorno<br><b>PHONE (A/C, No, Ext):</b> (954) 889-3276<br><b>E-MAIL ADDRESS:</b> fpiorno@advancedins.com | <b>FAX (A/C, No):</b> (954) 889-3277 |
|  | <b>INSURER(S) AFFORDING COVERAGE</b>  |                                      |
| <b>INSURED</b><br>Environmental Management Conservation Oil Corp.<br>8470 NW 68th Street<br>Miami FL 33166 | <b>INSURER A:</b> Nautilus Insurance Company <b>NAIC #</b> 17370  |                                      |
|  | <b>INSURER B:</b> Great Divide Insurance Company <b>NAIC #</b> 25224  |                                      |
|  | <b>INSURER C:</b> Certain Underwriters at Lloyds, London  |                                      |
|  | <b>INSURER D:</b>   |                                      |
|  | <b>INSURER E:</b>   |                                      |
|  | <b>INSURER F:</b>   |                                      |

**COVERAGES** **CERTIFICATE NUMBER:** 43687406 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE   | ADDL INSD                           | SUBR WVD                            | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS  |
|----------|---|-------------------------------------|-------------------------------------|---------------|-------------------------|-------------------------|---|
| A        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><input checked="" type="checkbox"/> BI/PPD Ded \$5,000<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | BR20180717GL  | 8/17/2018               | 8/17/2019               | EACH OCCURRENCE \$1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000<br>MED EXP (Any one person) \$10,000<br>PERSONAL & ADV INJURY \$1,000,000<br>GENERAL AGGREGATE \$2,000,000<br>PRODUCTS - COMP/OP AGG \$2,000,000<br>\$ |
| B        | <b>AUTOMOBILE LIABILITY</b><br><input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY  | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | BR20180717CAU | 8/17/2018               | 8/17/2019               | COMBINED SINGLE LIMIT (Ea accident) \$1,000,000<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$  |
|          | <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR<br><b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE<br>DED RETENTION \$  |                                     |                                     |               |                         |                         | EACH OCCURRENCE \$<br>AGGREGATE \$<br>\$  |
| B        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>if yes, describe under DESCRIPTION OF OPERATIONS below   | Y/N                                 | N/A                                 | BR20180717WC  | 8/17/2018               | 8/17/2019               | PER STATUTE OTH-ER<br>E.L. EACH ACCIDENT \$1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$1,000,000<br>E.L. DISEASE - POLICY LIMIT \$1,000,000   |
| A        | Contractor Pollution Liability  | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | BR20180817POL | 8/17/2018               | 8/17/2019               | \$1,000,000/Ded \$5K per Claim/Claims Made  |
| A        | Employee Benefits Liability   |                                     |                                     | BR20180717EB  | 8/17/2018               | 8/17/2019               | \$2,000,000 General Agg. Retro 9/21/06  |
| C        | Property Hazard   |                                     |                                     | BR20180817    | 8/17/2018               | 8/17/2019               | \$1,000,000/Ded \$1,000 per Claim<br>*See Remark Section  |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

### CERTIFICATE HOLDER

### CANCELLATION

Environmental Management Conservation Oil Corp.  
 8470 NW 68th Street  
 Miami FL 33166

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Michael Christian

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**SPILL PREVENTION, CONTROL AND COUNTERMEASURE PLAN (SPCCP)**

**EMC Oil Corporation - Transfer Facility**

**Facility Location:**

**8470 N. W. 68th Street  
Miami, FL 33166**

**Facility Contacts and Phone Numbers:**

**Owner - Ms. Maria E. Leon  
(305) - 477-7497 ext. 103 - office  
(305) - 345-1372 - Cell**

**Emergency Contact:**

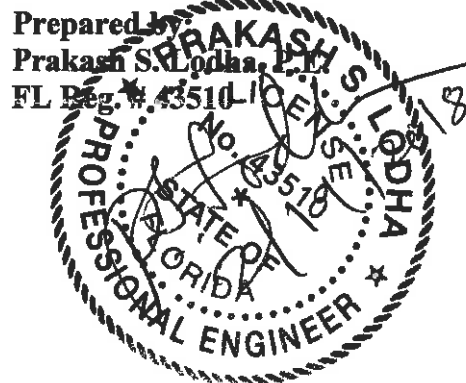
**Facility Manager - Mr. George L. Vincent  
(305) - 345 - 1371 - Cell  
(305) - 279-7919 - Home**

**February, 2018**

**RECEIVED**

**JAN 22 2019**

**FL DEP  
WEST PALM BEACH**



**EMERGENCY RESPONSE PLAN FOR**  
**E.M.C. OIL CORPORATION**

**I. Plan Introduction:**

Plan Introduction: The information and procedures in this plan must be treated as guidelines only. It does not cover all incidents that can occur, nor does it replace professional good judgment of those present on the scene. Response decisions may involve consideration not addressed in this plan.

**E.M.C. OIL CORPORATION**  
**8470 N.W. 68<sup>th</sup> Street**  
**Miami, Florida 33166**  
**(305) 477-7497 – Facility Number**  
**Miami Dade County, Florida**

Owner: Maria Elena Perez-Leon

Procedures for contacting owner:   (305) 477-7497 Office  
  (305) 345-1372 Cellular #1  
  (305) 345-1371 Cellular #2  
  (305) 279-7919 Home

By calling the above phone numbers, the owner can be contacted 24 hours a day.

**II. Plan Content:**

**Emergency Response Action Plan**

- A. Notification procedures**
- B. Facility Spill Mitigation Procedures**
- C. Facility's Response Activities**
- D. Sensitive Areas (Fish and Wildlife)**
- E. Disposal Plan**
  - 1. Training and Drill Procedures**
  - 2. Plan Review**
  - 3. Appendices**

**EMERGENCY RESPONSE ACTION PLAN**

**A. Notification Procedures**

**Company Name: E.M.C. Oil Corporation, P.O. Box 520882, Miami,  
Florida 33152**

**Immediately call: George L. Vicente – Facility Response Personnel  
Qualified Response Individual – Contact Numbers: (305) 477-7497  
(305) 345-1371  
(305) 345-1372  
(305) 279-7919  
Alternate Qualified Individual – Evelio Perez (305) 986-3613**

Pursuant to Section 62-700.900 Forms, the person in charge (PIC) of the terminal facility is in charge of notification to FDEP of any accidental discharge into the surface water and or soil.

**Report the Following Information**

1. Name, occupation, title and telephone number of person making notification.
2. Type of pollutant spilled.
3. Location of the spill.
4. Date and time of incident.
5. Number of injuries of any type.
6. Size of area affected by the spill.
7. Cause of spill.
8. Type of tanker or vessel involved in the spill.
9. Estimated amount of spill.
10. Persons or agencies already contacted.
11. Containment and clean-up efforts to date.
12. Person or firm in charge of source.

**REQUIRED STATEMENT – No matter the size of a spill or information gathered, we will give a required statement and notify proper authorities.**



## TELEPHONE NUMBERS FOR REPORTING SPILLS.

### Federal:

National Response Center  
1-800-424-8802 (24 hours per day, 7 days per week)

On Line Reporting to National Response Center  
[WWW.NRC.USCG.MIL](http://WWW.NRC.USCG.MIL)

### State:

State Warning Point  
800-320-0519

Florida Marine Patrol  
800-342-5367 (24 hours)

U.S. Environmental Protection Agency  
202-260-2090 (24 hours)

### Reporting Checklist:

**Reporting Spills:** For spills consisting of petroleum products that may endanger human health, welfare or the environment, notification is necessary. The State of Florida Department of Environmental Protection requests immediate notification of any petroleum discharge less than 25 gallons or greater and 24 hours notification of a petroleum discharge less than 25 gallons.

If the petroleum discharge is into water you must notify FDEP immediately and possibly the United States Coast Guard if the discharge is in navigable waterways.

**SPILLS OF COMBUSTIBLE USED OIL (Flashpoint of 100 – 200 F  
49 CFR 173.120 (B))**

Transporter must also complete USDOT Form F 5800.1 and sent it to State and Federal DOT offices. Form 5800.1 attached

It is a violation to purposely discharge any type of hazardous material that may cause pollution. So as to harm health, welfare, animal, plant, aquatic life to environment.

Emergency action involving combustible liquids.

- a. Small fires: Dry chemical CO<sub>2</sub>, Halon, water spray or standard foam fire extinguisher.

- b. Large fires: Water spray, fog or standard foam is recommended. Move container from fire area if you can do it without risk. Cool containers that are exposed to flames with water from the side until well after fire is out. Stay away from ends of tanks.
- c. For massive fire in cargo area, use unmanned hose holder or monitor nozzles; if this is impossible, withdraw from area and let fire burn. Withdraw immediately in case of rising sound from venting safely device or any discoloration of tank due to fire.

## EMERGENCY RESPONSE PROCEDURES

### A. Immediate steps for drivers:

- \* Stay with vehicle until help arrives
- \* Call 911 for fire, medical or police assistance
- \* Use emergency numbers in spill plan to contact appropriate persons.
- \* Dike off or boom liquids from entering sewers, storm sewers, or water ways—follow emergency plan for further containment.

#### a. Emergency Response Plan:

This practical Emergency Response Plan is designed to provide a guide to appropriate actions in the event of a spill. The most important thing is to remain calm and try to get the situation under control as much as possible. If you are hurt or incapacitated, notify emergency personnel of the copy of this plan that should be in the glove compartment box.

1. **DO NOT PANIC, REMAIN CALM.** Examine your own condition first. If you or anyone else is hurt or incapacitated, call for medical assistance.
2. If you are o.k., assess the extent of rupture or damage to the vehicle. **CLOSE** off any valves, hatches or hoses – this will help store the oil flow.
3. Try to evaluate the degree of contamination to the environment, and estimate the number of gallons spilled.
4. If possible, **PUMP LIQUID BACK INTO TANK**, even if tank is ruptured. This will recycle the spilled oil to the truck rather than spreading on the ground.
5. Do your best to **DIKE AHEAD OF THE SPILL** to prevent from entering sewers and waterways.

## SPILL CONTAINMENT PROCEDURES

### A. Spills on Water:

Call for BOOMS or SWEEPS in lengths appropriate to contain spill. All absorbent material will be available to prevent the spill from spreading until help arrives. Skim oil into truck if possible. Determine the direction of the flow of water and set booms in front of flow to dam the oil. If notified help is not sufficient for the volume of spilled oil, call for tankers or vac trucks with skimmers.

### B. Spills on Pavement:

Call for BOOMS, PADS and CLAY ABSORBENT (OIL DRY) amounts appropriate for spill. Use booms to contain spill by wiping them in a circular motion. Use truck pump with skimmer to remove oil. If spill is too large for booms: (a) call for sand, and contain spreading oil by using sand to circle the spill; (b) call for vac truck, skimmer and backhoe. Remove oil soaked sand, place on plastic tarps and cover sand with additional plastic or tarps to prevent rain from spreading oil.

### C. Spills on Soil:

Call for EARTH-MOVING EQUIPMENT (loader, backhoe, dump truck) and SAND. Determine direction of oil flow, and excavate an area for the oil to flow into. Around spill, contain oil with sand berm. Pump liquid oils into truck. Prepare a plastic tarp and sand berm on an area of clean ground. Prepare a plastic tarp and sand berm on an area of clean ground. Remove oil-soaked soil to trap while making sure that soil is contained by tarp and berm. Have backhoe remove on foot below surface of spill, or until visually clean. Call for further assistance to remove soil for treatment.

### D. Removing Oil-Soaked Material:

Place all used absorbent material in 17-H DOT 55 gallon drums. Management will have these picked up and legally disposed of at an appropriate facility.

Figure I – Information on discharge (involved parties)

(A) Reporting party (B) Suspected responsible party

|           |                     |
|-----------|---------------------|
| Name      | Name                |
| Telephone | Telephone           |
| Company   | Company             |
| Position  | Organization type:  |
| Address   | -Private citizen    |
| Address   | -Private enterprise |
|           | -Public utility     |
|           | -Local government   |
|           | -State government   |
|           | -Federal government |
| City      | City                |
| State     | State               |
| Zip       | Zip                 |

\*It is not necessary to wait for all information before calling NRC. National Response Center 1-800-424-8802.

Were materials discharged (Y/N)?

Calling for Responsible Party (Y/N)?

**Incident Description**

Source and/or Cause of Incident

Date – Time:

Cause:

Incident Address/Location Nearest City

Distance from City

Storage Tank Container Type – Above ground (Y/N) Below ground (Y/N) Unknown

**Facility Capacity**

Tank Capacity

Latitude Degrees

Mile Post or River Mile

**Materials**

Discharge Unit of Quantity Measure Discharged Material Quantity in Water

**Response Action**

Actions Taken to Correct or Mitigate Incident

Number of Injuries / Number of Fatalities

Were there Evacuations (Y/N/U)? Number Evacuated

Was there any Damage (Y/N/U)? Damage in Dollars

**Additional Information**

Any information about the Incident not recorded elsewhere in the report

**Caller Notifications**

USCG EPA State Other

B. Facility's Spill Mitigation Process

Oil Spill Check Off List

If a spill is discovered:

1. Report spill to terminal office. The terminal office will notify the appropriate regulatory agency.
2. Search for, locate and verify any spill.
3. If casualty related, stabilize the situation (vehicle, vessel, etc.)
4. Immediately STOP, CONTROL or MITIGATE the spill to contain the pollutant.
5. Deploy/apply response equipment carried in tank truck. Call for additional resources if needed.
6. Act as on-scene coordinator until relieved of this duty by:
  - (a) another authorized terminal employee
  - (b) on scene coordinator designed by terminal manager.
7. Verify with terminal manager/office that required notifications have been made.
8. While acting as on-scene coordinator, the driver has the authority to summon clean-up contractors. This will normally be accomplished through the terminal manager, unless he/she cannot be immediately reached.

- Average most probable 35  
350  
3500  
- Worst →

**SPILL SCENARIOS**

E.M.C. Oil Corporation operates a 3 compartment tank truck totaling 3,500 gallons. Compartment #1 holds 500 gallons; Compartment #2 holds 500 gallons and Compartment #3 holds 2,500 gallons for over water transfers of spent petroleum products at a time.

The average most probable discharge would occur during hook-up of transfer hoses from one compartment. The volume of product discharge for this type of spill would be less than 35 gallons.

The maximum most probable discharge would be 350 gallons.

**Scenario (A)**

To prevent a spill of this kind, make sure hose are empty of product before transfer operations begin! After locking couplings together tie an absorbent pad around the ears of the coupling for incidental leaks. Place absorbent materials at all connections. If a spill should occur during hook-up – immediately put hose end in a 5 gallon bucket. Engage PTO and drain hoses of product. While PTO is engaged pump onto tanker any free product that may have spilled. Assess situation and act accordingly.

### Scenario (B)

To prevent a spill of this kind, **BEFORE PUMPING OPERATION BEGINS**, inspect all hoses and connections for cracks, broken straps and worn areas. Place around truck and hoses booms that are supplied on each truck. At all times during pumping be alert to mechanical problems. During pumping operations look at pump and connections to spot potential problems. Check volume often during pumping operations.

If a spill should occur during pumping operations, immediately shut down pumping operations. Do this by shutting off the PTO, located on the floor in the cab of the truck. Contain spill if not already done by using the booms. If the problem can be fixed or solved restart PTO and pump a free product back onto the tanker. Assess situation and act accordingly.

### Scenario (C)

The worst case probable discharge would be at least 3,500 gallons.

This is the worse case spill for E.M.C. Oil Corporation. Each driver must inspect his tanker daily. Look for weeping product from any stress cracks are detected immediately **WRITE IT UP ON YOUR DAILY INSPECTION REPORT FORM AND (OOS) OUT OF SERVICE THE TANKER, NEVER USE AN UNPREPARED TANKER FOR OVER WATER TRANSFER OR ANY TRANSFER.**

If a spill of this kind occurs immediately **STOP** all pumping activities by shutting off the PTO and give all attention to the problem at hand.

Refer to notifications procedures:

The size and location of the spill and the threat of any further discharge will determine the equipment and response needed to quickly and correctly respond to, contain and recover the pollutant.

The amount, type and characteristics of the pollutant must be quickly verified and reported to the Terminal Manager who will summon appropriate equipment and personal resources.

E.M.C. Oil Corporation has contracted with the clean-up firm of Coffin Marine to quickly respond to any spill. They can be on scene with at least 200 feet of containment boom and the means of commencing deploying and anchoring the boom available at the spill site within 1 hour of the detection of a spill to respond to the average most probable discharge upon receiving a telephone report of the spill. There is adequate absorbent material at the facility for initial response to an average probable discharge.

E.M.C. Oil secures pump valves systems, secure hoses where it may be leaking. Immediately lays out absorbent and booms especially leading to any drainage or waterways. Start picking up booms and absorbents to start fluid into water/ocean – pump absorbent floating product off waterway with either boom, pads, vacuum truck or pump truck. We use biodegradable degreaser to clean up any spots on asphalt and concrete and dispose of properly.

Call all supervisors of base of facility, report if its more you can control and contact our sub-contractor, Coffin Marine Services, Inc.

**DO NOT HESITATE TO CALL THE CLEAN UP CONTRACTOR IF WARRANTED!**

It is the responsibility of the driver of the tanker to act as person in charge, until relieved of that duty by the Terminal Manager.

Oil Response Organization/OSRO: Cliff Berry Inc. = 24 hour emergency response  
1800-899-7745  
P.O. Box 13079  
Port Everglades Station  
Ft. Lauderdale, Florida 33316  
Office: 954-763-3390 Fax: 954-764-0415

SWS Environmental  
Ft. Lauderdale Office  
6900 Northwest 12th Avenue  
Fort Lauderdale, Florida  
Tel: 1-954-957-7271

## Facility's Response Activities:

### 1. Leak at pump: hoses/couplings:

Shut down all power to unit by disengaging PTO. Contain any spillage that has occurred. Once contained, form a dike around the spill with absorbent boom, dry absorbent or sand. Recover oil and absorbent with shovel or absorbent pads. After material is recovered store and dispose of properly.

### 2. Overflow of tank:

Shut down all power to unit by disengaging PTO. Put absorbent boom completely around tanker. Proceed with steps outlined above in example 1.

### 3. Leaking Tank:

Shut down all transfer operations. Plug if possible. Try to collect any leaks with bucket or drip pan. Recover and spill as outlined in example 1. Call terminal manager for back up tanker.

### 4. Fire on vessel or tanker:

Shut down all pumping operations. Use dry chemical CO2 or foam to fight fuel or oil fires. DO NOT use water to fight fire. Call fire emergency 911.

Note: All transfer to tank trucks may be immediately shut down by disengaging PTO, located on driver's side floor in cab.

### 5. Sensitive Areas

### 6. Disposal Plan

All waterways and land areas will be tested to verify completion of clean-up operations. Water and soil samples will be sent to a certified laboratory stated below

Any spent products resulting from a spill or discharge will be tested at an EPA approval lab, unless spill or discharge is from virgin sources.

Summit Environmental Technologies  
3310 Win Street  
Cuyahoga Falls, OH 44223-3790



Any spent products as a result of a spill or discharge (absorbents) will be drummed and taken to an EPA approved disposal facility:

Triumvirate of Florida  
Ft. Lauderdale, Florida  
Attn: Orlando  
Tel: 954-583-3795

All materials will be manifested and disposed of according to EPA guidelines.

STEP BY STEP EMERGENCY RESPONSE PROCEDURES

A. Immediate steps for drivers:

- \* Stay with vehicle until help arrives
- \* Call 911 for fire, medical or police assistance
- \* Use emergency numbers in spill plan to contact appropriate persons.
- \* Dike off or boom liquids from entering sewers, storm sewers, or water ways—follow emergency plan for further containment.

The most important thing in a spill situation is to remain calm and try to get the situation under control as much as possible. If you are hurt or incapacitated, notify emergency personnel of the copy of this plan that should be in the glove compartment box.

1. DO NOT PANIC, REMAIN CALM. Examine your own condition first. If you or anyone else is hurt or incapacitated, call for medical assistance.
2. If you are o.k., assess the extent of rupture or damage to the vehicle. CLOSE off any valves, hatches or hoses – this will help store the oil flow.
3. Try to evaluate the degree of contamination to the environment, and estimate the number of gallons spilled.
4. If possible, PUMP LIQUID BACK INTO TANK, even if tank is ruptured. This will recycle the spilled oil to the truck rather than spreading on the ground.
5. Do your best to DIKE AHEAD OF THE SPILL to prevent from entering sewers and waterways.

NOTIFICATION FORM

| Figure I – Information on discharge<br>(A) Reporting party | (involved parties)<br>(B) Suspected responsible party |
|--|---|
| Name   | Name  |
| Telephone  | Telephone   |
| Company  | Company   |
| Position   | Organization type:                                    |
| Address  | -Private citizen                                      |
| Address  | -Private enterprise                                   |
|  | -Public utility                                       |
|  | -Local government                                     |
|  | -State government                                     |
|  | -Federal government                                   |
| City   | City  |
| State  | State   |
| Zip  | Zip   |

\*It is not necessary to wait for all information before calling NRC.

National Response Center 1-800-424-8802.

Were materials discharged (Y/N)?

Calling for Responsible Party (Y/N)?

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**Incident Description**

---

Source and/or Cause of Incident

---

Date - Time:

Cause:

---

Incident Address/Location Nearest City

Distance from City

Storage Tank Container Type - Above ground (Y/N) Below ground (Y/N) Unknown

---

**Facility Capacity**

---

Tank Capacity

Latitude Degrees

Mile Post or River Mile

---

**Materials**

---

Discharge Unit of Quantity Measure Discharged Material Quantity in Water

---

**Response Action**

---

Actions Taken to Correct or Mitigate Incident

---

Number of Injuries / Number of Fatalities

Were there Evacuations (Y/N/U)? Number Evacuated

Was there any Damage (Y/N/U)? Damage in Dollars

---

**Additional Information**

---

Any information about the Incident not recorded elsewhere in the report

---

**Caller Notifications**

---

USCG EPA State Other

B. Facility's Spill Mitigation Procedures:

Oil Spill Check Off List

If a spill is discovered:

1. Report spill to terminal office. The terminal office will notify FDEP.
2. Search for, locate and verify any spill.
3. If casualty related, stabilize the situation (vessel collision/fire/pipeline damage).
4. Immediately STOP, CONTROL or MITIGATE the spill and contain the pollutant.
5. Deploy/apply response equipment carried in tank truck. Call clean-up contractor if needed.
6. Act as on-scene coordinator until relieved of that duty by:
  - (a) another authorized terminal employee
  - (b) on scene coordinator designed by terminal manager.
7. Verify with terminal manager/office that required notifications have been made.
8. While acting as on-scene coordinator, the driver has the authority to summon clean-up contractors. This will normally be accomplished through the terminal manager, unless he/she cannot be immediately reached.

# CHECK LIST

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REMARKS:

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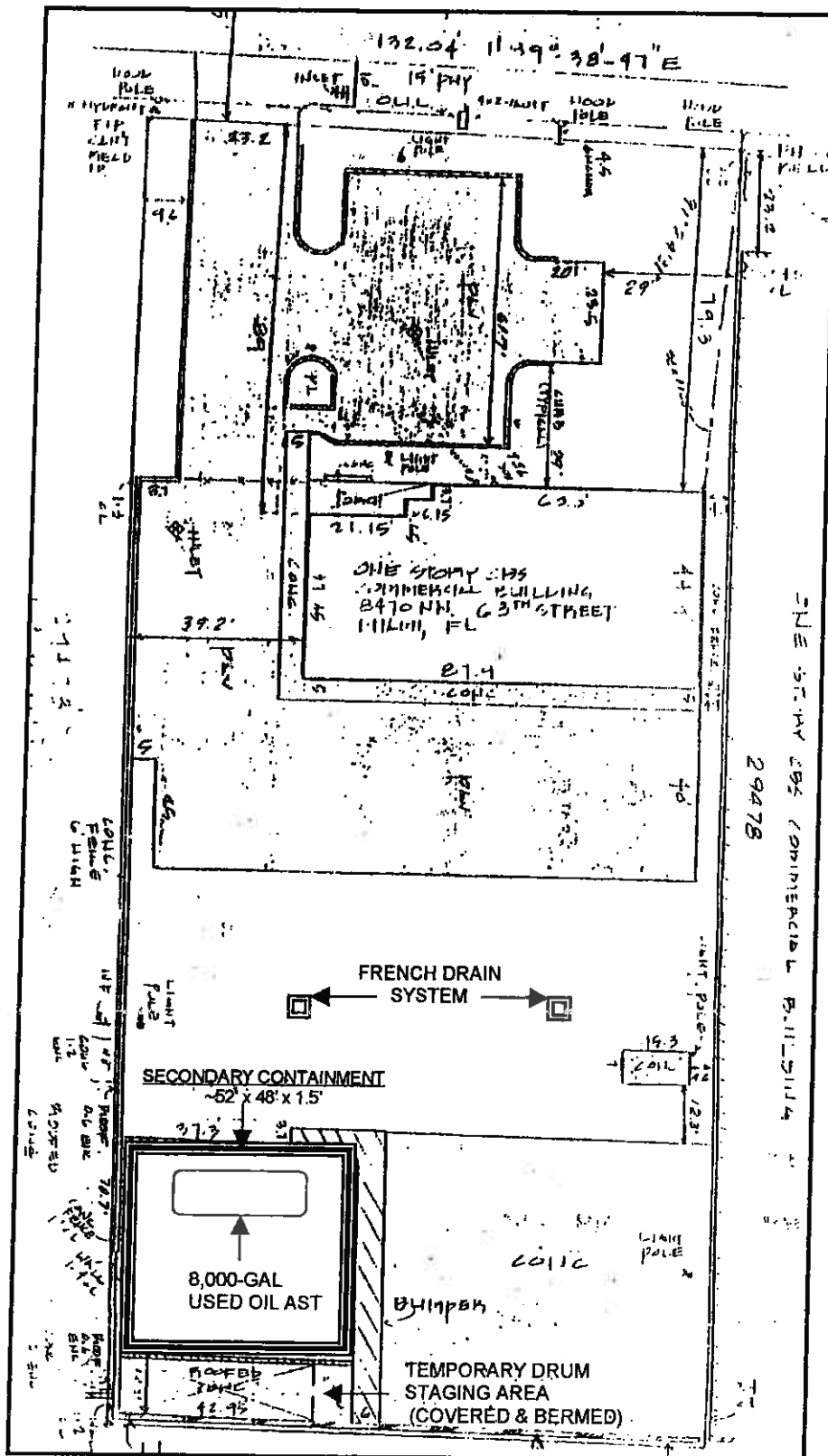
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**Figure 1 - Layout of Facility**  
**Facility Name: EMC Oil Corp.**



**List of Products Stored On Site:**

- I. Used oil – Temporarily stored in vacuum, pump and tanker trucks, and the 8,000 gallon AST.
- II. Drums – Containing used rags and used oil filters.
- III. Oily petroleum waters - Temporarily stored in vacuum, pump and tanker trucks.

**POTENTIAL SPILL VOLUMES AND RATES - 40 CFR 112.7(b)**

| <b>Type of Major Failure</b>  | <b>Possible Quantity Released</b>       | <b>Direction of Flow (relative to storm drainage ditch)</b>   | <b>Rate of Flow</b>  |
|---|---|---|--|
| Complete failure of a full tank   | 8000 gallons into secondary containment | N/A – Spill will remain within secondary containment  | N/A – Secondary Containment will eliminate the possibility of free flow. |
| Partial failure of a full tank  | 1 to 8000 gallons                       | N/A – Spill will remain within secondary containment  | N/A – Secondary Containment will eliminate the possibility of free flow. |
| Tank overfill   | 1 to many gallons                       | N/A – Spill will remain within secondary containment  | N/A – Secondary Containment will eliminate the possibility of free flow. |
| Pipe failure  | N/A – No piping on tank                 | N/A   | N/A  |
| Leaking pipe or valve packing   | N/A – No piping on tank                 | N/A   | N/A  |
| Drain plug removed from rupture basin of day tank and tank fails or leaks | N/A                                     | N/A   | N/A  |
| Ruptured Drum   | ~55 gallons                             | N/A – Contained in Secondary Containment Area   | N/A  |
| Spill During Used Oil Transfer  | 1 to 200 gallons                        | Spill will flow to 1 of 2 catch basin inlets. Grease interceptor within catch basin will prevent discharge to groundwater | Immediate  |

**UNDERGROUND STORAGE TANKS:** No underground storage tanks at this site.

## **CONTAINMENT AND DIVERSIONARY STRUCTURES- 40 CFR 112.7(c)(1)**

- I. There is a reinforced concrete impervious secondary containment area surrounding the 8000-gallon tank, as shown in **Figure 1**. The dimensions of the containment area are ~52' x 48' x 1.5', providing a nominal containment volume of 28,000 gallons.
- II. Drums are temporarily staged in a covered, secondary containment area ~35'x12'x 4", as shown in **Figure 1**. The drum containment area will provide a nominal containment volume of 1,000 gallons.
- III. Vacuum and pump trucks are available on site for immediate spill cleanup as EMC Oil Corp. is a spill cleanup contractor with a spill response plan (**Appendix B**) which can be used on site.
- IV. Booms or other barriers are available on-site for immediate spill cleanup.

## **DEMONSTRATION OF PRACTICABILITY - 40 CFR 112.7(d)**

- I. Secondary containment will hold far in excess of 110% capacity of a full tank – 8,800 gallons.
- II. The drum containment area will hold far in excess of 110% capacity of a full drum – 60.5 gallons.
- III. Vacuum and pump trucks are available on site for immediate spill cleanup as EMC Oil Corp. is a spill cleanup contractor with a spill response plan (**Appendix B**) which can be used on site.
- IV. Booms or other barriers are available on site for immediate spill cleanup.

## **FACILITY DRAINAGE - 40 CFR 112.7(e)(1)**

- I. The drainage system consists of two catch basins connected to common exfiltration trenching, as shown on **Figure 1**. Each catch basin contains a grease interceptor designed to prevent the introduction of spilled oil into the drainage system, in the case of a spill in the yard during used oil transferring operations (as outlined in the Facility Operations plan, **Appendix A**). Furthermore, if a spill does occur which may infringe on the drainage system, operations as specified in the spill response plan (**Appendix B**) will be implemented (i.e.: use booms, pads and clay absorbent to dike around drains to contain a spill).

## **BULK STORAGE TANKS - 40 CFR 112.7(e)(2)**

The AST is of UL-142 construction and is compatible with the oils it contains and the conditions of storage.

**TRANSFER OPERATIONS and PROCESSES - 40 CFR 112.7(e)(3)**  
**TANK TRUCK LOADING / UNLOADING - 40 CFR 112.7(e)(4)**

- I. All fuel transfers are attended and are never left unattended. All transfers of product to and from tanks are visually tracked by an EMC Oil Corp. employee, or designate, to observe any spillage (outlined in Facility Operations, **Appendix A**).
- II. All truck loading and unloading procedures meet the minimum requirements of the US DOT Hazardous Materials Regulations.

**INSPECTION AND RECORDS - 40 CFR 112.7(e)(8)**

- I. The AST is inspected regularly (daily to weekly) to ensure no leakage is occurring.
- II. The vacuum and pump trucks are also inspected regularly (daily) as outlined in **Appendix B** to ensure shut-off valves are tight and no leakage has occurred.

**SECURITY - 40 CFR 112.7(e)(9)**

- I. The facility is surrounded by a steel security fencing and the entrance gate is locked when the facility is unattended.
- II. Area lighting is present and located in such a position as to illuminate the area of the AST, and the vacuum and pump trucks.
- III. Consideration was given to discovering spills at night and discouraging pilferage and possible sabotage. To date the facility is without incident.

**PERSONNEL, TRAINING, AND SPILL PREVENTION PROCEDURES - 40 CFR 112.7(e)(10)**

- I. EMC Oil Corp. facility operations & maintenance personnel are instructed by management in the operation and maintenance of oil pollution spill response and prevention, and the use of equipment as outlined in the **Appendix A**, Facility Operations and **Appendix B**, Spill Response Plan.
- II. Personnel are required to attend 40 hours of training as a job requirement prior to conducting pump off operations (operating pump/vacuum trucks).
- III. George Vincent has been designated by management as responsible for oil spill prevention.
- IV. Instructions and phone numbers regarding the reporting of a spill to the National Response Center and appropriate state and local entities are listed below and have been publicized and posted in the building at the facility.

Notification are to be made in the following order:

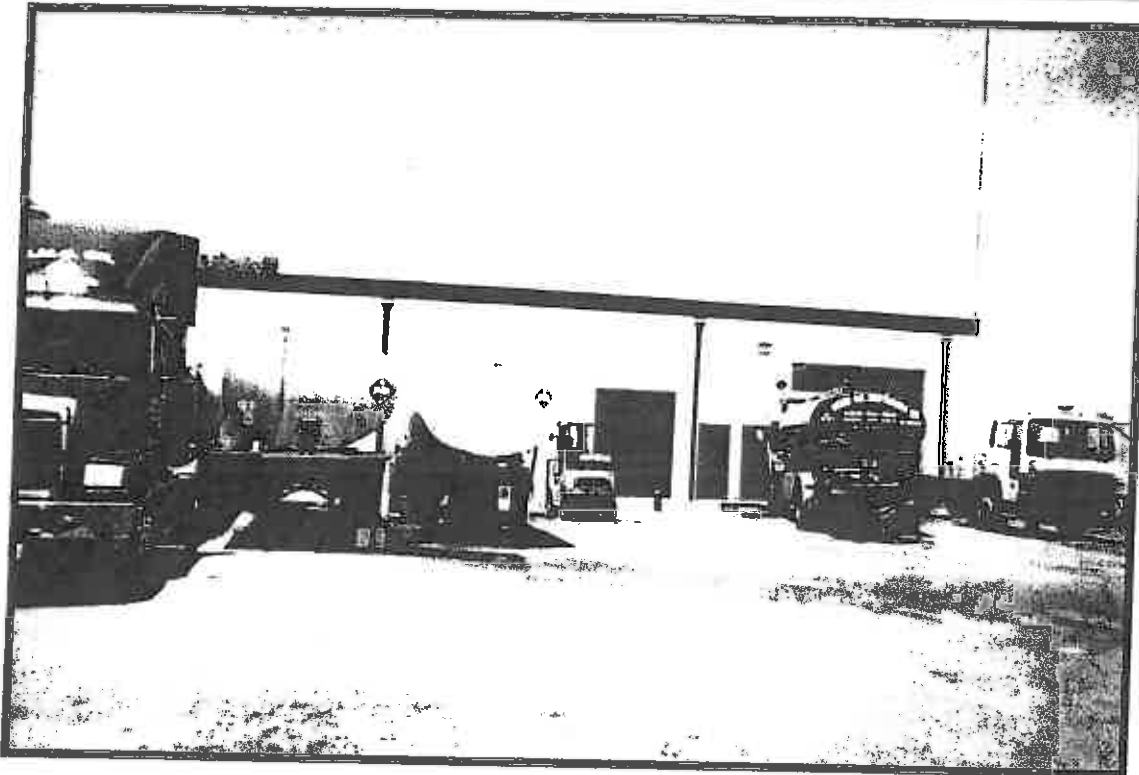
- I. Cleanup Contractor – Owner/Manager – EMC Oil Corp. - George Vincent - 305-345-1371 with on-site vacuum and pump trucks, other equipment and absorbent materials to cleanup spills.
- II. Additional Cleanup Contractor – Cliff Berry Inc. 305-638-2030; 954-763-3390.



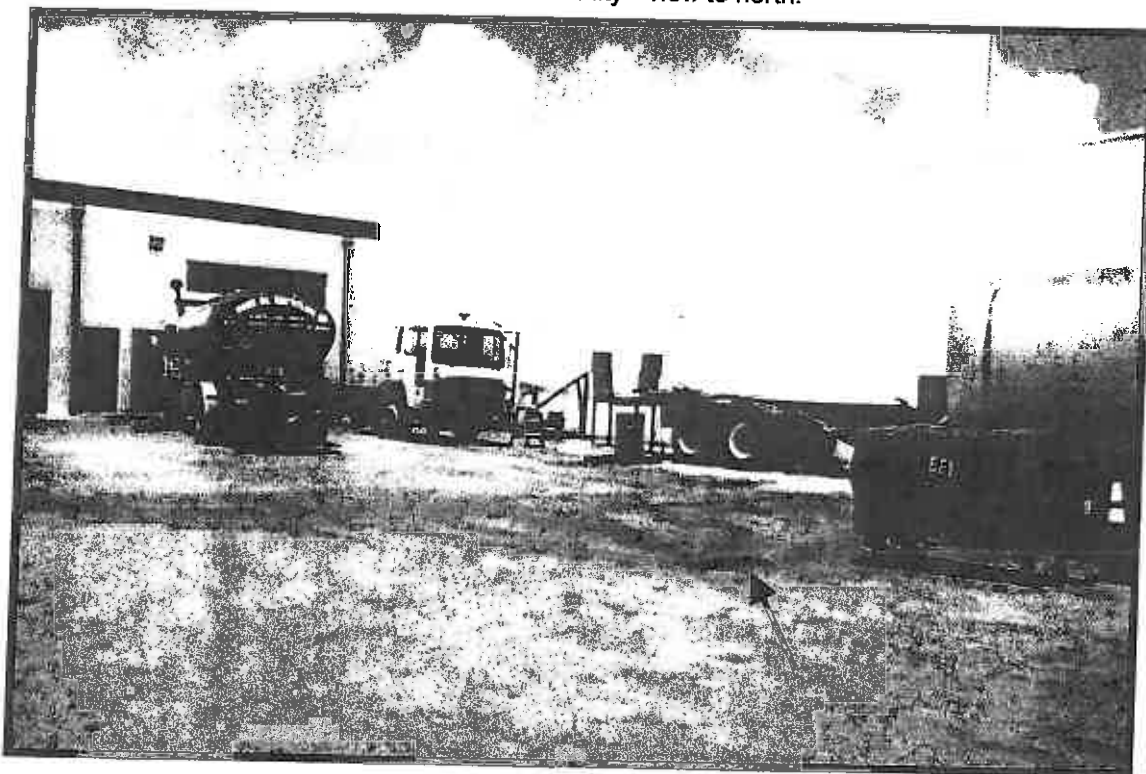
- III. 911 - for a major fire, explosion or other similar type situation.
- IV. National Response Center (NRC) 1-800-424-8802 for all releases covered under 40 CFR 110, such as cause a sheen upon or discoloration of the surface of the water or adjoining shorelines, etc. In addition, all releases of hazardous substances over CERCLA RQs must also be reported to the NRC.

### **SPILL PREVENTION AND RESPONSE PLAN (SPRP) – FL Statute 376.3**

Per Florida Statute 376.3, a Spill Prevention and Response Plan form provided by the Miami-Dade County Department of Environmental Protection (DERM) has been filled out and is contained in **Appendix C**.



**Photograph 5**  
Back of transfer facility - view to north.



**Photograph 6**  
Catch basin located on west side of back of facility (indicated by arrow) - view to northeast.

***EMC OIL CORPORATION***

**SITE PHOTOGRAPHS 5 & 6**  
EMC OIL CORP. - TRANSFER FACILITY  
8470 NW 68<sup>TH</sup> STREET  
MIAMI, FLORIDA

## FACILITY INSPECTION CHECKLIST

Instructions: This inspection record is for quarterly inspection to be carried out by a person who is familiar with the facility. If any responses require elaboration it should be done in the comments column.

Date of Inspection:

10/10/14

Name of Inspector:

Helys J. Abraham

|   | Yes | No | Comments |
|---|-----|----|----------|
| 1. Tank surface shows signs of corrosion        |     | NO |          |
| 2. The tank containment damaged                 |     | NO |          |
| 3. Level Gages are operational                  | YES |    |          |
| 4. Pipes, hoses etc. in working condition       | YES |    |          |
| 5. Stains observed on the ground/concrete       |     | NO |          |
| 6. The maintenance shop is in working condition | YES |    |          |
| 7. Drainage facility is working                 | YES |    |          |
| 8. The overall facility is clean                | YES |    |          |
| 9. Fencing, lights & security is maintained     | YES |    |          |
| 10. All vehicals/forklifts are maintained       | YES |    |          |

Remarks:

Signature of the inspector:



## FACILITY INSPECTION CHECKLIST

**Instructions:** This inspection record is for quarterly inspection to be carried out by a person who is familiar with the facility. If any responses require elaboration it should be done in the comments column.

**Date of Inspection:**

**Name of Inspector:**

|   | Yes | No | Comments |
|---|-----|----|----------|
| 1. Tank surface shows signs of corrosion        |     |    |          |
| 2. The tank containment damaged                 |     |    |          |
| 3. Level Gages are operational                  |     |    |          |
| 4. Pipes, hoses etc. in working condition       |     |    |          |
| 5. Stains observed on the ground/concrete       |     |    |          |
| 6. The maintenance shop is in working condition |     |    |          |
| 7. Drainage facility is working                 |     |    |          |
| 8. The overall facility is clean                |     |    |          |
| 9. Fencing, lights & security is maintained     |     |    |          |
| 10. All vehicals/forklifts are maintained       |     |    |          |

**Remarks:**

**Signature of the inspector:**

## FACILITY INSPECTION CHECKLIST

**Instructions:** This inspection record is for quarterly inspection to be carried out by a person who is familiar with the facility. If any responses require elaboration it should be done in the comments column.

Date of Inspection:

Name of Inspector:

|   | Yes | No | Comments |
|---|-----|----|----------|
| 1. Tank surface shows signs of corrosion        |     |    |          |
| 2. The tank containment damaged                 |     |    |          |
| 3. Level Gages are operational                  |     |    |          |
| 4. Pipes, hoses etc. in working condition       |     |    |          |
| 5. Stains observed on the ground/concrete       |     |    |          |
| 6. The maintenance shop is in working condition |     |    |          |
| 7. Drainage facility is working                 |     |    |          |
| 8. The overall facility is clean                |     |    |          |
| 9. Fencing, lights & security is maintained     |     |    |          |
| 10. All vehicals/forklifts are maintained       |     |    |          |

Remarks:

Signature of the inspector:

## **FACILITY INSPECTION CHECKLIST**

**Instructions:** This inspection record is for quarterly inspection to be carried out by a person who is familiar with the facility. If any responses require elaboration it should be done in the comments column.

**Date of Inspection:**

**Name of Inspector:**

|   | <b>Yes</b> | <b>No</b> | <b>Comments</b> |
|---|------------|-----------|-----------------|
| 1. Tank surface shows signs of corrosion        |            |           |                 |
| 2. The tank containment damaged                 |            |           |                 |
| 3. Level Gages are operational                  |            |           |                 |
| 4. Pipes, hoses etc. in working condition       |            |           |                 |
| 5. Stains observed on the ground/concrete       |            |           |                 |
| 6. The maintenance shop is in working condition |            |           |                 |
| 7. Drainage facility is working                 |            |           |                 |
| 8. The overall facility is clean                |            |           |                 |
| 9. Fencing, lights & security is maintained     |            |           |                 |
| 10. All vehicals/forklifts are maintained       |            |           |                 |

**Remarks:**

**Signature of the inspector:**

**APPENDIX A**  
**FACILITY OPERATIONS**

**APPENDIX B**  
**SPILL RESPONSE PLAN**



1. DO NOT PANIC, REMAIN CALM. Examine your own condition first. If you or anyone else is hurt or incapacitated, call for medical assistance.

2. If you are O.K., assess the extent of rupture or damage to the vehicle. CLOSE off any valves, hatches or hoses - this will help stop the oil flow.

3. Try to evaluate the degree of contamination to the environment, and estimate the number of gallons spilled.

4. If possible, PUMP LIQUID BACK INTO TANK, even if tank is ruptured. This will recycle the spilled oil to the truck rather than spreading on the ground.

5. Do your best to DIKE AHEAD OF THE SPILL to prevent oil from entering sewers and waterways.

#### IV. SPILL CONTAINMENT PROCEDURES

##### A. Spills on Water:

Call for BOOMS or SWEEPS in lengths appropriate to contain spill. Until help arrives, use TREE BRANCHES, EXTENSION HOSES, or ANY OBJECT THAT WILL FLOAT to prevent the oil from spreading. Skim oil into truck if possible. Determine the direction of the flow of water and set booms in front of flow to dam the oil. If notified help is not sufficient for the volume of spilled oil, call for tankers or vac trucks with skimmers.

##### B. Spills on Pavement:

Call for BOOMS, PADS and CLAY ABSORBENT (OIL DRY) amounts appropriate for spill. Use booms to contain spill by wiping them in a circular motion. Use truck pump with skimmer to remove oil. If spill is too large for booms: (a) call for sand, and contain spreading oil by using sand to circle the spill; (b) call for vac truck, skimmer and backhoe. Remove oil soaked sand, place on plastic tarps and cover sand with additional plastic or tarps to prevent rain from spreading oil.

##### C. Spills on Soil:

Call for EARTH-MOVING EQUIPMENT (loader, backhoe, dumptruck) and SAND. Determine direction of oil flow, and excavate an area for the oil to flow into. Around spill, contain oil with sand berm. Pump liquid oils into truck. Prepare a plastic tarp and sand berm on an area of clean ground. Remove oil-soaked soil to trap while making sure that soil is contained by tarp and berm. Have backhoe remove on foot below surface of spill, or until visually clean. Call for further assistance to remove soil for treatment.

D. Removing Oil-Soaked Material: Place all used absorbent material in 17-H-DOT 55 gallon drums. Management will have these picked up and legally disposed of at an appropriate facility.

Information on Discharge

INFORMATION ON DISCHARGE

(A) Reporting party

(B) Suspended Responsible Party

Name:  
Phone:  
Company:  
Position:  
Address:

Name:  
Phone:  
Company:  
Position:  
Address:

Organization Type  Private citizen  
 Public utility  
 State government

Private enterprise  
 Local government  
 Federal government

Were materials released? Y/N  
Calling for responsible party? Y/N

Incident Description

Source and cause of spill:

Date: \_\_\_\_\_ Time: \_\_\_\_\_  
Incident address/location: \_\_\_\_\_  
Nearest city: \_\_\_\_\_ Distance from city: \_\_\_\_\_  
Type of discharge: (tanker, vessel, storage tank)

MATERIALS

Quantity Released: \_\_\_\_\_ Type of Material: \_\_\_\_\_ Quantity on soil  
or in water: \_\_\_\_\_

REMEDIAL ACTION

Actions taken to correct incident:

IMPACT

No. of injuries: \_\_\_\_\_ No. of fatalities: \_\_\_\_\_ N O  
evacuated

Damage in dollars: \$ \_\_\_\_\_

CALLER INFORMATION

EPA State USCG Other:

## B. Facility's Spill Mitigation Procedures:

### Oil Spill Check Off List

#### If a spill is discovered:

1. Report spill to terminal office. The terminal office will notify FDEP.
2. Search for, locate and verify any spill.
3. If casualty related, stabilize the situation (vessel collision/fire/pipeline damage).
4. Immediately STOP, CONTROL or MITIGATE the spill and contain the pollutant.
5. Deploy/apply response equipment carried in tank truck. Call clean-up contractor (305) 242-0014, if needed.
6. Act as on-scene coordinator until relieved of that duty by:
  - (a) another authorized terminal employee
  - (b) on scene coordinator designed by terminal manager.
7. Verify with terminal manager/office that required notifications have been made.
8. While acting as on-scene coordinator, the driver has the authority to summon clean-up contractors. This will normally be accomplished through the terminal manager, unless he/she cannot be immediately reached.

#### C. Facility's response activities

##### 1. Leak at pump; hoses/couplings:

Shut down all power to unit by disengaging PTO. Contain any spillage that has occurred. Once contained, form a dike around the spill with absorbent boom, dry absorbent or sand. Then recover oil and absorbent with shovel or absorbent pads. After material is recovered store and dispose of properly.

##### 2. Over flow of tank:

Shut down all power to unit by disengaging PTO. Put absorbent boom completely around tanker. Proceed with steps outlined above in example 1.

3. Leaking Tank:

Shut down all transfer operations. Plug if possible. Try to collect any leaks with bucket or drip pan. Recover and spill as outlined in example 1. Call terminal manager for back up tanker.

4. Fire on vessel or tanker:

Shut down all pumping operations. Use dry chemical CO2 or foam to fight fuel or oil fires. DO NOT use water to fight fire. Call fire emergency 911.

Note: All transfer to tank trucks may be immediately shut down by disengaging PTO, located on driver's side floor in cab.

D. Sensitive Areas – See attached

1. Dade County, Florida
2. Monroe County
3. Broward County
4. Palm Beach County

E. Disposal Plan

All waterways and land areas will be tested to verify completion of clean-up operations. Water and soil samples will be sent to a certified laboratory.

Any spent products resulting from a spill or discharge will be tested at an EPA approval lab, unless spill or discharge is from virgin sources.

A. STL Miami  
Address: 10200 USA Today Way  
Miramar, Florida 33025  
Attn: John Manning  
1-954-431-4550 or 1-800-525-8550

Any spent products as a result of a spill or discharge (Absorbent) will be drummed and taken to an EPA approved disposal facility:

A. Perma Fix of Orlando  
Address: 10100 Rocket Blvd.  
Orlando, Florida 32824  
Attn: Mike Wood  
1-407-589-4441

All materials will be manifested and disposed of according to EPA guidelines.

**APPENDIX C**

**SPILL PREVENTION AND RESPONSE PLAN**

**SPILL PREVENTION AND RESPONSE PLAN  
(SPRP)**

New

Amendment

Effective date: 5/16/03

This plan is required of all sites with aboveground tanks with a capacity greater than 550 gallons that contain regulated substances, hazardous materials, or pollutants as defined in Florida Statute 376.3.

**FACILITY NAME:** EMC Oil Corporation

**FACILITY OWNER:** Maria E. Leon

**FACILITY OPERATOR** (person in charge): George L. Vincent

**FACILITY ADDRESS:** 8470 NW 68<sup>th</sup> Street, Miami, Florida 33166

**TELEPHONE NUMBER:** 305-477-7497 **24 HOUR NUMBER:** 305-345-1371

All aboveground tanks with a capacity greater than 550 gallons containing pollutants shall comply with Chapter 62-762, FAC, and all underground tanks with a capacity of 110 gallons or greater that contain regulated substances shall comply with Chapter 62-761, FAC. Please list in Table I all above (A) or underground (U) storage tanks at this facility and attach a scaled site sketch (8.5"x 11") indicating the location of all tanks and monitoring wells on site. See Figure 1, SPCC Plan.

**TABLE I**

| Tank No. | Installation Date | Tank Capacity<br>(Gallons) | Material of<br>Construction | A<br>U   | Product Stored  |
|----------|-------------------|----------------------------|-----------------------------|----------|-----------------|
| <u>1</u> | <u>1998</u>       | <u>8,000</u>               | <u>Steel</u>                | <u>A</u> | <u>Used Oil</u> |

If more lines are needed, please attach a separate page.

The aboveground tank(s) is/are provided with secondary containment by

- a) an FDEP approved doublewalled tank or  
  X   b) an impermeable diked area with a capacity of 110% of the volume of the largest tank within the diked area.

## **SPILL RESPONSE**

The above ground tank is secondarily contained in the diked area and the dike is large enough to hold 110% of the volume of the tank (calculations shown else where), any spilled product will be pumped out or removed with an absorbent material and disposed off properly. The facility to be maintained per applicable Miami-Dade County, regulations, Florida Administrative Code - Chapters 62-770, 62-761 and 62-762 regulations.

The facility will maintain adequate supplies of equipment/material to handle all spills. The list of equipment is included in Appendix A.

## **FACILITY INSPECTIONS**

The facility will be inspected by operators/management per schedule described in the SPCCP. A record of quarterly inspections will be maintained in the SPCCP.

## **CERTIFICATION**

I hereby certify and attest that the information contained herein is true, correct and complete to the best of my knowledge. Furthermore, I agree to maintain and operate this facility in compliance with all local, state and federal codes and in compliance with this plan

\_\_\_\_\_  
Ms. Maria E. Leon - Owner

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 2015

Seal

\_\_\_\_\_  
Notary Public

**CERTIFICATION OF SUBSTANTIAL HARM DETERMINATION FORM**

Facility Name: EMC Oil Corporation

Facility Address: 8470 N. W. 68th Street, Miami, FL 33166

- 1. Does the facility transfer over water to or from vessels and does the facility have a total oil storage capacity greater than or equal to 42,000 gallons? Yes \_\_\_ No X
- 2. Does the facility have a total oil storage capacity greater than or equal to 1 million gallons? Yes \_\_\_ No X.
- 3. Does the facility lack secondary containment that is sufficiently large to contain the capacity of the largest above ground oil storage tank plus sufficient free board for stormwater? Yes \_\_\_ No X.
- 4. Is the facility located at a distance such that a discharge from the facility could cause injury to fish and wildlife and sensitive environments? Yes X No \_\_\_
- 5. Has the facility reported or experienced an oil spill equal to or greater than 10,000 gallons? Yes \_\_\_ No X

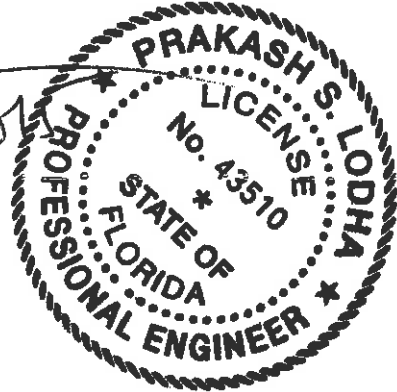
**CERTIFICATION**

I certify under penalty of law that I have personally examined and am familiar with the information provided in this document. I believe that the submitted information is true, accurate and complete.

Signature & date *PS Lodha*  
Prakash S. Lodha, P.E.

Seal  
11/13/2017

Title: Consulting Engineer





## SECONDARY CONTAINMENT VOLUME CALCULATIONS

The tank containment measures  $52' \times 48' = 2496$  sq. ft. The five empty tanks occupy  $3.14 \times 16 \times 5 = 251$  sq. ft. area. Therefore,  $2496 - 251 = 2245$  square feet of containment is available for oil.

The containment is 2.5' high, therefore  $2245 \times 2.5 = 5612.5$  cubic feet of volume = 41981 gallons of volume is available for secondary containment. The oil tank holds only 10,000 gallons, therefore, the secondary containment is sufficient for holding the contents of the oil storage tank plus the stormwater, approximately 30,000 gallons.

The containment will be pumped out after heavy rain fall.

## RECOMMENDED IN-HOUSE INSPECTION SCHEDULE

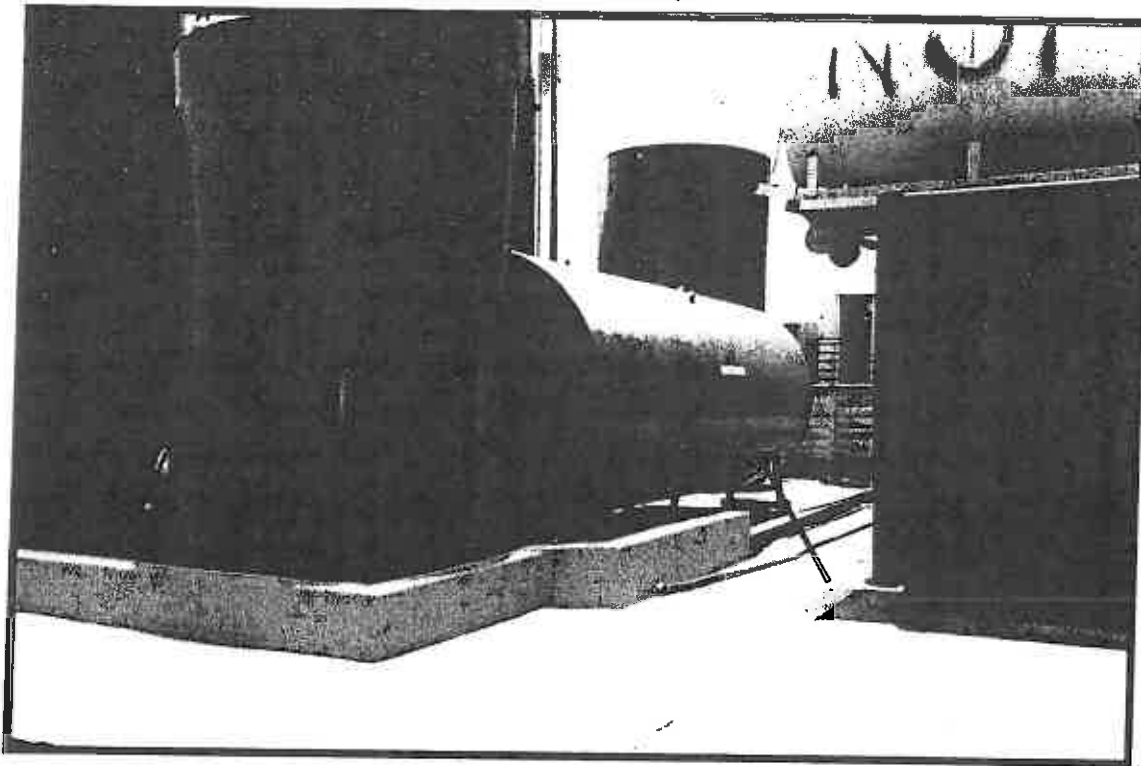
| INSPECTION/TEST<br>RECORD   | FREQUENCY   |
|---|-------------|
| Tank integrity - visual   | Monthly     |
| Tank supports and foundation - visual   | Daily       |
| Liquid sensing devices, interstitial<br>monitoring device or site glass, monitoring<br>wells - visual | Weekly      |
| Aboveground valves, piping, fittings -<br>visual  | Daily       |
| Corrective actions, maintenance   | As required |

**APPENDIX D**  
**SITE PHOTOGRAPHS**



**Photograph 1**

Subject Site – EMC Oil Corp. Transfer Facility - view to south-southeast.

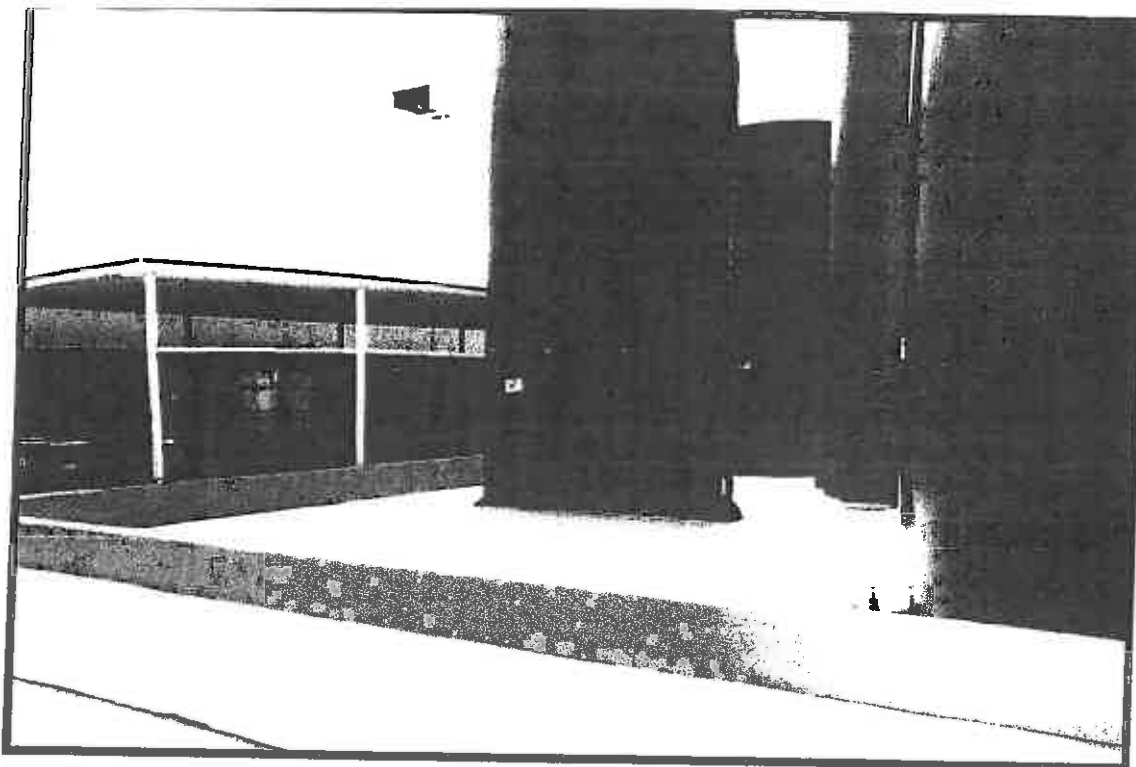


**Photograph 2**

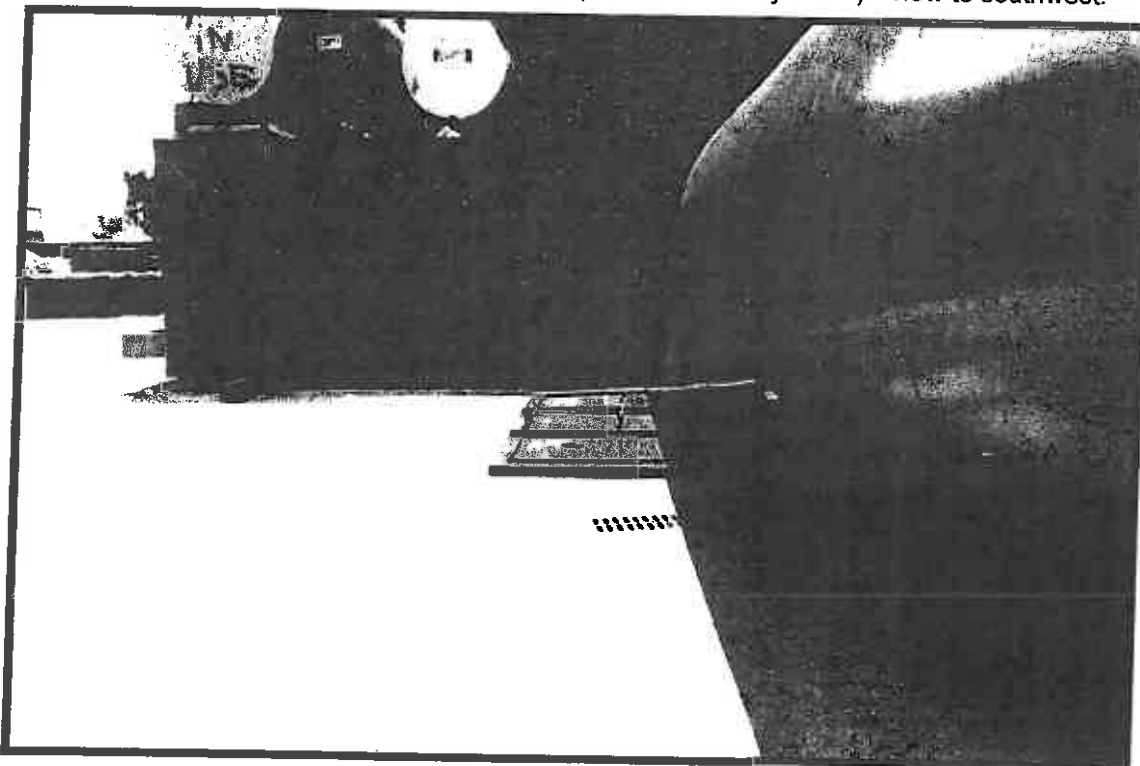
Secondary containment for 8,000 gallon AST (tank indicated by arrow) - view to southwest.

***EMC OIL CORPORATION***

**SITE PHOTOGRAPHS 1 & 2**  
EMC OIL CORP. – TRANSFER FACILITY  
8470 NW 68<sup>TH</sup> STREET  
MIAMI, FLORIDA



**Photograph 3**  
Secondary containment for 8,000 gallon AST (tank indicated by arrow) - view to southwest.



**Photograph 4**  
Catch basin located on west side of back of facility - view to south.

***EMC OIL CORPORATION***

**SITE PHOTOGRAPHS 3 & 4**  
EMC OIL CORP. - TRANSFER FACILITY  
8470 NW 68<sup>TH</sup> STREET  
MIAMI, FLORIDA

**E.M.C. OIL CORP. YEARLY USED OIL COLLECTOR TRAINING CLASS**

I confirm I have attended the training class listed above:

AND I have listened, read and, and understood the training, and I understand that as an employee, it is my responsibility to abide by E.M.C. Oil Corp.'s and state and federal rules regulation, policy and procedures, in accordance with said training.

Employee Signature



Print Name:

Alberto Quintero

Date:

1/2/2017

RECEIVED

JAN 22 2019

FL DEP  
WEST PALM BEACH


## E.M.C. OIL CORP. YEARLY USED OIL COLLECTOR TRAINING CLASS

I confirm I have attended the training class listed above:

AND I have listened, read and, and understood the training, and I understand that as an employee, it is my responsibility to abide by E.M.C. Oil Corp.'s and state and federal rules regulation, policy and procedures, in accordance with said training.

Employee Signature \_\_\_\_\_

Print Name: \_\_\_\_\_

  
Alberto Ouentero

Date: \_\_\_\_\_

1/15/2016

**E.M.C. OIL CORP. YEARLY USED OIL COLLECTOR TRAINING CLASS**

I confirm I have attended the training class listed above:

AND I have listened, read and, and understood the training, and I understand that as an employee, it is my responsibility to abide by E.M.C. Oil Corp.'s and state and federal rules regulation, policy and procedures, in accordance with said training.

Employee Signature \_\_\_\_\_

Print Name: \_\_\_\_\_



*Alberto Quintero*

Date: \_\_\_\_\_

*1/14/2019*



## E.M.C. OIL CORP. YEARLY USED OIL COLLECTOR TRAINING CLASS

I confirm I have attended the training class listed above:

AND I have listened, read and, and understood the training, and I understand that as an employee, it is my responsibility to abide by E.M.C. Oil Corp.'s and state and federal rules regulation, policy and procedures, in accordance with said training.

Employee Signature

*Rolando Roque*

Print Name: Rolando Roque

Date:

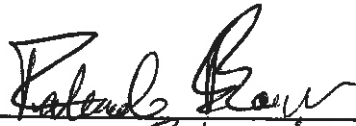
1/2/2019

## E.M.C. OIL CORP. YEARLY USED OIL COLLECTOR TRAINING CLASS

I confirm I have attended the training class listed above:

AND I have listened, read and, and understood the training, and I understand that as an employee, it is my responsibility to abide by E.M.C. Oil Corp.'s and state and federal rules regulation, policy and procedures, in accordance with said training.

Employee Signature



Print Name: Rokendo Roque

Date:

1/15/15

## E.M.C. OIL CORP. YEARLY USED OIL COLLECTOR TRAINING CLASS

I confirm I have attended the training class listed above:

AND I have listened, read and, and understood the training, and I understand that as an employee, it is my responsibility to abide by E.M.C. Oil Corp.'s and state and federal rules regulation, policy and procedures, in accordance with said training.

Employee Signature

*RRP*

Print Name:

*Rolando Roque*


Date:

*1/14/2019*

## E.M.C. OIL CORP. YEARLY USED OIL COLLECTOR TRAINING CLASS

I confirm I have attended the training class listed above:

AND I have listened, read and, and understood the training, and I understand that as an employee, it is my responsibility to abide by E.M.C. Oil Corp.'s and state and federal rules regulation, policy and procedures, in accordance with said training.

Employee Signature   
Print Name: Joel Patomino

Date: 11/2/2017

**E.M.C. OIL CORP. YEARLY USED OIL COLLECTOR TRAINING CLASS**

I confirm I have attended the training class listed above:

AND I have listened, read and, and understood the training, and I understand that as an employee, it is my responsibility to abide by E.M.C. Oil Corp.'s and state and federal rules regulation, policy and procedures, in accordance with said training.

Employee Signature

*[Handwritten Signature]*

Print Name:

*JOEL PALOMINO*

Date:

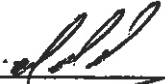
*1/15/2018*

## E.M.C. OIL CORP. YEARLY USED OIL COLLECTOR TRAINING CLASS

I confirm I have attended the training class listed above:

AND I have listened, read and, and understood the training, and I understand that as an employee, it is my responsibility to abide by E.M.C. Oil Corp.'s and state and federal rules regulation, policy and procedures, in accordance with said training.

Employee Signature



Print Name:

Scott McLean

Date:

1/14/2019

# E.M.C. OIL CORP. YEARLY USED OIL COLLECTOR TRAINING CLASS

I confirm I have attended the training class listed above:

AND I have listened, read and, and understood the training, and I understand that as an employee, it is my responsibility to abide by E.M.C. Oil Corp.'s and state and federal rules regulation, policy and procedures, in accordance with said training.

Employee Signature



Print Name: Donald Delgado

Date:

1/15/2018

**E.M.C. OIL CORP. YEARLY USED OIL COLLECTOR TRAINING CLASS**

I confirm I have attended the training class listed above:

AND I have listened, read and, and understood the training, and I understand that as an employee, it is my responsibility to abide by E.M.C. Oil Corp.'s and state and federal rules regulation, policy and procedures, in accordance with said training.

Employee Signature Nivaldo Delgado  
Print Name: Nivaldo Delgado

Date: 1/14/2019



NON-HAZARDOUS  
WASTE MANIFEST

1. Generator's Name and Method of Regulation  
NONREGULATED

2. Page 1 of

3. Emergency Response Code  
1000

4. Waste Tracking Number  
174768

5. Generator's Name and Method of Regulation  
E.M.O. OIL CORP.  
8470 N.W. 68 STREET, MIAMI FL 33166  
305 477-7497

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

Generator's Phone:

6. Transporter 1 Company Name  
E.M.O. OIL CORP.

U.S. EPA ID Number

FLR000000166

7. Transporter 2 Company Name

NS Bulk/Savage Services

U.S. EPA ID Number

8. Designated Facility Name and Address

MOBILE OIL  
5017 CLYDE RHYNE DRIVE SANFORD, NC 27330

U.S. EPA ID Number

Facility's Phone:

919-774-8180

NCDA86172476

9. Waste Shipping Name and Description

10. Containers

No.

Type

11. Total Quantity

12. Unit Wt./Vol.

1. USED OIL GALLON

01

TK

9704

gal

2. RECEIVED

3. JAN 22 2019

4. FL DEP  
WEST PALM BEACH

13. Special Handling Instructions and Additional Information

GATX 90191

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

Generator's/Officer's Printed/Typed Name

Signature

Month Day Year

11/20/18

15. International Shipments

Import to U.S.

Export from U.S.

Port of origin

Date leaving U.S.

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

11/20/18

Transporter 2 Printed/Typed Name

Signature

Month Day Year

11/20/18

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

174768

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

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

Printed/Typed Name

Signature

Month Day Year

MARK BIAQUINTO

Mark Biaquinto

10/11/18

Dade  
(305) 477-7497

EMC Oil Corporation  
P.O. Box 520882 - Miami, FL 33152

Toll Free  
(800) 344-8688



**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



GET CG INFO

|   |  |  |   |   |                  |
|---|--|--|---|---|------------------|
| 1. Generator's Name and Mailing Address<br><b>USCG AIR STATION</b><br>14750 NW 44TH COURT, OPALOCKA FL 33054  |  | PO#<br><b>7650</b>   | A. Manifest Document #<br><b>174843</b>                                 |   |                  |
| 2. Generator's Phone ( <b>305</b> ) <b>240-0630</b>   |  | County of Origin ( <b>DADE</b> )   | B. Generator's ID #'s<br>EPA _____ STATE _____                          |   |                  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>                           |   |                  |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><b>2470 n.w 68st</b><br><b>miami, FL 33166</b>   |  | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>                            |   |                  |
|   |  |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |   |                  |
|   |  |  | F. Facility's Phone   |   |                  |
| 7. Waste shipping & name description  |  | 8. Containers  | 9. Total  | 10. Unit  | 11. Price        |
| HM  |  | No. Type   | Quantity  | Wt./Vol   | G                |
| SERVICE CHARGE  |  |  |   |   | CHARGES          |
|   |  |  |   |   |                  |
| USED OIL GALLON   |  |  | 200 gal   |   | 150.00 150.00    |
| OILY WATER  |  |  |   |   | 0.48 96.00       |
| OILY WATER (MIX F)  |  |  | 600 gal   |   | 0.48 288.00      |
| H. Additional Descriptions for Materials Listed Above<br><b>PER ERNEST- APPROX 600 G</b><br><b>200 OIL</b><br><b>CONTACT CABRERA RODRIGUEZ</b>  |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>\$ 534.00</b><br>Please pay on this invoice within 15 days. Thank you. |                  |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |   |   |                  |
| Printed Typed Name<br><b>Ernest Cabrera Rodriguez</b>   |  | Signature<br><i>[Signature]</i>  |   | Month<br><b>12</b>  | Day<br><b>17</b> |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  | Signature<br><i>[Signature]</i>  |   | Month<br><b>12</b>  | Day<br><b>17</b> |
| Printed Typed Name<br><b>Ernest Cabrera Rodriguez</b>   |  | Signature<br><i>[Signature]</i>  |   | Month<br><b>12</b>  | Day<br><b>17</b> |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |   |   |                  |
| Printed Typed Name<br><b>Ernest Cabrera Rodriguez</b>   |  | Signature<br><i>[Signature]</i>  |   | Month<br><b>12</b>  | Day<br><b>17</b> |
| Below 1000 ppm  |  | Halogen Levels   |   | Above 1000 ppm  |                  |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**

Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**

Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

**Dade**  
**(305) 477-7497**

**EMC Oil Corporation**  
P.O. Box 520882 - Miami, FL 33152

**Toll Free**  
**(800) 344-8688**



**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |   |   |  |
|---|--|---|---|--|
| 1. Generator's Name and Mailing Address<br><b>TIRE STATION</b><br>19355 NW 2ND AVE, MIAMI GARDENS FL 33169  |  | PO# <b>7831</b>   | A. Manifest Document #<br><b>174851</b>               |  |
| 2. Generator's Phone ( 786 ) <b>657-2682</b>  |  | County of Origin ( <b>DADE</b> )  | B. Generator's ID #'s<br>EPA _____ STATE _____        |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>  | C. State Transporter's ID <b>FLR000000166</b>         |  |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><b>8470 NW 68 St</b><br><b>Miami, FL 33166</b>   |  | 6.  | D. Transporter's Phone ( <b>305</b> ) <b>477-7497</b> |  |
|   |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>   |   | F. Facility's Phone  |
| 7. Waste shipping & name description  |  | 8. Containers<br>No. Type   | 9. Total Quantity                                     | 10. Unit Wt/Vol  |
| HM  |  | 11. Price   |   | G<br>CHARGES   |
| <input checked="" type="checkbox"/> USED OIL GALLON   |  |   | 150   | 0.00   |
| <input checked="" type="checkbox"/> RADIATOR FLUID  |  | 1   | 5555  | 0.00   |
| <input checked="" type="checkbox"/> NON REG USED OIL FILTERS  |  | 1   | 5555  | 0.00   |
| <input checked="" type="checkbox"/> Only Waste  |  | 1   | 5555  |  |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><br>Please pay on this invoice within 15 days.<br>Thank you. |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |   |   |  |
| Printed Typed Name<br><b>Daniel Orlhan</b>  |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12/17/18</b>  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |   |   |  |
| Printed Typed Name<br><b>CHARLIE LEON</b>   |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12/17/18</b>  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |   |   |  |
| Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12/17/18</b>  |
| <input checked="" type="checkbox"/> Below 1000 ppm)   |  | Halogen Levels  |   | Above 1000 ppm   |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**  
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**CAN MIX WITH USED OIL**  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

**Dade**  
**(305) 477-7497**

**EMC Oil Corporation**  
P.O. Box 520882 - Miami, FL 33152

**Toll Free**  
**(800) 344-8688**



**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |   |   |                          |                     |
|---|--|--|---|---|--------------------------|---------------------|
| 1. Generator's Name and Mailing Address<br><b>E.M.C. OIL CORP.</b><br><b>8470 N.W. 68 STREET, MIAMI FL 33166</b>  |  | PO#<br><b>1000-001</b>   | A. Manifest Document #<br><b>174883</b>                                 |   |                          |                     |
| 2. Generator's Phone ( <b>305</b> ) <b>477-7497</b>   |  | County of Origin ( <b>DADE</b> )   | B. Generator's ID #'s<br>EPA <b>FL00000166</b> STATE <b>FL</b>          |   |                          |                     |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>                           |   |                          |                     |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><b>miami, FL 33166</b>   |  | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>                            |   |                          |                     |
|   |  |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |   |                          |                     |
|   |  |  | F. Facility's Phone   |   |                          |                     |
| 7. Waste shipping & name description<br><b>HM</b><br><b>USED OIL GALLON</b>   |  | 8. Containers<br>No. Type  | 9. Total Quantity<br><b>300</b>   | 10. Unit<br>WT./Vol<br><b>G</b>   | 11. Price<br><b>0.00</b> | G<br><b>CHARGES</b> |
| H. Additional Descriptions for Materials Listed Above<br><b>BAILER# 2</b>   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>N/C</b><br>Please pay on this invoice within 15 days. Thank you. |                          |                     |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |   |   |                          |                     |
| Printed Typed Name<br><b>Grace Clemons</b>  |  | Signature<br><i>Grace Clemons</i>  |   | Month Day Year<br><b>12/7/18</b>  |                          |                     |
| 13. Transporter 1, Acknowledgment of Receipt of Materials   |  |  |   |   |                          |                     |
| Printed Typed Name<br><b>NIVALDO DELGADO</b>  |  | Signature<br><i>Nivaldo</i>  |   | Month Day Year<br><b>12/17/18</b>   |                          |                     |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |   |   |                          |                     |
| Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature<br><i>Evelyn Leon</i>  |   | Month Day Year<br><b>12/17/18</b>   |                          |                     |
| Below 1000 ppm  |  | Halogen Levels   |   | Above 1000 ppm  |                          |                     |

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



PMGMU108265

|   |  |  |  |   |                            |         |
|---|--|--|--|---|----------------------------|---------|
| 1. Generator's Name and Mailing Address<br>PORT OF MIAMI CRANE MGMT.<br>2886 PORT BLVD., MIAMI FL 33132   |  | PO#<br>1986  | A. Manifest Document #<br>174695                   |   |                            |         |
| 2. Generator's Phone (305) 381-6250   |  | County of Origin (DADE)  | B. Generator's ID #'s<br>EPA _____ STATE _____     |   |                            |         |
| 3. Transporter 1 Company Name<br>EMC Oil Corporation<br>8470 N.W. 68th Street, Miami, FL 33166  |  | 4. US EPA ID Number<br>FLR000000166  | C. State Transporter's ID FLR000000166             |   |                            |         |
| 5. Designated Facility Name and Site Address<br>E.M.C. OIL CORP.<br>8470 NW 68th<br>Miami, FL 33166   |  | 6.   | D. Transporter's Phone (305) 477-7497              |   |                            |         |
|   |  |  | E. Dade County ID SW-01124<br>LW-00227<br>LW-00233 |   |                            |         |
|   |  |  | F. Facility's Phone                                |   |                            |         |
| GENERATOR   | 7. Waste shipping & name description<br>HM   | 8. Containers<br>No. Type  | 9. Total Quantity                                  | 10. Unit Wt./Vol  | 11. Price                  | G       |
|   | USED OIL GALLON  |  | 250 gal  |   | 0.25                       | CHARGES |
|   | OILY WATER   |  | 55 gal   |   | 0.65                       |         |
|   | RADIATOR FLUID   |  |  |   | 0.65                       |         |
|   | NON REG USED OIL FILTERS   |  |  |   | 45.00                      |         |
|   | NON REG MAT OILY RAGS  |  |  |   | 175.00                     |         |
|   | NON REG OIL DRY  |  |  |   | 175.00                     |         |
|   |  |  |  |   |                            |         |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br>\$98.25<br>Please pay on this invoice within 15 days.<br>Thank you. |                            |         |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |   |                            |         |
| TRANSPORT   | Printed Typed Name<br>WILDO TRAVES   |  | Signature  |   | Month Day Year<br>12/17/18 |         |
|   | 13. Transporter 1 Acknowledgment of Receipt of Materials   |  | Signature  |   | Month Day Year<br>12/17/18 |         |
|   | Printed Typed Name<br>GEORGE L. VICENTE  |  | Signature  |   | Month Day Year<br>12/17/18 |         |
|   | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |  | Signature  |   | Month Day Year<br>12/17/18 |         |
| FACILITY  | Printed Typed Name<br>Evelyn Leon  |  | Signature  |   | Month Day Year<br>12/17/18 |         |
|   | Below 1000 ppm   | Halogen Levels   | Above 1000 ppm                                     |   |                            |         |

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



GET POI

|   |  |   |   |   |                                   |                |
|---|--|---|---|---|-----------------------------------|----------------|
| 1. Generator's Name and Mailing Address<br><b>ADONEL CONCRETE</b><br>2101 NW 110 AVE, DORAL FL 33172  |  | PO#<br><b>6001-001</b>  | A. Manifest Document #<br><b>174832</b>                                 |   |                                   |                |
| 2. Generator's Phone ( <b>305</b> ) <b>669-0611</b>   |  | County of Origin ( <b>DADE</b> )  | B. Generator's ID #'s <b>FLR000218578</b><br>EPA _____ STATE <b>FL</b>  |   |                                   |                |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>  | C. State Transporter's ID <b>FLR000000166</b>                           |   |                                   |                |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP. - 8470 NW 68 St</b><br><b>Miami, FL 33166</b>   |  | 6.  | D. Transporter's Phone <b>(305) 477-7497</b>                            |   |                                   |                |
|   |  |   | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |   |                                   |                |
|   |  |   | F. Facility's Phone   |   |                                   |                |
| GENERATOR   | 7. Waste shipping & name description   | B. Containers   | 9. Total Quantity   | 10. Unit Wt./Vol  | 11. Price                         | G              |
|   | <b>HM</b>  | No. Type  |   |   |                                   | <b>CHARGES</b> |
|   | <b>USED OIL GALLON</b>   |   | <b>500</b>  | <b>gal</b>  | <b>-0.25</b>                      |                |
|   | <b>OILY WATER</b>  |   | <b>100</b>  | <b>gal</b>  | <b>0.00</b>                       |                |
|   | <b>NON REG USED OIL FILTERS</b>  |   |   |   | <b>0.00</b>                       |                |
|   | <b>NON REG MAT OILY RAGS</b>   |   |   |   | <b>125.00</b>                     |                |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>-\$125.00</b><br>Please pay on this invoice within 15 days. Thank you. |                                   |                |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |   |   |   |                                   |                |
| TRANSPORT   | Printed Typed Name<br><b>AMV Perceh</b>  |   | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12/19/18</b> |                |
|   | 13. Transporter 1 Acknowledgment of Receipt of Materials   |   | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12/17/18</b> |                |
|   | Printed Typed Name<br><b>GEORGE L. VICENTE</b>   |   | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12/17/18</b> |                |
| FACILITY  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |   |   |   |                                   |                |
|   | Printed Typed Name<br><b>Ervelyn Leon</b>  |   | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12/17/18</b> |                |
| Below 1000 ppm  |  | Halogen Levels  |   | Above 1000 ppm  |                                   |                |

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(800) 344-8688



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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |  |
|---|--|--|--|
| 1. Generator's Name and Mailing Address<br><i>DONALD HUNDAI</i>   |  | A. Manifest Document # <b>156347</b>                                       |  |
| 2. Generator's Phone ( )<br><i>102 85 NW 12 ST</i>  |  | B. Generator's ID #'s<br>EPA _____ STATE _____                             |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>                                 |  |
| 5. Designated Facility Name and Site Address<br><i>EMC OIL CORP</i><br><i>8470 NW 68</i><br><i>MIAMI, FL 33166</i>  |  | 6. Dade County ID<br><b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00239</b> |  |
| 7. Waste shipping & name description  |  | 8. Containers  |  |
| HM  |  | No. Type   |  |
| 9. Total Quantity   |  | 10. Unit Wt./Vol   |  |
| 11. Price   |  | G CHARGES  |  |
| <input checked="" type="checkbox"/> USED OIL<br>USED OIL FILTERS<br>OILY WATER<br>RADIATOR FLUID<br>NON REG. ABSORBENT MATERIAL<br>OTHER: SPECIFY   |  | 250<br>(Large handwritten mark)  |  |
| H. Additional Descriptions for Materials Listed Above   |  | I. Total Due <b>(-\$1000)</b>  |  |
| IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof.  |  | Please pay on this invoice within 15 days. Thank you.                      |  |
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| Printed Typed Name<br><i>Stacey A.</i>  |  | Signature<br><i>[Signature]</i>  |  |
| Month Day Year<br><i>12 17 18</i>   |  |  |  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |  |
| Printed Typed Name<br><i>Chal. Lois</i>   |  | Signature<br><i>[Signature]</i>  |  |
| Month Day Year<br><i>12 17 18</i>   |  |  |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |  |
| Printed Typed Name<br><i>Terelyn Leon</i>   |  | Signature<br><i>[Signature]</i>  |  |
| Month Day Year<br><i>12 17 18</i>   |  |  |  |
| <input checked="" type="checkbox"/> Below 1000 ppm  |  | Halogen Levels Above 1000 ppm  |  |

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*Handwritten:* 3124-001

**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|  |  |   |                   |
|--|--|---|-------------------|
| 1. Generator's Name and Mailing Address<br><i>Downrite - P.O. Box 142415 SW 143rd St</i>   |  | A. Manifest Document # 156348   |                   |
| 2. Generator's Phone (305) 232-2340 County of Origin (Dade)  |  | B. Generator's ID #<br>EPA STATE 3-186                                |                   |
| 3. Transporter 1 Company Name<br>EMC Oil Corporation<br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br>FLR000000166                                   |                   |
| 5. Designated Facility Name and Site Address<br>EMC OIL CORP<br>8470 NW 68th St<br>Miami, 33166  |  | C. State Transporter's ID FLR000000166                                |                   |
| 6. Dade County ID SW-01124<br>LW-00227<br>LW-00233   |  | D. Transporter's Phone (305) 477-7497                                 |                   |
| 7. Waste shipping & name description<br>HM   |  | F. Facility's Phone   |                   |
| 8. Containers<br>No. Type  |  | 9. Total Quantity<br>380  | 10. Unit Wt./Vol. |
| 11. Price<br>CHARGES   |  | G   |                   |
| <input checked="" type="checkbox"/> USED OIL<br><input type="checkbox"/> USED OIL FILTERS<br><input type="checkbox"/> OILY WATER<br><input type="checkbox"/> RADIATOR FLUID<br><input type="checkbox"/> NON REG. ABSORBENT MATERIAL<br><input type="checkbox"/> OTHER: SPECIFY   |  | <input checked="" type="checkbox"/> 12/C                              |                   |
| H. Additional Descriptions for Materials Listed Above  |  | I. Total Due<br>Please pay on this invoice within 15 days. Thank you. |                   |
| IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof.   |  |   |                   |
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| Printed Typed Name<br>Charles M. Pearson   |  | Signature<br><i>[Signature]</i>                                       |                   |
| Month Day Year   |  | Month Day Year  |                   |
| 13. Transporter 1 Acknowledgment of Receipt of Materials   |  |   |                   |
| Printed Typed Name<br>Chal. Leo  |  | Signature<br><i>[Signature]</i>                                       |                   |
| Month Day Year<br>12/17/18   |  | Month Day Year  |                   |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.   |  |   |                   |
| Printed Typed Name<br>Evelyn Leon  |  | Signature<br><i>[Signature]</i>                                       |                   |
| Month Day Year<br>12/17/18   |  | Month Day Year  |                   |
| Below 1000 ppm   |  | Above 1000 ppm  |                   |
| Halogen Levels   |  | Halogen Levels  |                   |

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |  |  |  |   |  |
|---|--|--|--|--|--|---|--|
| 1. Generator's Name and Mailing Address<br><i>1217</i><br>DITTA LEE, JALON<br>1705 14th St SE<br>305 710-3854   |  | 2. Generator's Phone (305) 710-3854  |  | 3. County of Origin (Dade)                   |  | A. Manifest Document # 156349                         |  |
| 3. Transporter 1 Company Name<br>EMC Oil Corporation<br>8470 N.W. 68th Street, Miami, FL 33166  |  | 4. US EPA ID Number<br>FLR000000166  |  | 5. Designated Facility Name and Site Address |  | 6. EPA STATE ID # 33125                               |  |
| 7. Waste shipping & name description  |  | 8. Containers  |  | 9. Total Quantity                            |  | 10. Unit Wt./Vol                                      |  |
| HM  |  | No. Type   |  | 11. Price                                    |  | G CHARGES   |  |
| + USED OIL  |  |  |  | 360  |  |   |  |
| USED OIL FILTERS  |  |  |  |  |  |   |  |
| OILY WATER  |  |  |  |  |  |   |  |
| RADIATOR FLUID  |  |  |  |  |  |   |  |
| NON REG. ABSORBENT MATERIAL   |  |  |  |  |  |   |  |
| OTHER: SPECIFY  |  |  |  |  |  |   |  |
| H. Additional Descriptions for Materials Listed Above<br><i>W. Paid</i>   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due (\$720)                         |  | Please pay on this invoice within 15 days. Thank you. |  |
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| Printed Typed Name<br><i>Luis Dominguez</i>   |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br><i>12/17/18</i>            |  |   |  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |  |  |  |   |  |
| Printed Typed Name<br><i>Chale Liao</i>   |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br><i>12/17/18</i>            |  |   |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |  |  |  |   |  |
| Printed Typed Name<br><i>Evelyn Leon</i>  |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br><i>12/17/18</i>            |  |   |  |
| Below 1000 ppm<br><i>60</i>   |  | Halogen Levels   |  | Above 1000 ppm                               |  |   |  |

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**Toll Free**  
**(800) 344-8688**



**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |   |   |             |              |
|---|--|--|---|---|-------------|--------------|
| 1. Generator's Name and Mailing Address<br><b>LARGO HONDA OF FLORIDA CITY</b><br><b>554 N.E. 1ST AVENUE, FLORIDA CITY FL 33034</b>  |  | PO#<br><b>4087</b>   | A. Manifest Document #<br><b>174827</b>                                 |   |             |              |
| 2. Generator's Phone ( <b>786</b> ) <b>545-1200</b>   |  | County of Origin ( <b>DADE</b> )   | B. Generator's ID #'s<br>EPA _____ STATE _____                          |   |             |              |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>                           |   |             |              |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP</b><br><b>8470 NW 68 St</b><br><b>Miami, 33166</b>   |  | 6. _____   | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |   |             |              |
| 7. Waste shipping & name description<br><b>HM</b>   |  | 8. Containers<br>No. Type  | 9. Total<br>Quantity  | 10. Unit<br>Wt./Vol   | 11. Price   | G<br>CHARGES |
| <b>USED OIL GALLON</b>  |  |  | <b>310</b>  | <b>Gal</b>  | <b>0.00</b> |              |
| <b>RADIATOR FLUID</b>   |  |  |   |   | <b>0.00</b> |              |
| <b>NON REG USED OIL FILTERS</b>   |  | <b>1</b>   | <b>IN</b>   | <b>SS</b>   | <b>0.00</b> |              |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>nic</b><br>Please pay on this invoice within 15 days. Thank you. |             |              |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |   |   |             |              |
| Printed Typed Name<br><b>Jeff Olson</b>   |  | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>12/18/18</b>   |             |              |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  | Printed Typed Name<br><b>GEORGE L. VICENTE</b>   |   | Signature<br><i>[Signature]</i>   |             |              |
| 14. Facility Owner or Operator. Certification of receipt of waste material covered by this manifest.  |  | Printed Typed Name<br><b>Ervelyn Leon</b>  |   | Signature<br><i>[Signature]</i>   |             |              |
| Below 1000 ppm  |  | Halogen Levels   |   | Above 1000 ppm  |             |              |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**  
Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

**Dade**  
**(305) 477-7497**

**EMC Oil Corporation**  
P.O. Box 520882 - Miami, FL 33152

**Toll Free**  
**(800) 344-8688**



**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



EMAIL INV. TO YOHAN

|   |  |   |   |  |
|---|--|---|---|--|
| 1. Generator's Name and Mailing Address<br><b>IAG ENGINE CENTER</b><br><b>6929 NW 46 STREET, MIAMI FL 33166</b>   |  | PO#<br><b>6249</b>  | A. Manifest Document #<br><b>174859</b> |  |
| 2. Generator's Phone ( <b>305</b> ) <b>591-0643</b>   |  | County of Origin ( <b>DADE</b> )  |   | B. Generator's ID #'s<br>EPA _____ STATE _____   |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>  |   | C. State Transporter's ID-FLR000000166   |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL</b><br><b>8470 NW 68 ST</b><br><b>MIAMI, FL 33166</b>  |  | 6.  |   | D. Transporter's Phone <b>(305) 477-7497</b>   |
| 7. Waste shipping & name description  |  | 8. Containers<br>No. Type   |   | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>                  |
| HM  |  | 9. Total Quantity   |   | F. Facility's Phone  |
| 10. Unit Wt./Vol.   |  | 11. Price   |   | G. CHARGES   |
| <input checked="" type="checkbox"/> N.D.T. MIXED WATERNON-REGULATED<br><input checked="" type="checkbox"/> USED OIL GALLON<br>EMPTY CANS<br><input checked="" type="checkbox"/> USED OIL DRUM<br><b>o.i.y BAGS</b>  |  | <b>185</b><br><b>102</b><br><b>255110</b>   |   | <b>0.75</b><br><b>0.35</b><br><b>75.00</b><br><b>50.00</b>                               |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>\$524.45</b><br>Please pay on this invoice within 15 days. Thank you. |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |   |   |  |
| Printed Typed Name<br><b>Juan C. Espinosa</b>   |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12 18 15</b>  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |   |   |  |
| Printed Typed Name<br><b>CHARLIE LEON</b>   |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12 18 18</b>  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |   |   |  |
| Printed Typed Name<br><b>Erilyn Leon</b>  |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12 18 18</b>  |
| <input checked="" type="checkbox"/> Below 1000 ppm<br>Halogen Levels  |  | <input type="checkbox"/> Above 1000 ppm   |   |  |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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**CAN MIX WITH USED OIL**  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



EMAIL INVOICE

|   |  |  |   |
|---|--|--|---|
| 1. Generator's Name and Mailing Address<br><b>TRUCK MAX HOMESTEAD</b><br><b>29120 SOUTH FEDERAL HWY, HOMESTEAD FL 330</b> |  | PO#<br><b>6903-002</b>                     | A. Manifest Document #<br><b>174826</b>                                 |
| 2. Generator's Phone ( <b>305</b> ) <b>777-9070</b>   |  | County of Origin ( <b>DADE</b> )           | B. Generator's ID #'s<br>EPA _____ STATE _____                          |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>              |  | 4. US EPA ID Number<br><b>FLR000000166</b> | C. State Transporter's ID <b>FLR000000166</b>                           |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><b>8470 NW 68 St</b><br><b>Miami, FL 33166</b> |  | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>                            |
|   |  |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |
|   |  |  | F. Facility's Phone   |

| 7. Waste shipping & name description | 8. Containers |      | 9. Total Quantity | 10. Unit Wt./Vol | 11. Price | G       |
|--------------------------------------|---------------|------|-------------------|------------------|-----------|---------|
|                                      | No.           | Type |                   |                  |           |         |
| HM<br>USED OIL GALLON                |               |      | 55                | gal              | -0.25     | CHARGES |
| OILY WATER                           |               |      | 100               | gal              | 0.00      |         |
| RADIATOR FLUID                       |               |      |                   |                  | 0.00      |         |
| NON REG USED OIL FILTERS             |               |      |                   |                  | 0.00      |         |
| NON REG MAT OILY RAGS                |               |      |                   |                  | 150.00    |         |
| NON REG OIL DRY                      |               |      |                   |                  | 150.00    |         |

GENERATOR

|   |  |  |
|---|--|--|
| H. Additional Descriptions for Materials Listed Above | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. | I. Total Due<br><b>(-\$13.75)</b><br>Please pay on this invoice within 15 days. Thank you. |
|---|--|--|

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|   |                                 |                                   |
|---|---------------------------------|-----------------------------------|
| Printed Typed Name<br><b>MIGUEL LUZARDO</b> | Signature<br><i>[Signature]</i> | Month Day Year<br><b>12/18/18</b> |
|---|---------------------------------|-----------------------------------|

|  |                                 |                                   |
|--|---------------------------------|-----------------------------------|
| 13. Transporter 1 Acknowledgment of Receipt of Materials |                                 |                                   |
| Printed Typed Name<br><b>GEORGE L. VICENTE</b>           | Signature<br><i>[Signature]</i> | Month Day Year<br><b>12/18/18</b> |

|  |                                 |                                   |
|--|---------------------------------|-----------------------------------|
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |                                 |                                   |
| Printed Typed Name<br><b>Isabelyn Leon</b>   | Signature<br><i>[Signature]</i> | Month Day Year<br><b>12/18/18</b> |

|                |                |                |
|----------------|----------------|----------------|
| Below 1000 ppm | Halogen Levels | Above 1000 ppm |
|----------------|----------------|----------------|

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**  
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These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |  |  |  |
|---|--|--|--|--|--|
| 1. Generator's Name and Mailing Address<br><b>ASIA FIRESTONE</b><br>12520 SW 8 ST, MIAMI FL 33184   |  | PO# <b>8078-001</b>  |  | A. Manifest Document # <b>174869</b>   |  |
| 2. Generator's Phone ( <b>305</b> ) <b>220-9004</b>   |  | County of Origin ( <b>DADE</b> )   |  | B. Generator's ID #'s<br>EPA _____ STATE _____                                     |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>   |  | C. State Transporter's ID <b>FLR000000166</b>                                      |  |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP.</b><br><b>8470 NW 68 ST</b><br><b>MIAMI, 33166</b>   |  | 6.   |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>            |  |
| 7. Waste shipping & name description  |  | 8. Containers  |  | 9. Total Quantity  |  |
| <b>HM</b>   |  | No. Type   |  | 10. Unit Wt./Vol   |  |
|   |  |  |  | 11. Price  |  |
|   |  |  |  | G  |  |
| <b>RADIATOR FLUID</b>   |  |  |  | <b>0.65</b>  |  |
| <b>USED OIL GALLON</b>  |  |  |  | <b>0.25</b>  |  |
| <b>OILY WATER</b>   |  |  |  | <b>0.65</b>  |  |
| <b>NON REG USED OIL FILTERS</b>   |  |  |  | <b>35.00</b>   |  |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due <b>69.70</b><br>Please pay on this invoice within 15 days. Thank you. |  |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |  |  |
| Printed Typed Name<br><b>CESAR RODRIGUEZ</b>  |  | Signature  |  | Month Day Year<br><b>12 18 18</b>  |  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |  |  |  |
| Printed Typed Name<br><b>CHARLIE LEON</b>   |  | Signature  |  | Month Day Year<br><b>12 18 18</b>  |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |  |  |  |
| Printed Typed Name<br><b>Brylyn Leon</b>  |  | Signature  |  | Month Day Year<br><b>12 18 18</b>  |  |
| <input checked="" type="checkbox"/> Below 1000 ppm  |  | Halogen Levels   |  | Above 1000 ppm   |  |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |  |   |                          |                     |
|---|--|--|--|---|--------------------------|---------------------|
| 1. Generator's Name and Mailing Address<br><b>E.M.C. OIL CORP.</b><br><b>8470 N.W. 68 STREET, MIAMI FL 33166</b>  |  | PO#<br><b>1000-001</b>   | A. Manifest Document #<br><b>174933</b>                                |   |                          |                     |
| 2. Generator's Phone ( <b>305</b> ) <b>477-7497</b>   |  | County of Origin ( <b>DADE</b> )   | B. Generator's ID #'s <b>FLR000000166</b><br>EPA _____ STATE <b>FL</b> |   |                          |                     |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>                          |   |                          |                     |
| 6. Designated Facility Name and Site Address<br><b>EMC OIL CORP</b><br><b>8470 NW 68 St</b><br><b>Miami, FL</b>   |  | E. Dade County ID<br><b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>   |  | F. Facility's Phone   |                          |                     |
| 7. Waste shipping & name description<br><b>HM</b><br><b>USED OIL GALLON</b>   |  | 8. Containers<br>No. Type  | 9. Total Quantity<br><b>350 gal.</b>                                   | 10. Unit Wt./Vol  | 11. Price<br><b>0.00</b> | G<br><b>CHARGES</b> |
| H. Additional Descriptions for Materials Listed Above<br><b>PUMPED OUT OF BAILER # 2</b>  |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br><b>Nil</b><br>Please pay on this invoice within 15 days. Thank you. |                          |                     |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |   |                          |                     |
| Printed Typed Name<br><b>Grace Clemens</b>  |  | Signature<br><i>Grace Clemens</i>  |  | Month Day Year<br><b>12/19/18</b>   |                          |                     |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |  |   |                          |                     |
| Printed Typed Name<br><b>NIVALDO DELGADO</b>  |  | Signature<br><i>Nivaldo Delgado</i>  |  | Month Day Year<br><b>12/19/18</b>   |                          |                     |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |  |   |                          |                     |
| Printed Typed Name<br><b>Ervelyn Leon</b>   |  | Signature<br><i>Ervelyn Leon</i>   |  | Month Day Year<br><b>12/19/18</b>   |                          |                     |
| Below 1000 ppm  |  | Halogen Levels   |  | Above 1000 ppm  |                          |                     |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |  |  |                            |
|---|--|--|--|--|----------------------------|
| 1. Generator's Name and Mailing Address<br><b>SUPER DIESEL TRUCK REPAIR</b><br>9861 N.W. 117TH WAY, MEDLEY FL 33178   |  | PO#<br>1531  | A. Manifest Document #<br>174881                   |  |                            |
| 2. Generator's Phone (305) 863-8500   |  | County of Origin (DADE)  | B. Generator's ID #'s<br>EPA _____ STATE _____     |  |                            |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br>FLR000000166  | C. State Transporter's ID FLR000000166             |  |                            |
| 5. Designated Facility Name and Site Address<br>E.M.C. OIL CORP.<br>8470 NW 68th<br>Miami 33166   |  | 6.   | D. Transporter's Phone (305) 477-7497              |  |                            |
|   |  |  | E. Dade County ID SW-01124<br>LW-00227<br>LW-00233 |  |                            |
|   |  |  | F. Facility's Phone                                |  |                            |
| GENERATOR   | 7. Waste shipping & name description   | 8. Containers<br>No. Type  | 9. Total Quantity                                  | 10. Unit Wt./Vol   | 11. Price                  |
|   | HM   |  |  |  | G<br>CHARGES               |
|   | X USED OIL GALLON  |  | 250  |  | 0.20                       |
|   | OILY WATER   |  |  |  | 0.45                       |
|   | NON REG USED OIL FILTERS   |  |  |  | 35.00                      |
| H. Additional Descriptions for Materials Listed Above<br>PO. 1531   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/4% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br>\$500<br>Please pay on this invoice within 15 days. Thank you. |                            |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |  |                            |
| Printed Typed Name<br>DOMINICO ABONZOLA   |  | Signature<br>X Dominico Abonzola   |  | Month Day Year<br>12/19/18   |                            |
| TRANSPORTER   | 13. Transporter 1 Acknowledgment of Receipt of Materials   |  |  |  |                            |
|   | Printed Typed Name<br>Charles Leon   |  | Signature<br>Charles Leon                          |  | Month Day Year<br>12/19/18 |
| FACILITY  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |  |  |  |                            |
|   | Printed Typed Name<br>Evelyn Leon  |  | Signature<br>Evelyn Leon                           |  | Month Day Year<br>12/19/18 |
| X   | Below 1000 ppm   | Halogen Levels   | Above 1000 ppm                                     |  |                            |

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P.O. Box 520882 - Miami, FL 33152

**Toll Free**  
**(800) 344-8688**



**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |   |   |           |                             |
|---|--|--|---|---|-----------|-----------------------------|
| 1. Generator's Name and Mailing Address<br><b>BEACON AUTO CARE</b><br>8701 NW 13 TERR., DORAL FL 33172  |  | PO#<br><b>7283</b>   | A. Manifest Document #<br><b>174909</b>                                 |   |           |                             |
| 2. Generator's Phone ( <b>305</b> ) <b>471-8400</b>   |  | County of Origin ( <b>DADE</b> )   | B. Generator's ID #'s<br>EPA _____ STATE _____                          |   |           |                             |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>                           |   |           |                             |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><b>8470 NW 68 St</b><br><b>Miami, FL 33166</b>   |  | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>                            |   |           |                             |
|   |  |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |   |           |                             |
|   |  |  | F. Facility's Phone   |   |           |                             |
| GENERATOR   | 7. Waste shipping & name description   | 8. Containers<br>No. Type  | 9. Total Quantity   | 10. Unit Wt./Vol  | 11. Price | G<br>CHARGES                |
|   | <input checked="" type="checkbox"/> USED OIL GALLON  |  | <b>350</b>  |   | 0.00      | <b>14/C</b>                 |
|   | <input type="checkbox"/> OILY WATER  |  |   |   | 0.98      |                             |
|   | <input type="checkbox"/> RADIATOR FLUID  |  |   |   | 0.00      |                             |
|   | <input type="checkbox"/> NON REG USED OIL FILTERS  |  |   |   | 0.00      |                             |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/4% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br>Please pay on this invoice within 15 days<br>Thank you. |           |                             |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |   |   |           |                             |
| Printed Typed Name<br><b>Robert Gonzalez</b>  |  | Signature<br><i>[Signature]</i>  |   | Month   | Day       | Year                        |
| TRANSPORTER   | 13. Transporter 1 Acknowledgment of Receipt of Materials   |  |   |   |           |                             |
|   | Printed Typed Name<br><b>CHARLIE LEON</b>  |  | Signature<br><i>[Signature]</i>   |   | Month     | Day Year<br><b>12/19/18</b> |
| FACILITY  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |  |   |   |           |                             |
|   | Printed Typed Name<br><b>Evelyn Leon</b>   |  | Signature<br><i>[Signature]</i>   |   | Month     | Day Year<br><b>12/19/18</b> |
| <input checked="" type="checkbox"/>   | Below 1000 ppm   | Halogen Levels   | Above 1000 ppm  |   |           |                             |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**  
Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU



**Dade**  
**(305) 477-7497**

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |   |  |   |                              |               |                         |
|---|---|--|---|------------------------------|---------------|-------------------------|
| 1. Generator's Name and Mailing Address<br><b>TRANSPORTATION AMERICA</b><br>2766 N.W. 62 ST, MIAMI FL 33147   |   | PO# <b>7622-002</b>  | A. Manifest Document # <b>174896</b>                                    |                              |               |                         |
| 2. Generator's Phone ( <b>305</b> ) <b>634-9454</b>   |   | County of Origin ( <b>DADE</b> )   | B. Generator's ID #'s<br>EPA _____ STATE _____                          |                              |               |                         |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |   | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>                           |                              |               |                         |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP.</b><br><b>8470 NW 68 ST</b><br><b>MIAMI, FL 33166</b>  |   | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>                            |                              |               |                         |
|   |   |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |                              |               |                         |
|   |   |  | F. Facility's Phone   |                              |               |                         |
| GENERATOR   | 7. Waste shipping & name description                | 8. Containers<br>No. Type  | 9. Total<br>Quantity  | 10. Unit<br>Wt./Vol          | 11. Price     | G<br>CHARGES            |
|   | HM  |  |   |                              |               |                         |
|   | <input checked="" type="checkbox"/> USED OIL GALLON |  | <b>360</b>  |                              |               | <b>-0.25</b>            |
|   | <input checked="" type="checkbox"/> RADIATOR FLUID  |  | <b>255</b>  | <b>110</b>                   |               | <b>0.00</b>             |
|   | NON REG USED OIL FILTERS                            |  |   |                              |               | <b>0.00</b>             |
| NON REG MAT OILY RAGS   |   |  |   |                              | <b>175.00</b> |                         |
| H. Additional Descriptions for Materials Listed Above   |   | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/4% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due <b>(-\$900)</b> |               |                         |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |   |  |   |                              |               |                         |
| Printed Typed Name<br><b>Osvaldo Alvarez</b>  |   | Signature<br><i>[Signature]</i>  |   | Month                        | Day           | Year                    |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |   |  |   |                              |               |                         |
| Printed Typed Name<br><b>Chal. Leon</b>   |   | Signature<br><i>[Signature]</i>  |   | Month                        | Day           | Year<br><b>12/19/18</b> |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |   |  |   |                              |               |                         |
| Printed Typed Name<br><b>Evelyn Leon</b>  |   | Signature<br><i>[Signature]</i>  |   | Month                        | Day           | Year<br><b>12/19/18</b> |
| <input checked="" type="checkbox"/>   | Below 1000 ppm                                      | Halogen Levels   |   | Above 1000 ppm               |               |                         |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**

Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**

Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 1. Generator's Name and Mailing Address<br><b>TRUMP NATIONAL DORAL</b><br>8930 NW 58 STREET, DORAL FL 33178<br>786 271-4880   |  | PO# 8212-001   |  | A. Manifest Document # 174900   |  |
| 2. Generator's Phone ( )  |  | County of Origin ( <b>DADE</b> )   |  | B. Generator's ID #'s<br>EPA STATE  |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>   |  | C. State Transporter's ID <b>FLR000000166</b>   |  |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP.</b><br><b>8470 NW 68th</b><br><b>Miami, FL 33166</b>   |  | 6.   |  | D. Transporter's Phone <b>(305) 477-7497</b>  |  |
|   |  |  |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>                 |  |
|   |  |  |  | F. Facility's Phone   |  |
| 7. Waste shipping & name description  |  | 8. Containers  |  | 9. Total  |  |
| HM  |  | No. Type   |  | Quantity  |  |
| + USED OIL GALLON   |  |  |  | 250   |  |
| USED OIL DRUM   |  |  |  | 50.00   |  |
| NON REG USED OIL FILTERS  |  |  |  | 50.00   |  |
|   |  |  |  | 11. Price   |  |
|   |  |  |  | G   |  |
|   |  |  |  | CHARGES   |  |
| H. Additional Descriptions for Materials Listed Above<br><b>BEFORE 2PM</b>  |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br><b>\$87.50</b><br>Please pay on this invoice within 15 days. Thank you. |  |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable International and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |   |  |
| Printed Typed Name<br><b>Robert</b>   |  | Signature<br><i>[Signature]</i>  |  | Month Day Year  |  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |  |   |  |
| Printed Typed Name<br><b>CHARLIE LEON</b>   |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br><b>12/19/18</b>   |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |  |   |  |
| Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br><b>12/19/18</b>   |  |
| X Below 1000 ppm  |  | Halogen Levels   |  | Above 1000 ppm  |  |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 1. Generator's Name and Mailing Address<br><i>U.S. South Florida - Hwys</i>   |  | PO#  |  | A. Manifest Document# <i>156350</i>   |  |
| 2. Generator's Phone <i>(305) 319-8303</i>  |  | County of Origin <i>Dade</i>   |  | B. Generator's ID #s<br>EPA <i>33132</i> STATE <i>33132</i>                         |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b>   |  | 4. US EPA ID Number<br><b>FLR000000166</b>   |  | C. State Transporter's ID <b>FLR000000166</b>                                       |  |
| 5. Designated Facility Name and Site Address<br><i>EMC OIL CORP<br/>8470 NW 68 St<br/>Miami, FL 33146</i>   |  | 6.   |  | D. Transporter's Phone <b>(305) 477-7497</b>  |  |
| 7. Waste shipping & name description  |  | 8. Containers  |  | E. Dade County ID <b>SW-01124<br/>LW-00227<br/>LW-00233</b>                         |  |
| HM  |  | No. Type   |  | F. Facility's Phone   |  |
| 9. Total Quantity   |  | 10. Unit Wt/Vol  |  | 11. Price   |  |
| G   |  | CHARGES  |  |   |  |
| X USED OIL  |  | 4 55220  |  | 12 / C  |  |
| X USED OIL FILTERS  |  | 1 5555   |  | 4 / C   |  |
| OILY WATER  |  |  |  |   |  |
| RADIATOR FLUID  |  |  |  |   |  |
| NON REG. ABSORBENT MATERIAL   |  |  |  |   |  |
| OTHER: SPECIFY  |  |  |  |   |  |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/4% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br>Please pay on this invoice within 15 days. Thank you. <i>14 / C</i> |  |
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| Printed Typed Name  |  | Signature  |  | Month Day Year  |  |
| <i>[Signature]</i>  |  | <i>R. REERMA</i>   |  |   |  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |  |   |  |
| Printed Typed Name  |  | Signature  |  | Month Day Year  |  |
| <i>Chal. Leon</i>   |  | <i>Chal. Leon</i>  |  | <i>12/19/18</i>   |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |  |   |  |
| Printed Typed Name  |  | Signature  |  | Month Day Year  |  |
| <i>Evelyn Leon</i>  |  | <i>[Signature]</i>   |  | <i>12/19/18</i>   |  |
| X Below 1000 ppm  |  | Halogen Levels   |  | Above 1000 ppm  |  |

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



C.O.D.

|   |  |   |   |  |                                   |                |
|---|--|---|---|--|-----------------------------------|----------------|
| 1. Generator's Name and Mailing Address<br><b>LERA GROUP, INC.</b><br>1102 NORTH UNIVERSITY DRIVE, PEMBROKE PINE<br>BROWARD   |  | PO#<br><b>1445</b>  | A. Manifest Document #<br><b>174879</b>                                 |  |                                   |                |
| 2. Generator's Phone ( <b>754</b> ) <b>423-7415</b>   |  | County of Origin ( <b>BROWARD</b> )   | B. Generator's ID #'s<br>EPA _____ STATE _____                          |  |                                   |                |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>  | C. State Transporter's ID <b>FLR000000166</b>                           |  |                                   |                |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><b>8470 NW 68th</b><br><b>miami 33166</b>  |  | 6.  | D. Transporter's Phone <b>(305) 477-7497</b>                            |  |                                   |                |
|   |  |   | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |  |                                   |                |
|   |  |   | F. Facility's Phone   |  |                                   |                |
| GENERATOR   | 7. Waste shipping & name description   | 8. Containers   | 9. Total Quantity   | 10. Unit Wt./Vol   | 11. Price                         | G              |
|   | <b>HM</b>  | No. Type  |   |  |                                   | <b>CHARGES</b> |
|   | <b>USED OIL GALLON</b>   | <b>1 TR</b>   | <b>250</b>  | <b>6ls</b>   | <b>0.00</b>                       |                |
|   | <b>NON REG USED OIL FILTERS</b>  |   |   |  | <b>35.00</b>                      |                |
| H. Additional Descriptions for Materials Listed Above<br><b>OIL &amp; FILTERS - COD</b>   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>0.00</b><br>Please pay on this invoice within 15 days. Thank you. |                                   |                |
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| Printed Typed Name<br><b>[Signature]</b>  |  | Signature<br><b>[Signature]</b>   |   | Month Day Year<br><b>12/18/18</b>  |                                   |                |
| TRANSPORT   | 13. Transporter 1 Acknowledgment of Receipt of Materials   |   |   |  |                                   |                |
|   | Printed Typed Name<br><b>Joel Palomino</b>   |   | Signature<br><b>[Signature]</b>   |  | Month Day Year<br><b>12/18/18</b> |                |
| FACILITY  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |   |   |  |                                   |                |
|   | Printed Typed Name<br><b>Erelyn Leon</b>   |   | Signature<br><b>[Signature]</b>   |  | Month Day Year<br><b>12/18/18</b> |                |
| <input checked="" type="checkbox"/> Below 1000 ppm  |  | Halogen Levels  |   | <input type="checkbox"/> Above 1000 ppm  |                                   |                |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 1. Generator's Name and Mailing Address<br><b>EASTERN WASTE SYSTEMS</b><br>1660 NW 19 AVE, POMPANO BEACH FL 33069   |  | PO# <b>7136-002</b>  |  | A. Manifest Document #<br><b>174819</b>   |  |
| 2. Generator's Phone ( 954 ) 214-3513   |  | County of Origin ( <b>BROWARD</b> )  |  | B. Generator's ID #'s<br>EPA _____ STATE _____  |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>   |  | C. State Transporter's ID <b>FLR000000166</b>   |  |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><i>8470 NW 68th St<br/>Miami, 33166</i>  |  | 6.   |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>               |  |
| 7. Waste shipping & name description  |  | 8. Containers  |  | 9. Total Quantity   |  |
| HM  |  | No. Type   |  | 10. Unit Wt./Vol  |  |
|   |  |  |  | 11. Price   |  |
|   |  |  |  | G   |  |
| USED OIL GALLON   |  | 1 TK   |  | 250 GALS  |  |
| OILY WATER  |  |  |  | 0.65  |  |
| RADIATOR FLUID  |  |  |  | 0.65  |  |
| NON REG USED OIL FILTERS  |  |  |  | 50.00   |  |
| NON REG MAT OILY RAGS   |  |  |  | 200.00  |  |
| NON REG OIL DRY   |  |  |  | 200.00  |  |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br><b>\$500</b><br>Please pay on this invoice within 15 days. Thank you. |  |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |   |  |
| Printed Typed Name<br><i>Rick Warren</i>  |  | Signature<br><i>Rick Warren</i>  |  | Month Day Year<br><i>12/18/18</i>   |  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |  |   |  |
| Printed Typed Name<br><i>Joel Polunio</i>   |  | Signature<br><i>Joel Polunio</i>   |  | Month Day Year<br><i>12/18/18</i>   |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |  |   |  |
| Printed Typed Name<br><i>Evelyn Leon</i>  |  | Signature<br><i>Evelyn Leon</i>  |  | Month Day Year<br><i>12/18/18</i>   |  |
| Below 1000 ppm  |  | Halogen Levels   |  | Above 1000 ppm  |  |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**

Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**

Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

Dade  
(305) 477-7497

EMC Oil Corporation  
P.O. Box 520882 - Miami, FL 33152

Toll Free  
(800) 344-8688



**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |  |                            |                            |           |   |
|---|--|--|--|----------------------------|----------------------------|-----------|---|
| 1. Generator's Name and Mailing Address<br><b>WASTE PRO USA</b><br>3101 NW 18TH TERR. POMPANO BEACH FL 33064  |  | PO#<br>7136-004  | A. Manifest Document #<br>174820                   |                            |                            |           |   |
| 2. Generator's Phone (954) 967-4200   |  | County of Origin (BROWARD)   | B. Generator's ID #'s<br>EPA _____ STATE _____     |                            |                            |           |   |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br>FLR000000166  | C. State Transporter's ID FLR000000166             |                            |                            |           |   |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP</b><br>8470 NW 68th<br>Miami, FL 33166   |  | 6.   | D. Transporter's Phone (305) 477-7497              |                            |                            |           |   |
|   |  |  | E. Dade County ID SW-01124<br>LW-00227<br>LW-00233 |                            |                            |           |   |
|   |  |  | F. Facility's Phone                                |                            |                            |           |   |
| 7. Waste shipping & name description  |  |  |  |                            |                            |           |   |
| GENERATOR   | HM   | 8. Containers<br>No. Type  |  | 9. Total Quantity          | 10. Unit Wt./Vol           | 11. Price | G<br>CHARGES  |
|   |  | USED OIL GALLON  |  | 1                          | TK 200 GALS                | 0.20      |   |
|   |  | OILY WATER   |  |                            |                            | 0.65      |   |
|   |  | RADIATOR FLUID   |  |                            |                            | 0.65      |   |
|   |  | NON REG USED OIL FILTERS   |  |                            |                            | 50.00     |   |
|   |  | NON REG MAT OILY RAGS  |  |                            |                            | 200.00    |   |
|   |  | NON REG OIL DRY  |  |                            |                            | 200.00    |   |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br>\$400      |                            |           | Please pay on this invoice within 15 days. Thank you. |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |                            |                            |           |   |
| Printed Typed Name<br>Evelyn Leon   |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br>12/18/18 |                            |           |   |
| TRANSPORTER   | 13. Transporter 1 Acknowledgment of Receipt of Materials   |  |  |                            |                            |           |   |
|   | Printed Typed Name<br>Joel Palmiero  |  | Signature<br><i>[Signature]</i>                    |                            | Month Day Year<br>12/18/18 |           |   |
| FACILITY  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |  |  |                            |                            |           |   |
|   | Printed Typed Name<br>Evelyn Leon  |  | Signature<br><i>[Signature]</i>                    |                            | Month Day Year<br>12/18/18 |           |   |
| Below 1000 ppm  |  | Halogen Levels   |  | Above 1000 ppm             |                            |           |   |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**  
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**CAN MIX WITH USED OIL**  
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These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |   |   |           |         |
|---|--|--|---|---|-----------|---------|
| 1. Generator's Name and Mailing Address<br><b>FOR ELECTRIC</b><br><b>3001 P ANDREWS AVE DORNBROOK</b>   |  | PO#  | A. Manifest Document # <b>156315</b>                                    |   |           |         |
| 2. Generator's Phone ( )  |  | County of Origin ( )   | B. Generator's ID #'s<br>EPA _____ STATE _____                          |   |           |         |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>                           |   |           |         |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP</b><br><b>8470 NW 68th</b><br><b>MIAMI, FL 33166</b>  |  | 6.   | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |   |           |         |
| 7. Waste shipping & name description  |  | 8. Containers  | 9. Total Quantity   | 10. Unit Wt./Vol  | 11. Price | G       |
| HM  |  | No. Type   |   |   |           | CHARGES |
| USED OIL  |  | 1 TR   | 200   | 60  | 0.25      |         |
| USED OIL FILTERS  |  |  |   |   |           |         |
| OILY WATER  |  |  |   |   |           |         |
| RADIATOR FLUID  |  |  |   |   |           |         |
| NON REG. ABSORBENT MATERIAL   |  |  |   |   |           |         |
| OTHER: SPECIFY  |  |  |   |   |           |         |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>\$500</b><br>Please pay on this invoice within 15 days. Thank you. |           |         |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |   |   |           |         |
| Printed Typed Name<br><b>+ Daniel Georgescu</b>   |  | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>12/18/18</b>   |           |         |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |   |   |           |         |
| Printed Typed Name<br><b>Joel Polimino</b>  |  | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>12/18/19</b>   |           |         |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |   |   |           |         |
| Printed Typed Name<br><b>Brelyn Leon</b>  |  | Signature<br><i>[Signature]</i>  |   | Month Day Year<br><b>12/18/18</b>   |           |         |
| Below 1000 ppm  |  | Halogen Levels   |   | Above 1000 ppm  |           |         |

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Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**Toll Free**  
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1524

**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |   |               |   |                                   |                  |
|---|--|---|---------------|---|-----------------------------------|------------------|
| 1. Generator's Name and Mailing Address<br><b>RAPID AUTO Lube</b><br><b>3625 S State Rd 7 West Park</b>   |  | PO#   |               | A. Manifest Document # <b>156316</b>  |                                   |                  |
| 2. Generator's Phone ( <b>954 964 2000</b> )  |  | County of Origin ( )  |               | B. Generator's ID #'s<br>EPA _____ STATE _____                                      |                                   |                  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>  |               | C. State Transporter's ID <b>FLR000000166</b>                                       |                                   |                  |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CO. INC.</b><br><b>8470 NW 68th</b><br><b>Miami, 33166</b>   |  | 6.  |               | D. Transporter's Phone <b>(305) 477-7497</b>  |                                   |                  |
|   |  |   |               | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>             |                                   |                  |
|   |  |   |               | F. Facility's Phone   |                                   |                  |
| GENERATOR   | 7. Waste shipping & name description   |   | 8. Containers |   | 9. Total Quantity                 | 10. Unit Wt./Vol |
|   | HM   |   | No. Type      |   | 11. Price                         | G                |
|   | USED OIL   |   | 1 TK          |   | 30064                             | N/C              |
|   | USED OIL FILTERS   |   | 2 120         |   | 110612                            | N/C              |
|   | OILY WATER   |   |               |   |                                   |                  |
|   | RADIATOR FLUID   |   |               |   |                                   |                  |
|   | NON REG. ABSORBENT MATERIAL  |   |               |   |                                   |                  |
| OTHER: SPECIFY-   |  |   |               |   |                                   |                  |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/4% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sum or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |               | I. Total Due<br><b>N/C</b><br>Please pay on this invoice within 15 days. Thank you. |                                   |                  |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |   |               |   |                                   |                  |
| Printed Typed Name<br><b>Saul Zayas</b>   |  | Signature<br>   |               | Month Day Year<br><b>12/18/18</b>   |                                   |                  |
| TRANSPORTER   | 13. Transporter 1 Acknowledgment of Receipt of Materials   |   |               |   |                                   |                  |
|   | Printed Typed Name<br><b>Joel Palomino</b>   |   | Signature<br> |   | Month Day Year<br><b>12/18/18</b> |                  |
| FACILITY  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |   |               |   |                                   |                  |
|   | Printed Typed Name<br><b>Evelyn Leon</b>   |   | Signature<br> |   | Month Day Year<br><b>12/18/18</b> |                  |
| <input checked="" type="checkbox"/> Below 1000 ppm  |  | Halogen Levels  |               | <input type="checkbox"/> Above 1000 ppm   |                                   |                  |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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1910

**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |  |                                 |           |           |
|---|--|--|--|---------------------------------|-----------|-----------|
| 1. Generator's Name and Mailing Address<br><i>Advanced Disposal Services</i>  |  | PO#  | A. Manifest Document # 156300                                  |                                 |           |           |
| 2. Generator's Phone<br><i>305 490 0150</i>   |  | County of Origin<br><i>MIAMI</i>   | B. Generator's ID #'s<br><i>33036</i>                          |                                 |           |           |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b>   |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID<br><b>FLR000000166</b>               |                                 |           |           |
| 5. Designated Facility Name and Site Address<br><i>emc oil corp<br/>8470 NW 68th<br/>Miami, FL 33166</i>  |  | 6.   | D. Transporter's Phone<br><b>(305) 477-7497</b>                |                                 |           |           |
|   |  |  | E. Dade County ID<br><b>SW-01124<br/>LW-00227<br/>LW-00233</b> |                                 |           |           |
|   |  |  | F. Facility's Phone  |                                 |           |           |
| 7. Waste shipping & name description  |  | 8. Containers  | 9. Total Quantity  | 10. Unit Wt./Vol                | 11. Price | G         |
| HM  |  | No. Type   |  |                                 |           | CHARGES   |
| USED OIL  |  | 1 TR   | 200  | 35                              |           | 70.00     |
| USED OIL FILTERS  |  | 1 DR   | 55   |                                 |           | 50.00     |
| OILY WATER  |  |  |  |                                 |           |           |
| RADIATOR FLUID  |  |  |  |                                 |           |           |
| NON REG. ABSORBENT MATERIAL   |  |  |  |                                 |           |           |
| OTHER: SPECIFY  |  |  |  |                                 |           |           |
| H. Additional Descriptions for Materials Listed Above<br><i>Bell's</i>  |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br><i>\$120.00</i> |           |           |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |                                 |           |           |
| Printed Typed Name<br><i>LAURENT M. COLAS</i>   |  | Signature  |  | Month                           | Day       | Year      |
|   |  |  |  | <i>12</i>                       | <i>18</i> | <i>18</i> |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |  |                                 |           |           |
| Printed Typed Name<br><i>George Vicente</i>   |  | Signature  |  | Month                           | Day       | Year      |
|   |  |  |  | <i>12</i>                       | <i>18</i> | <i>18</i> |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |  |                                 |           |           |
| Printed Typed Name<br><i>Evelyn Leon</i>  |  | Signature  |  | Month                           | Day       | Year      |
|   |  |  |  | <i>12</i>                       | <i>18</i> | <i>18</i> |
| Below 1000 ppm  |  | Halogen Levels   |  | Above 1000 ppm                  |           |           |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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1575-001

**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|  |  |  |                                      |  |              |                 |
|--|--|--|--------------------------------------|--|--------------|-----------------|
| 1. Generator's Name and Mailing Address<br><i>FF Electric TAVELPIA Fla</i><br><i>91630 OLSHAY</i>  |  | PO#  | A. Manifest Document # <i>156269</i> |  |              |                 |
| 2. Generator's Phone   |  | B. Generator's ID #s <i>FLD984 F1876</i>   |                                      | EPA STATE <i>FL</i>                                      |              |                 |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>   |  | 4. US EPA ID Number<br><b>FLR000000166</b>   |                                      | C. State Transporter's ID <b>FLR000000166</b>            |              |                 |
| 5. Designated Facility Name and Site Address<br><i>EMC OIL CORP</i><br><i>8470 NW 68th</i><br><i>Miami, FL 33166</i>   |  | 6. Dade County ID<br><b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>   |                                      | F. Facility's Phone                                      |              |                 |
| 7. Waste shipping & name description   |  | 8. Containers  | 9. Total Quantity                    | 10. Unit Wt./Vol   | 11. Price    | G               |
| HM   |  | No. Type   |                                      |  |              | CHARGES         |
| USED OIL   |  |  | <i>200</i>                           | <i>gal</i>   | <i>25</i>    | <i>50.00</i>    |
| USED OIL FILTERS   |  |  |                                      |  |              |                 |
| OILY WATER   |  |  |                                      |  |              |                 |
| RADIATOR FLUID   |  |  |                                      |  |              |                 |
| NON REG. ABSORBENT MATERIAL  |  | <i>1 Drum</i>  | <i>55</i>                            | <i>gal</i>   | <i>45.00</i> | <i>45.00</i>    |
| OTHER: SPECIFY   |  |  |                                      |  |              |                 |
| (SHOP)   |  |  |                                      |  |              |                 |
| H. Additional Descriptions for Materials Listed Above<br><i>Billing</i>  |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |                                      | I. Total Due<br><i>\$95.00</i>                           |              | <i>all</i>      |
|  |  |  |                                      | Please pay on this invoice within 15 days.<br>Thank you. |              | <i>\$225.00</i> |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name, and are classified, packed, marked, and labeled, and are in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |                                      |  |              |                 |
| Printed Typed Name<br><i>LWELL LOCKE</i>   |  | Signature<br><i>[Signature]</i>  |                                      | Month Day Year<br><i>12/18/18</i>                        |              |                 |
| 13. Transporter 1 Acknowledgment of Receipt of Materials   |  |  |                                      |  |              |                 |
| Printed Typed Name<br><i>Georgel. Veste</i>  |  | Signature<br><i>[Signature]</i>  |                                      | Month Day Year<br><i>12/18/18</i>                        |              |                 |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.   |  |  |                                      |  |              |                 |
| Printed Typed Name<br><i>Evelyn Leon</i>   |  | Signature<br><i>[Signature]</i>  |                                      | Month Day Year<br><i>12/18/18</i>                        |              |                 |
| <input checked="" type="checkbox"/> Below 1000 ppm   |  | Halogen Levels   |                                      | <input type="checkbox"/> Above 1000 ppm                  |              |                 |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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1512-001

**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |  |
|---|--|--|--|
| 1. Generator's Name and Mailing Address<br><i>Keyway Systems Inc<br/>6960 Front St West<br/>Miami, FL 33166</i>   |  | A. Manifest Document # 156302                                    |  |
| 2. Generator's Phone ( ) County of Origin ( <i>Monroe</i> )   |  | B. Generator's ID #'s <i>FLD981468370</i><br>EPA STATE <i>FL</i> |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br>FLR000000166                              |  |
| 5. Designated Facility Name and Site Address<br><i>EMC Oil Corp<br/>8470 NW 68th<br/>Miami, FL 33166</i>  |  | 6. US EPA ID Number<br>FLR000000166                              |  |
| 7. Waste shipping & name description<br>HM  |  | 8. Containers<br>No. Type  |  |
| USED OIL  |  | 9. Total Quantity<br><i>400 gal</i>                              |  |
| USED OIL FILTERS  |  | 10. Unit Wt/Vol<br><i>25</i>                                     |  |
| OILY WATER  |  | 11. Price<br><i>160.00</i>                                       |  |
| RADIATOR FLUID  |  | G CHARGES  |  |
| NON REG. ABSORBENT MATERIAL   |  |  |  |
| OTHER: SPECIFY<br><i>Service Charge</i>   |  |  |  |
| H. Additional Descriptions for Materials Listed Above<br><i>Selling</i>   |  | I. Total Due<br><i>75.00</i><br><i>175.00</i>                    |  |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for the proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |
| Printed Typed Name<br><i>Jamie Curry</i>  |  | Signature<br><i>Jamie Curry</i>                                  |  |
| Month Day Year<br><i>12/19/18</i>   |  |  |  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials<br>Printed Typed Name<br><i>George Vicente</i>   |  | Signature<br><i>George Vicente</i>                               |  |
| Month Day Year<br><i>12/19/18</i>   |  |  |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.<br>Printed Typed Name<br><i>Erilyn Leon</i>  |  | Signature<br><i>Erilyn Leon</i>                                  |  |
| Month Day Year<br><i>12/19/18</i>   |  |  |  |
| Below 1000 ppm  |  | Above 1000 ppm   |  |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

DO NOT MIX WITH USED OIL  
Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

CAN MIX WITH USED OIL  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

**Dade**  
**(305) 477-7497**

**EMC Oil Corporation**  
P.O. Box 520882 - Miami, FL 33152

**Toll Free**  
**(800) 344-8688**



**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |   |   |  |  |              |
|---|--|---|---|--|--|--------------|
| 1. Generator's Name and Mailing Address<br><b>DUNCAN AUTO - KEYS AUTO CENTER</b><br>1618 N ROOSEVELT BLVD., KEY WEST FL 33040   |  | PO# <b>BILLING</b><br>1123  | A. Manifest Document # <b>174792</b>                                    |  |  |              |
| 2. Generator's Phone ( <b>305</b> ) <b>294-5126</b>   |  | County of Origin ( <b>MONROE</b> )  | B. Generator's ID #'s <b>FLD982132532</b><br>EPA _____ STATE <b>FL</b>  |  |  |              |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>  | C. State Transporter's ID <b>FLR000000166</b>                           |  | D. Transporter's Phone <b>(305) 477-7497</b> |              |
| 5. Designated Facility Name and Site Address<br><b>emc oil corp</b><br><b>8470 nw 68st</b><br><b>miami, fl 33166</b>  |  | 6.  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |  | F. Facility's Phone                          |              |
| 7. Waste shipping & name description<br><b>HM</b>   |  | B. Containers<br>No. Type   | 9. Total Quantity   | 10. Unit Wt./Vol   | 11. Price                                    | G<br>CHARGES |
| <b>OILY WATER</b>   |  |   |   |  | <b>0.00</b>                                  |              |
| <b>USED OIL GALLON</b>  |  |   |   |  | <b>0.00</b>                                  |              |
| <b>NON REG USED OIL FILTERS</b>   |  |   |   |  | <b>0.00</b>                                  |              |
| <b>NON REG MAT OILY RAGS</b>  |  |   |   |  | <b>175.00</b>                                |              |
| <b>NON REG OIL DRY</b>  |  |   |   |  | <b>175.00</b>                                |              |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>nc</b><br>Please pay on this invoice within 15 days. Thank you. |  |              |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |   |   |  |  |              |
| Printed Typed Name<br><b>Charla Brunette</b>  |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12/18/18</b>  |  |              |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |   |   |  |  |              |
| Printed Typed Name<br><b>GEORGE L. VICENTE</b>  |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12/19/18</b>  |  |              |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |   |   |  |  |              |
| Printed Typed Name<br><b>Brolyn Leon</b>  |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12/19/18</b>  |  |              |
| <input checked="" type="checkbox"/> Below 1000 ppm  |  | Halogen Levels  |   | <input type="checkbox"/> Above 1000 ppm  |  |              |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**

Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**

Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

**Dade**  
**(305) 477-7497**

**EMC Oil Corporation**  
P.O. Box 520882 - Miami, FL 33152

**Toll Free**  
**(800) 344-8688**



**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|  |  |  |  |   |  |
|--|--|--|--|---|--|
| 1. Generator's Name and Mailing Address<br><b>NILES SALES &amp; SERVICE</b><br>3500 N. ROOSEVELT BLVD., KEY WEST FL 33040  |  | PO# <b>BILLING</b><br>1511   |  | A. Manifest Document #<br>174825  |  |
| 2. Generator's Phone ( 305 ) 294-1003  |  | County of Origin ( <b>MONROE</b> )   |  | B. Generator's ID #'s<br>EPA _____ STATE _____                          |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   |  | C. State Transporter's ID <b>FLR000000166</b>                           |  |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><i>8470 NW 68th St<br/>Miami, FL 33166</i>  |  | 6.   |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |  |
| 7. Waste shipping & name description   |  | 8. Containers  |  | 9. Total Quantity   |  |
| HM   |  | No. Type   |  | 10. Unit Wt./Vol  |  |
|  |  |  |  | 11. Price   |  |
|  |  |  |  | G   |  |
| USED OIL GALLON  |  | 1 TR 400 gal   |  | 0.25  |  |
| RADIATOR FLUID   |  |  |  | 0.65  |  |
| NON REG USED OIL FILTERS   |  |  |  | 45.00   |  |
| H. Additional Descriptions for Materials Listed Above  |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the amount above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due <b>100.00</b>  |  |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contain no hazardous materials. (In the event that these products/material are found to be hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  | Please pay on this invoice within 15 days. Thank you.  |  |   |  |
| Printed Typed Name<br><b>Robert Ouellet</b>  |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br><b>12/18/18</b>                                       |  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials   |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br><b>12/19/18</b>                                       |  |
| Printed Typed Name<br><b>GEORGE L. VICENTE</b>   |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br><b>12/19/18</b>                                       |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.   |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br><b>12/19/18</b>                                       |  |
| Printed Typed Name<br><b>Erilyn Leon</b>   |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br><b>12/19/18</b>                                       |  |
| Below 1000 ppm   |  | Halogen Levels:  |  | Above 1000 ppm  |  |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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Toll Free  
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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|  |  |  |   |   |                                   |
|--|--|--|---|---|-----------------------------------|
| 1. Generator's Name and Mailing Address<br><b>M &amp; M MOTORS</b><br>31133 AVENUE A, BIG PINE KEY FL 33043  |  | PO#<br><b>6870</b>   | A. Manifest Document #<br><b>174861</b>                                 |   |                                   |
| 2. Generator's Phone ( <b>305</b> ) <b>872-4302</b>  |  | County of Origin ( <b>MONROE</b> )   | B. Generator's ID #'s<br>EPA _____ STATE _____                          |   |                                   |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>   |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>                           |   |                                   |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP</b><br><b>8470 NW 68th St - Miami, 33166</b>   |  | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>                            |   |                                   |
|  |  |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |   |                                   |
|  |  |  | F. Facility's Phone   |   |                                   |
| GENERATOR  | 7. Waste shipping & name description   | 8. Containers<br>No. Type  | 9. Total Quantity   | 10. Unit Wt./Vol  | 11. Price                         |
|  | HM   |  |   |   | G CHARGES                         |
|  | OILY WATER MIXED GAS DM  |  |   |   | 50.00                             |
|  | USED OIL GALLON  |  |   |   | 0.35                              |
|  | NON REG USED OIL FILTERS   |  |   |   | 50.00                             |
| H. Additional Descriptions for Materials Listed Above<br><b>CELL</b>   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>\$87.50</b><br>Please pay on this invoice within 15 days. Thank you. |                                   |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/materials are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |   |   |                                   |
| TRANSPORTER  | Printed/Typed Name<br><b>Rita Beauchamp</b>  |  | Signature   |   | Month Day Year<br><b>12/19/18</b> |
|  | 13. Transporter 1 Acknowledgment of Receipt of Materials   |  | Signature   |   | Month Day Year<br><b>12/19/18</b> |
|  | Printed/Typed Name<br><b>GEORGE L. VICENTE</b>   |  | Signature   |   | Month Day Year<br><b>12/19/18</b> |
| FACILITY   | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |  |   |   |                                   |
|  | Printed/Typed Name<br><b>Bechyn Leon</b>   |  | Signature   |   | Month Day Year<br><b>12/19/18</b> |
| Below 1000 ppm   |  | Halogen Levels   |   | Above 1000 ppm  |                                   |

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



1512-001

|   |  |   |  |
|---|--|---|--|
| 1. Generator's Name and Mailing Address<br><i>Key Energy Systems<br/>Treehouse Shop 6900 Flout St Lakes</i>   |  | A. Manifest Document # <i>158303</i>                        |  |
| 2. Generator's Phone<br><i>305 477 7497</i>   |  | B. Generator's ID #'s <i>FLD 981 468390</i>                 |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b>   |  | 4. US EPA ID Number<br><b>FLR000000166</b>                  |  |
| 5. Designated Facility Name and Site Address<br><i>EMC OIL CORP<br/>8470 NW 68th St<br/>Miami, FL 33166</i>   |  | C. State Transporter's ID <b>FLR000000166</b>               |  |
| 6. County of Origin<br><i>Mourad</i>  |  | D. Transporter's Phone <b>(305) 477-7497</b>                |  |
| 7. Waste shipping & name description<br><b>HM</b>   |  | E. Dade County ID <b>SW-01124<br/>LW-00227<br/>LW-00233</b> |  |
| 8. Containers<br>No. Type   |  | 9. Total Quantity   |  |
| 10. Unit Wt./Vol  |  | 11. Price   |  |
| 12. Price   |  | G   |  |
| USED OIL  |  | 660 gal 25 165.00   |  |
| USED OIL FILTERS  |  |   |  |
| OILY WATER  |  |   |  |
| RADIATOR FLUID  |  |   |  |
| NON REG. ABSORBENT MATERIAL   |  |   |  |
| OTHER: SPECIFY  |  |   |  |
| H. Additional Descriptions for Materials Listed Above<br><i>Service Charge</i>  |  | I. Total Due<br><i>75.00 75.00</i>                          |  |
| IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof.  |  | Please pay on this invoice within 15 days. Thank you.       |  |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  | Printed Typed Name<br><i>Dellie</i>                         |  |
| 13. Transporter Acknowledgment of Receipt of Materials  |  | Signature<br><i>[Signature]</i>                             |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  | Month Day Year<br><i>12/19/18</i>                           |  |
| Printed Typed Name<br><i>Georgette Vicente</i>  |  | Signature<br><i>[Signature]</i>                             |  |
| Printed Typed Name<br><i>Evelyn Leon</i>  |  | Month Day Year<br><i>12/19/18</i>                           |  |
| Below 1000 ppm  |  | Above 1000 ppm  |  |

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |   |  |   |                  |  |              |
|---|---|--|---|------------------|--|--------------|
| 1. Generator's Name and Mailing Address<br><b>SOUTHERNMOST SHELL</b><br>1900 N. ROOSEVELT BLVD., KEY WEST FL 33040  |   | PO#<br><b>1354</b>   | A. Manifest Document #<br><b>174830</b>                                 |                  |  |              |
| 2. Generator's Phone ( <b>305</b> ) <b>292-3309</b>   |   | County of Origin ( <b>MONROE</b> )   | B. Generator's ID #'s<br>EPA _____ STATE _____                          |                  |  |              |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |   | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>                           |                  |  |              |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><b>8470 N.W. 68th</b><br><b>Miami FL 33166</b>   |   | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>                            |                  |  |              |
|   |   |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |                  |  |              |
|   |   |  | F. Facility's Phone   |                  |  |              |
| GENERATOR   | 7. Waste shipping & name description  | 8. Containers<br>No. Type  | 9. Total Quantity   | 10. Unit Wt./Vol | 11. Price  | G<br>CHARGES |
|   | HM<br>USED OIL GALLON   | 1  | 275   | gal              | 0.00   | N/C          |
|   | OILY WATER  |  |   |                  | 0.75   |              |
|   | NON REG USED OIL FILTERS  |  |   |                  | 0.00   |              |
| H. Additional Descriptions for Materials Listed Above   |   | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/4% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   |                  | I. Total Due<br>Please pay on this invoice within 15 days. Thank you. <b>N/C</b> |              |
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| TRANSPORT   | Printed Typed Name<br><b>Tony</b>   |  | Signature   |                  | Month Day Year<br><b>12/19/18</b>  |              |
|   | 13. Transporter 1 Acknowledgment of Receipt of Materials  |  | Signature   |                  | Month Day Year<br><b>12/19/18</b>  |              |
|   | Printed Typed Name<br><b>GEORGE L. VICENTE</b>  |  | Signature   |                  | Month Day Year<br><b>12/19/18</b>  |              |
| FACILITY  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest |  |   |                  |  |              |
|   | Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature   |                  | Month Day Year<br><b>12/19/18</b>  |              |
| Below 1000 ppm  |   | Halogen Levels   |   | Above 1000 ppm   |  |              |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

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NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
NONREGULATED

2. Page 1 of 1  
3. Emergency Response Phone  
1-800-424-9300

4. Waste Tracking Number  
174762

5. Generator's Name and Mailing Address  
E.M.C. OIL CORP.  
8470 N.W. 68 STREET, MIAMI FL 33188  
Generator's Phone: 305 477-7497

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

6. Transporter 1 Company Name  
E.M.C. OIL CORP.

U.S. EPA ID Number  
FL000000116

7. Transporter 2 Company Name  
Sewall Services

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
NOBLE OIL  
5617 CLYDE RHYNE DRIVE SANFORD, NC 27890

U.S. EPA ID Number

Facility's Phone: 010-774-8120

NC0986072470

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

1. USED OIL GALLON

No. Type  
01 TR 8336 gal

2. RECEIVED

3. JAN 22 2019

4. FL DEP  
WEST PALM BEACH

13. Special Handling Instructions and Additional Information

TEIX 26016

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

Generator's/Offor's Printed/Typed Name

Signature

Month Day Year

15. International Shipments  
 Import to U.S.

Export from U.S.

Port of entry/exit:  
Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number: 174762

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

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

Printed/Typed Name

Signature

Month Day Year

MAURIZIO BIAQUINTO

Maurizio Biaquinto

12 15 18

**Dade**  
**(305) 477-7497**

**EMC Oil Corporation**  
P.O. Box 520882 - Miami, FL 33152

**Toll Free**  
**(800) 344-8688**



**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|  |  |  |   |  |  |                  |                                   |              |
|--|--|--|---|--|--|------------------|-----------------------------------|--------------|
| 1. Generator's Name and Mailing Address<br><b>ALL KEY DIESEL REPAIR</b><br>531 107TH STREET, MARATHON FL 33050   |  | PO#<br><b>1016</b>   | A. Manifest Document #<br><b>174724</b>                                 |  |  |                  |                                   |              |
| 2. Generator's Phone ( <b>305</b> ) <b>289-2070</b>  |  | County of Origin ( <b>MONROE</b> )   | B. Generator's ID #'s<br>EPA _____ STATE _____                          |  |  |                  |                                   |              |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>                           |  |  |                  |                                   |              |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP</b><br><b>8470 NW 68th</b><br><b>Miami, FL 33166</b>   |  | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>                            |  |  |                  |                                   |              |
|  |  |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |  |  |                  |                                   |              |
|  |  |  | F. Facility's Phone   |  |  |                  |                                   |              |
| GENERATOR  | 7. Waste shipping & name description<br><b>HM</b>  |  | B. Containers<br>No. Type   |  | 9. Total Quantity  | 10. Unit Wt./Vol | 11. Price                         | G<br>CHARGES |
|  | <b>OILY WATER (MIX F)</b>  |  |   |  |  |                  | <b>0.75</b>                       |              |
|  | <b>USED OIL GALLON</b>   |  |   |  | <b>250 gal</b>   |                  | <b>0.25</b>                       | <b>62.50</b> |
|  | <b>NON REG USED OIL FILTERS</b>  |  | <b>1 Drum</b>   |  | <b>55 gal</b>  |                  | <b>45.00</b>                      | <b>45.00</b> |
|  | <b>OILY WATER</b>  |  |   |  |  |                  | <b>0.75</b>                       |              |
|  | <b>NON REG MAT OILY RAGS</b>   |  |   |  |  |                  | <b>200.00</b>                     |              |
|  | <b>RADIATOR FLUID</b>  |  |   |  |  |                  | <b>0.75</b>                       |              |
| H. Additional Descriptions for Materials Listed Above<br><b>OIL AND FILTERS</b>  |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   |  | I. Total Due<br><b>107.50</b><br>Please pay on this invoice within 15 days. Thank you. |                  |                                   |              |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable International and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through pommimging.) |  |  |   |  |  |                  |                                   |              |
| TRANSPORT  | Printed Typed Name<br><b>LUZ MARTINEZ</b>  |  | Signature<br><i>[Signature]</i>   |  | Month Day Year<br><b>12/11/18</b>  |                  |                                   |              |
|  | 13. Transporter 1.Acknowledgment of Receipt of Materials   |  | Printed Typed Name<br><b>GEORGE L. VICENTE</b>                          |  | Signature<br><i>[Signature]</i>  |                  | Month Day Year<br><b>12/11/18</b> |              |
|  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |  | Printed Typed Name<br><b>Evelyn Leon</b>                                |  | Signature<br><i>[Signature]</i>  |                  | Month Day Year<br><b>12/11/18</b> |              |
| FACILITY   | Below 1000 ppm   |  | Halogen Levels  |  | Above 1000 ppm   |                  |                                   |              |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**  
Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |   |  |  |  |
|---|--|---|--|--|--|
| 1. Generator's Name and Mailing Address<br><b>CHARLIE'S GARAGE</b><br>102225 OVERSEAS HIGHWAY, KEY LARGO FL 3303  |  | PO# <b>EMC LOANER TANK</b><br>1544  |  | A. Manifest Document #<br>174663   |  |
| 2. Generator's Phone ( 305 ) 451-0050   |  | County of Origin ( <b>MONROE</b> )  |  | B. Generator's ID #'s<br>EPA _____ STATE _____   |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>  |  | C. State Transporter's ID <b>FLR000000166</b>  |  |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><i>2770 nw miami, 33166</i>  |  | 6.  |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>                  |  |
| 7. Waste shipping & name description  |  | 8. Containers   |  | 9. Total Quantity  |  |
| HM  |  | No. Type  |  | 10. Unit Wt./Vol   |  |
|   |  |   |  | 11. Price  |  |
|   |  |   |  | G  |  |
| USED OIL GALLON   |  |   |  | 200 gal  |  |
| OILY WATER  |  |   |  | 0.65   |  |
| PETRO OIL 3, NA1270, PGIII G  |  |   |  | 0.00   |  |
| RADIATOR FLUID  |  |   |  | 100 gal  |  |
| NON REG USED OIL FILTERS  |  |   |  | 45.00  |  |
| NON REG MAT OILY RAGS   |  |   |  | 175.00   |  |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br><b>\$125.00</b><br>Please pay on this invoice within 15 days. Thank you. |  |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable International and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |   |  |  |  |
| Printed Typed Name<br><b>Charles Eaves</b>  |  | Signature<br><i>[Signature]</i>   |  | Month Day Year<br><b>12/1/18</b>   |  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |   |  |  |  |
| Printed Typed Name<br><b>GEORGE L. VICENTE</b>  |  | Signature<br><i>[Signature]</i>   |  | Month Day Year<br><b>12/1/18</b>   |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |   |  |  |  |
| Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature<br><i>[Signature]</i>   |  | Month Day Year<br><b>12/1/18</b>   |  |
| <input checked="" type="checkbox"/> Below 1000 ppm  |  | Halogen Levels  |  | <input type="checkbox"/> Above 1000 ppm  |  |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**  
Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |   |   |             |              |
|---|--|--|---|---|-------------|--------------|
| 1. Generator's Name and Mailing Address<br><b>E.M.C. OIL CORP.</b><br><b>8470 N.W. 68 STREET, MIAMI FL 33166</b>  |  | PO#<br><b>1000-001</b>   | A. Manifest Document #<br><b>174759</b>                                 |   |             |              |
| 2. Generator's Phone ( <b>305</b> ) <b>477-7497</b>   |  | County of Origin ( <b>DADE</b> )   | B. Generator's ID #'s <b>FLR0000001166</b><br>EPA _____ STATE _____     |   |             |              |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>                           |   |             |              |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP</b><br><b>8470 NW 68 St Miami, FL 33166</b>   |  | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>                            |   |             |              |
|   |  |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |   |             |              |
|   |  |  | F. Facility's Phone   |   |             |              |
| 7. Waste shipping & name description<br><b>HM</b>   |  | 8. Containers<br>No. Type  | 9. Total Quantity   | 10. Unit Wt./Vol  | 11. Price   | G<br>CHARGES |
| <b>USED OIL GALLON</b>  |  |  | <b>350</b>  | <b>gal</b>  | <b>0.00</b> |              |
| H. Additional Descriptions for Materials Listed Above<br><b>PUMPED OUT OF BAILER # 2</b>  |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/4% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>n/c</b><br>Please pay on this invoice within 15 days. Thank you. |             |              |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |   |   |             |              |
| Printed Typed Name<br><b>Erica Clemons</b>  |  | Signature<br><i>Erica Clemons</i>  |   | Month Day Year<br><b>11/2/14/18</b>   |             |              |
| 13. Transporter 1. Acknowledgment of Receipt of Materials   |  |  |   |   |             |              |
| Printed Typed Name<br><b>NIVALDO DELGADO</b>  |  | Signature<br><i>Nivaldo Delgado</i>  |   | Month Day Year<br><b>12/14/18</b>   |             |              |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |   |   |             |              |
| Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature<br><i>Evelyn Leon</i>  |   | Month Day Year<br><b>12/14/18</b>   |             |              |
| Below 1000 ppm  |  | Halogen Levels   |   | Above 1000 ppm  |             |              |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**  
Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |   |
|---|--|---|
| 1. Generator's Name and Mailing Address<br><b>J.A. LAROCCO ENTERPRISE INC</b> PO# <b>2607-002</b><br><b>101075 OVERSEAS HWY, KEY LARGO FL 33037</b> |  | A. Manifest Document # <b>174584</b>                                    |
| 2. Generator's Phone ( <b>305</b> ) <b>453-0368</b> County of Origin ( <b>MONROE</b> )  |  | B. Generator's ID #'s<br>EPA _____ STATE _____                          |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | C. State Transporter's ID <b>FLR000000166</b>                           |
| 4. US EPA ID Number<br><b>FLR000000166</b>  |  | D. Transporter's Phone <b>(305) 477-7497</b>                            |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><b>8470 NW 68 St</b><br><b>Miami, FL 33166</b>                           |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |
| 6. _____  |  | F. Facility's Phone _____   |

| 7. Waste shipping & name description | 8. Containers |      | 9. Total Quantity | 10. Unit Wt./Vol | 11. Price | G                |
|--------------------------------------|---------------|------|-------------------|------------------|-----------|------------------|
|                                      | No.           | Type |                   |                  |           |                  |
| HM<br>USED OIL GALLON                |               |      | 250               | gal              | 0.35      | CHARGES<br>87.50 |
| OILY WATER                           |               |      |                   |                  | 0.75      |                  |
| NON REG USED OIL FILTERS             |               |      |                   |                  | 50.00     |                  |
| NON REG OIL DRY                      |               |      |                   |                  | 200.00    |                  |

|   |  |   |   |
|---|--|---|---|
| G<br>E<br>N<br>E<br>R<br>A<br>T<br>O<br>R | H. Additional Descriptions for Materials Listed Above<br><i>Spilling</i> | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. | I. Total Due<br><b>87.50</b><br>Please pay on this invoice within 15 days. Thank you. |
|---|--|---|---|

12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.)

|  |                                     |                                   |
|--|-------------------------------------|-----------------------------------|
| Printed Typed Name<br><b>FRANK A. REINER</b> | Signature<br><i>Frank A. Reiner</i> | Month Day Year<br><b>12/11/18</b> |
|--|-------------------------------------|-----------------------------------|

|  |                                       |                                   |
|--|---------------------------------------|-----------------------------------|
| 13. Transporter 1 Acknowledgment of Receipt of Materials |                                       |                                   |
| Printed Typed Name<br><b>GEORGE L. VICENTE</b>           | Signature<br><i>George L. Vicente</i> | Month Day Year<br><b>12/11/18</b> |

|  |                                 |                                   |
|--|---------------------------------|-----------------------------------|
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |                                 |                                   |
| Printed Typed Name<br><b>Evelyn Leon</b>   | Signature<br><i>Evelyn Leon</i> | Month Day Year<br><b>12/11/18</b> |

|  |                |   |
|--|----------------|---|
| <input checked="" type="checkbox"/> Below 1000 ppm | Halogen Levels | <input type="checkbox"/> Above 1000 ppm |
|--|----------------|---|

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**  
Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |   |   |  |                                   |
|---|--|---|---|--|-----------------------------------|
| 1. Generator's Name and Mailing Address<br><b>MARATHON TIRE LUBE &amp; MORE</b><br>12300 OVERSEAS HIGHWAY, MARATHON FL 33050  |  | PO# <b>EMC LOANER TANK</b><br>7062  | A. Manifest Document #<br>174743                      |  |                                   |
| 2. Generator's Phone ( <b>305</b> ) <b>289-9992</b>   |  | County of Origin ( <b>MONROE</b> )  | B. Generator's ID #'s<br>EPA _____ STATE _____        |  |                                   |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>  | C. State Transporter's ID <b>FLR000000166</b>         |  |                                   |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP</b><br>8470 NW 68 St Miami, FL 33166  |  | 6.  | D. Transporter's Phone ( <b>305</b> ) <b>477-7497</b> |  |                                   |
|   |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>   |   | F. Facility's Phone  |                                   |
| GENERATOR   | 7. Waste shipping & name description<br><b>HM</b>  | 8. Containers<br>No. Type   | 9. Total Quantity                                     | 10. Unit Wt./Vol   | 11. Price<br>G<br>CHARGES         |
|   | <b>USED OIL GALLON</b>   |   | <b>200 gal</b>  |  | <b>0.30 60.00</b>                 |
|   | <b>RADIATOR FLUID</b>  |   |   |  | <b>0.75</b>                       |
|   | <b>NON REG USED OIL FILTERS</b>  | <b>1 TM</b>   | <b>SS</b>   |  | <b>50.00 50.00</b>                |
| N. Additional Descriptions for Materials Listed Above<br><i>Buller</i>  |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>110.00</b><br>Please pay on this invoice within 15 days. Thank you. |                                   |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (in the event that these products/material are found to be hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |   |   |  |                                   |
| TRANSPORT   | 13. Transporter 1, Acknowledgment of Receipt of Materials  |   | Signature<br><i>Cindy Jacobs</i>                      |  | Month Day Year<br><b>12/11/18</b> |
|   | Printed Typed Name<br><b>GEORGE L. VICENTE</b>   |   | Signature<br><i>George Vicente</i>                    |  | Month Day Year<br><b>12/11/18</b> |
|   | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |   | Signature<br><i>Evelyn Leon</i>                       |  | Month Day Year<br><b>12/18/18</b> |
| FACILITY  | Printed Typed Name<br><b>Evelyn Leon</b>   |   | Signature   |  | Month Day Year                    |
|   | Below 1000 ppm   | Halogen Levels  | Above 1000 ppm  |  |                                   |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

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1427

**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |   |  |                                   |   |                                   |           |            |
|---|---|--|-----------------------------------|---|-----------------------------------|-----------|------------|
| 1. Generator's Name and Mailing Address<br><b>TOPPING MONROE CONCRETE</b>   |   | PO# <b>CONCRETE</b>  | Manifest Document # <b>156299</b> |   |                                   |           |            |
| 2. Generator's Phone<br><b>7129 Topping Ind. Dr. K West Fla.</b>  |   | County of Origin ( )   |                                   | B. Generator's ID #'s<br>EPA _____ STATE _____  |                                   |           |            |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b>   |   | 4. US EPA ID Number<br><b>FLR000000166</b>   |                                   | C. State Transporter's ID <b>FLR000000166</b>   |                                   |           |            |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP</b><br><b>8470 NW 68 St Miami, FL 33166</b>   |   | 6.   |                                   | D. Transporter's Phone <b>(305) 477-7497</b>  |                                   |           |            |
|   |   | E. Dade County ID<br><b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>   |                                   | F. Facility's Phone   |                                   |           |            |
| GENERATOR   | 7. Waste shipping & name description<br><b>HM</b>   |  | 8. Containers<br>No. Type         | 9. Total Quantity   | 10. Unit Wt./Vol                  | 11. Price | G. CHARGES |
|   | USED OIL  |  | 1 PK 250 gal                      |   | 35                                | 87.50     |            |
|   | USED OIL FILTERS  |  |                                   |   |                                   |           |            |
|   | OILY WATER  |  |                                   |   |                                   |           |            |
|   | RADIATOR FLUID  |  |                                   |   |                                   |           |            |
|   | NON REG. ABSORBENT MATERIAL   |  |                                   |   |                                   |           |            |
|   | OTHER: SPECIFY  |  |                                   |   |                                   |           |            |
| H. Additional Descriptions for materials Listed Above<br><b>Billings</b>  |   | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/4% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |                                   | I. Total Due<br><b>87.50</b><br>Please pay on this invoice within 15 days. Thank you. |                                   |           |            |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |   |  |                                   |   |                                   |           |            |
| Printed Typed Name<br><b>Dylan Cox</b>  |   | Signature<br><i>[Signature]</i>  |                                   | Month Day Year<br><b>12/12/18</b>   |                                   |           |            |
| TRANSPORT   | 13. Transporter 1. Acknowledgment of Receipt of Materials   |  |                                   |   |                                   |           |            |
|   | Printed Typed Name<br><b>George Veeva</b>   |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12/12/18</b> |           |            |
| FACILITY  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest |  |                                   |   |                                   |           |            |
|   | Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12/12/18</b> |           |            |
| Below 1000 ppm  |   | Halogen Levels   |                                   | Above 1000 ppm  |                                   |           |            |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

- DO NOT MIX WITH USED OIL  
Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil
- CAN MIX WITH USED OIL  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids
- These lists are based on current information and may be expanded as more data becomes available. THANK YOU

**Dade**  
**(305) 477-7497**

**EMC Oil Corporation**  
P.O. Box 520882 - Miami, FL 33152

**Toll Free**  
**(800) 344-8688**



**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |   |   |
|---|--|--|---|---|
| 1. Generator's Name and Mailing Address<br><b>U S NAVAL AIR STATION</b><br><b>BLDG A-930 TANK#A925, BOCA CHICA FL 33040</b>   |  | PO#<br><b>1431-008</b>   | A. Manifest Document #<br><b>174746</b>               |   |
| 2. Generator's Phone ( <b>305</b> ) <b>293-2101</b>   |  | County of Origin ( <b>MONROE</b> )   | B. Generator's ID #'s<br>EPA _____ STATE _____        |   |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>         |   |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP</b><br><b>8470 NW 68 St Miami, FL 33166</b>   |  | 6.   | D. Transporter's Phone ( <b>305</b> ) <b>477-7497</b> |   |
|   |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>  |   | F. Facility's Phone   |
| 7. Waste shipping & name description<br><b>HM</b><br><b>USED OIL GALLON</b>   |  | 8. Containers<br>No. Type<br><b>1 TR 400 gal</b>   | 9. Total Quantity                                     | 10. Unit Wt./Vol  |
|   |  | 11. Price<br><b>0.00</b>   |   | G<br>CHARGES  |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>NIC</b><br>Please pay on this invoice within 15 days. Thank you. |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |   |   |
| Printed Typed Name<br><b>Christopher Cirriale</b>   |  | Signature<br><i>Christopher Cirriale</i>   |   | Month Day Year<br><b>12 12 18</b>   |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |   |   |
| Printed Typed Name<br><b>GEORGE L. VICENTE</b>  |  | Signature<br><i>George L. Vicente</i>  |   | Month Day Year<br><b>12 12 18</b>   |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |   |   |
| Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature<br><i>Evelyn Leon</i>  |   | Month Day Year<br><b>12 12 18</b>   |
| Below 1000 ppm  |  | Halogen Levels   |   | Above 1000 ppm  |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU



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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |   |   |  |                                   |              |
|---|--|---|---|--|-----------------------------------|--------------|
| 1. Generator's Name and Mailing Address<br><b>NATIONAL WEATHER SERVICE</b><br>1315 WHITE ST, KEY WEST FL 33040  |  | PO#<br><b>8607</b>  | A. Manifest Document #<br><b>174466</b>               |  |                                   |              |
| 2. Generator's Phone ( <b>305</b> ) <b>295-1318</b>   |  | County of Origin ( <b>MONROE</b> )  | B. Generator's ID #'s<br>EPA _____ STATE _____        |  |                                   |              |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>  | C. State Transporter's ID <b>FLR000000166</b>         |  |                                   |              |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br>5470 NW 68 St<br>MIAMI, FL 33166   |  | 6.  | D. Transporter's Phone ( <b>305</b> ) <b>477-7497</b> |  |                                   |              |
|   |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>   |   | F. Facility's Phone  |                                   |              |
| GENERATOR   | 7. Waste shipping & name description   | 8. Containers<br>No. Type   | 9. Total<br>Quantity                                  | 10. Unit<br>Wt./Vol  | 11. Price                         | G<br>CHARGES |
|   | HM   |   |   |  |                                   |              |
|   | SERVICE CHARGE   | 1 SERVC   |   |  | 50.00                             | 50.00        |
|   | USED OIL GALLON  | 1 DM 85   |   |  | 1.00                              | 85.00        |
|   | OILY WATER   |   |   |  | 1.00                              |              |
| EMPTY PAILS DISPOSAL  | 13 PL  |   |   | 2.50   | 32.50                             |              |
| H. Additional Descriptions for Materials Listed Above<br><b>PUMPOUT 1 DM &amp; APPROX 10 PAILS OF OIL/WATER, DISPOSE PAILS - CC ON FILE ENTER</b>   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/4% (18% per annum) will be charged on over 30 days past due balance. In the event it shall become necessary to collect the Garbin above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>167.50</b><br>Please pay on this invoice within 15 days. Thank you. |                                   |              |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable International and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |   |   |  |                                   |              |
| TRANSPORTER   | Printed Typed Name<br><b>DANIEL M. LEON</b>  |   | Signature<br><i>[Signature]</i>                       |  | Month Day Year<br><b>12/21/18</b> |              |
|   | 13. Transporter 1, Acknowledgment of Receipt of Materials  |   | Printed Typed Name<br><b>George V. Leon</b>           |  | Signature<br><i>[Signature]</i>   |              |
|   | Month Day Year<br><b>12/21/18</b>  |   |   |  |                                   |              |
| FACILITY  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |   |   |  |                                   |              |
|   | Printed Typed Name<br><b>Evelyn Leon</b>   |   | Signature<br><i>[Signature]</i>                       |  | Month Day Year<br><b>12/21/18</b> |              |
| Below 1000 ppm  |  | Halogen Levels  |   | Above 1000 ppm   |                                   |              |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**  
Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



EMAIL INVOICE

|   |  |                                     |  |
|---|--|-------------------------------------|--|
| 1. Generator's Name and Mailing Address<br><b>SOUTH FLA CONTAINER TERMINAL</b><br>2299 PORT BLVD., MIAMI FL 33132 |  | PO#<br>1600-001                     | A. Manifest Document #<br>174694                   |
| 2. Generator's Phone (305) 347-3800   |  | County of Origin (DADE)             | B. Generator's ID #'s<br>EPA _____ STATE _____     |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166             |  | 4. US EPA ID Number<br>FLR000000166 | C. State Transporter's ID FLR000000166             |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br>8470 NW 68 St<br>MIAMI, FL 33166       |  | 6.                                  | D. Transporter's Phone (305) 477-7497              |
|   |  |                                     | E. Dade County ID SW-01124<br>LW-00227<br>LW-00233 |
|   |  |                                     | F. Facility's Phone                                |

| 7. Waste shipping & name description | 8. Containers |      | 9. Total Quantity | 10. Unit Wt./Vol | 11. Price | G. CHARGES |
|--------------------------------------|---------------|------|-------------------|------------------|-----------|------------|
|                                      | No.           | Type |                   |                  |           |            |
| HM<br>USED OIL GALLON                |               |      | 350               | gal              | 0.25      | 87.50      |
| OILY WATER                           |               |      | 100               | gal              | 0.65      | 65.00      |
| RADIATOR FLUID                       |               |      |                   |                  | 0.65      |            |
| NON REG USED OIL FILTERS             | 1             | DM   | 55                | gal              | 45.00     | 45.00      |
| NON REG MAT OILY RAGS                |               |      |                   |                  | 175.00    |            |
| NON REG (OIL DRY) RAGS               | 1             | DM   | 55                | gal              | 175.00    | 175.00     |
| 3 DM HYDRAULIC OIL                   | 3             | DM   | 165               | gal              | 25.00     | 75.00      |

|  |  |  |
|--|--|--|
| H. Additional Descriptions for Materials Listed Above<br><i>Billings</i> | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. | I. Total Due<br>\$ 372.50<br>Please pay on this invoice within 15 days.<br>Thank you.<br>\$ 447.50 |
|--|--|--|

12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contain no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations including any contamination caused through commingling.)

|   |                                |                            |
|---|--------------------------------|----------------------------|
| Printed Typed Name<br><i>Chae Chung</i> | Signature<br><i>Chae Chung</i> | Month Day Year<br>12/10/18 |
|---|--------------------------------|----------------------------|

|  |                                    |                            |
|--|------------------------------------|----------------------------|
| 13. Transporter 1 Acknowledgment of Receipt of Materials |                                    |                            |
| Printed Typed Name<br>GEORGE L. VICENTE                  | Signature<br><i>George Vicente</i> | Month Day Year<br>12/10/18 |

|  |                                 |                            |
|--|---------------------------------|----------------------------|
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |                                 |                            |
| Printed Typed Name<br><i>Evelyn Leon</i>   | Signature<br><i>Evelyn Leon</i> | Month Day Year<br>12/10/18 |

|                |                |                |
|----------------|----------------|----------------|
| Below 1000 ppm | Halogen Levels | Above 1000 ppm |
|----------------|----------------|----------------|

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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CAN MIX WITH USED OIL  
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These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 1. Generator's Name and Mailing Address<br><b>W.E. JOHNSON EQUIPMENT CO.</b><br>7801 NW 52 ST, DORAL FL 33166   |  | PO# <b>BILLING</b><br>1828   |  | A. Manifest Document #<br>174640  |  |
| 2. Generator's Phone ( 305 ) 882-7000   |  | County of Origin (DADE )   |  | B. Generator's ID #'s<br>EPA _____ STATE _____  |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br>FLR000000166  |  | C. State Transporter's ID FLR000000166  |  |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br>8470 NW 68 St<br>Miami, FL 33166   |  | 6.   |  | D. Transporter's Phone (305) 477-7497   |  |
| 7. Waste shipping & name description  |  | 8. Containers  |  | 9. Total Quantity   |  |
| HM  |  | No. Type   |  | 10. Unit Wt./Vol  |  |
|   |  |  |  | 11. Price   |  |
|   |  |  |  | G   |  |
|   |  |  |  | CHARGES   |  |
| USED OIL GALLON   |  | 1 # 550  |  | 0.20 110.00   |  |
| OILY WATER <i>fuel</i>  |  | 1 DM 55  |  | 0.55 30.25  |  |
| used coolant  |  | 1 DM 55  |  | 0.67 35.75  |  |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br>\$ 176.00<br>Please pay on this invoice within 15 days.<br>Thank you. |  |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |   |  |
| Printed Typed Name<br><i>Albert Chmerelis</i>   |  | Signature<br><i>Albert Chmerelis</i>   |  | Month Day Year<br>12 10 18  |  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  | Printed Typed Name<br><i>George</i><br>CHARLIE LEON  |  | Signature<br><i>George</i>  |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest   |  | Printed Typed Name<br><i>Evelyn Leon</i>   |  | Signature<br><i>Evelyn Leon</i>   |  |
| Below 1000 ppm  |  | Halogen Levels   |  | Above 1000 ppm  |  |

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CAN MIX WITH USED OIL  
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These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |   |   |                |
|---|--|--|---|---|----------------|
| 1. Generator's Name and Mailing Address<br><b>POMTOC,<br/>PORT OF MIAMI, MIAMI FL 33132</b>   |  | PO#<br><b>1695</b>   | A. Manifest Document #<br><b>174058</b>                     |   |                |
| 2. Generator's Phone ( <b>305</b> ) <b>533-8139</b>   |  | County of Origin <b>DADE</b>   | B. Generator's ID #'s<br>EPA _____ STATE _____              |   |                |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation<br/>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000168</b>               |   |                |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.<br/>8470 NW 68 ST<br/>MIAMI, FL 33166</b>   |  | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>                |   |                |
|   |  |  | E. Dade County ID <b>SW-01124<br/>LW-00227<br/>LW-00233</b> |   |                |
|   |  |  | F. Facility's Phone   |   |                |
| 7. Waste shipping & name description  |  | 8. Containers<br>No. Type  | 9. Total<br>Quantity  | 10. Unit<br>Wt./Vol                     | 11. Price      |
| <b>HM</b>   |  |  |   |   | <b>G</b>       |
|   |  |  |   |   | <b>CHARGES</b> |
| <b>USED OIL GALLON</b>  |  |  | <b>560</b>  | <b>gal</b>                              | <b>0.35</b>    |
| <b>OILY WATER</b>   |  |  | <b>55</b>   | <b>gal</b>                              | <b>0.65</b>    |
| <b>RADIATOR FLUID</b>   |  |  |   |   | <b>0.65</b>    |
| <b>NON REG MAT OILY RAGS</b>  |  |  |   |   | <b>200.00</b>  |
| <b>NON REG OIL DRY</b>  |  |  |   |   | <b>200.00</b>  |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>\$231.75</b>         |                |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  | Please pay on this invoice within 15 days. Thank you.  |   |   |                |
| Printed Typed Name<br><b>Elio Prades</b>  |  | Signature<br><i>Elio Prades</i>  |   | Month Day Year<br><b>12/10/18</b>       |                |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |   |   |                |
| Printed Typed Name<br><b>George Vento</b>   |  | Signature<br><i>George Vento</i>   |   | Month Day Year<br><b>12/10/18</b>       |                |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |   |   |                |
| Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature<br><i>Evelyn Leon</i>  |   | Month Day Year<br><b>12/10/18</b>       |                |
| <input checked="" type="checkbox"/> Below 1000 ppm  |  | Halogen Levels   |   | <input type="checkbox"/> Above 1000 ppm |                |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**

EMC LOANER - COD

|  |  |   |  |   |             |              |
|--|--|---|--|---|-------------|--------------|
| 1. Generator's Name and Mailing Address<br><b>ALAMAR TIRES</b><br>9180 N.W. 119TH ST. BAY#1, HIALEAH GARDENS FL  |  | PO#<br><b>1957</b>  | A. Manifest Document #<br><b>174687</b>        |   |             |              |
| 2. Generator's Phone ( <b>305</b> ) <b>821-1033</b>  |  | County of Origin ( <b>DADE</b> )  | B. Generator's ID #'s<br>EPA _____ STATE _____ |   |             |              |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166  |  | 4. US EPA ID Number<br><b>FLR000000166</b>  | C. State Transporter's ID <b>FLR000000166</b>  |   |             |              |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br>8470 NW 68 St<br>Miami, FL 33166  |  | 6.  | D. Transporter's Phone <b>(305) 477-7497</b>   |   |             |              |
|  |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>   |  | F. Facility's Phone   |             |              |
| GENERATOR  | 7. Waste shipping & name description<br><b>HM</b>  | 8. Containers<br>No. Type   | 9. Total Quantity                              | 10. Unit Wt./Vol  | 11. Price   | G<br>CHARGES |
|  | <b>NON REG USED OIL FILTERS</b>  |   |  |   | <b>0.00</b> |              |
|  | <b>USED OIL GALLON</b>   |   | <b>250</b>                                     |   | <b>0.00</b> |              |
| H. Additional Descriptions for Materials Listed Above<br><b>EMC LOANER - COD</b>   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br>Please pay on this invoice within 15 days. Thank you. |             |              |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/materials are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |   |  |   |             |              |
| Printed Typed Name<br><b>Miguel Gonzalez</b>   |  | Signature<br><i>[Signature]</i>   |  | Month   | Day         | Year         |
| TRANSPORT  | 13. Transporter 1 Acknowledgment of Receipt of Materials   |   |  |   |             |              |
|  | Printed Typed Name<br><b>CHARLIE LEON</b>  |   | Signature<br><i>[Signature]</i>                |   | Month       | Day Year     |
| FACILITY   | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |   |  |   |             |              |
|  | Printed Typed Name<br><b>Evelyn Leon</b>   |   | Signature<br><i>[Signature]</i>                |   | Month       | Day Year     |
|  |  |   |  |   | Month       | Day Year     |
| <input checked="" type="checkbox"/> Below 1000 ppm   |  | Halogen Levels  |  | <input type="checkbox"/> Above 1000 ppm                               |             |              |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**  
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**CAN MIX WITH USED OIL**  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**Toll Free**  
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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|  |                                      |  |   |            |  |                  |               |              |
|--|--------------------------------------|--|---|------------|--|------------------|---------------|--------------|
| 1. Generator's Name and Mailing Address<br><b>ELLER ITO</b><br><b>650 AUSTRALIAN AVE, MIAMI FL 33132</b>   |                                      | PO# <b>EMAIL INV. TO SHUCRI</b><br><b>2365</b>   | A. Manifest Document #<br><b>174646</b>                                 |            |  |                  |               |              |
| 2. Generator's Phone ( <b>305</b> ) <b>379-3700</b>  |                                      | County of Origin ( <b>DADE</b> )   | B. Generator's ID #'s<br>EPA _____ STATE _____                          |            |  |                  |               |              |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>   |                                      | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>                           |            |  |                  |               |              |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP</b><br><b>8470 NW 68 St Miami, FL 33166</b>  |                                      | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>                            |            |  |                  |               |              |
|  |                                      |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |            |  |                  |               |              |
|  |                                      |  | F. Facility's Phone   |            |  |                  |               |              |
| GENERATOR  | 7. Waste shipping & name description |  | 8. Containers   |            | 9. Total Quantity  | 10. Unit Wt./Vol | 11. Price     | G            |
|  | HM                                   |  | No. Type  |            |  |                  |               | CHARGES      |
|  | NON REG MAT BOOMS                    |  |   |            |  |                  | 175.00        |              |
|  | NON REG OIL DRY                      |  |   |            |  |                  | 175.00        |              |
|  | NON REG USED OIL FILTERS             |  | <b>2 DM</b>   |            | <b>110 CB</b>  |                  | 45.00         | <b>90.00</b> |
|  | OILY WATER                           |  |   |            | <b>55</b>  |                  | 0.85          | <b>35.75</b> |
| USED OIL GALLON  |                                      |  |   | <b>400</b> |  | 0.35             | <b>140.00</b> |              |
| H. Additional Descriptions for Materials Listed Above  |                                      | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   |            | I. Total Due<br><b>\$265.75</b><br>Please pay on this invoice within 15 days. Thank you. |                  |               |              |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respect in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |                                      |  |   |            |  |                  |               |              |
| Printed Typed Name<br><b>Daniel Lopez</b>  |                                      | Signature<br><i>[Signature]</i>  |   |            | Month Day Year<br><b>12/10/18</b>  |                  |               |              |
| 13. Transporter 1, Acknowledgment of Receipt of Materials  |                                      | Printed Typed Name<br><b>George Vento</b>  |   |            | Signature<br><i>[Signature]</i>  |                  |               |              |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest  |                                      | Printed Typed Name<br><b>Daniel Evelyn Leon</b>  |   |            | Signature<br><i>[Signature]</i>  |                  |               |              |
| Below 1000 ppm   |                                      | Halogen Levels   |   |            | Above 1000 ppm   |                  |               |              |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

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Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|  |  |   |   |   |              |   |
|--|--|---|---|---|--------------|---|
| 1. Generator's Name and Mailing Address<br><b>INTERSTATE TIRES</b><br>10835 N.W. 7TH AVENUE, MIAMI FL 33168  |  | PO# <b>COD</b><br><b>3797</b>                                       | A. Manifest Document #<br><b>174661</b>                                 |   |              |   |
| 2. Generator's Phone ( <b>305</b> ) <b>754-5213</b>  |  | County of Origin ( <b>DADE</b> )                                    | B. Generator's ID #'s<br>EPA _____ STATE _____                          |   |              |   |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166  |  | 4. US EPA ID Number<br><b>FLR000000166</b>                          | C. State Transporter's ID <b>FLR000000166</b>                           |   |              |   |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><b>8470 NW 68 St</b><br><b>Miami, FL 33166</b>  |  | 8.  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |   |              |   |
| 7. Waste shipping & name description<br><b>HM</b>  |  | 8. Containers<br>No. Type   | 9. Total Quantity   | 10. Unit Wt./Vol  | 11. Price    | G<br>CHARGES  |
| <b>USED OIL GALLON</b>   |  |   | <b>300</b>  | <b>gal</b>  | <b>0.25</b>  | <b>75.00</b>  |
| <b>NON REG USED OIL FILTERS</b>  |  | <b>1 Drum</b>   | <b>55</b>   | <b>gal</b>  | <b>45.00</b> | <b>45.00</b>  |
| G<br>E<br>N<br>E<br>R<br>A<br>T<br>O<br>R  |  | <b>pd. # 1678</b><br><b>12-10-18</b>                                |   |   |              |   |
|  |  | H. Additional Descriptions for Materials Listed Above<br><b>COD</b> |   | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |              | I. Total Due<br><b>\$ 120.00</b><br>Please pay on this invoice within 15 days. Thank you. |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also certify that the contents of this consignment contains no hazardous materials. (In the event that these provisions are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |   |   |   |              |   |
| Printed Typed Name<br><b>EMC OIL CORP</b>  |  | Signature<br><i>[Signature]</i>                                     |   | Month Day Year<br><b>12/10/18</b>   |              |   |
| 13. Transporter 1 Acknowledgment of Receipt of Materials   |  |   |   |   |              |   |
| Printed Typed Name<br><b>George Viente</b>   |  | Signature<br><i>[Signature]</i>                                     |   | Month Day Year<br><b>12/10/18</b>   |              |   |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.   |  |   |   |   |              |   |
| Printed Typed Name<br><b>Evelyn Leon</b>   |  | Signature<br><i>[Signature]</i>                                     |   | Month Day Year<br><b>12/10/18</b>   |              |   |
| Below 1000 ppm   |  | Halogen Levels  |   | Above 1000 ppm  |              |   |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**

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**CAN MIX WITH USED OIL**

Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |   |   |   |                                   |
|---|--|---|---|---|-----------------------------------|
| 1. Generator's Name and Mailing Address<br><b>CERTIFIED AUTO</b><br><b>6805 NW 87 AVE, MIAMI FL 33178</b>   |  | PO#<br><b>5970</b>  | A. Manifest Document #<br><b>174700</b>                                 |   |                                   |
| 2. Generator's Phone ( <b>305</b> ) <b>471-8101</b>   |  | County of Origin <b>DADE</b>  | B. Generator's ID #'s<br>EPA _____ STATE _____                          |   |                                   |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>  | C. State Transporter's ID <b>FLR000000166</b>                           |   |                                   |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br><b>8470 NW 68 St</b><br><b>MIAMI, FL 33166</b>   |  | 6.  | D. Transporter's Phone <b>(305) 477-7497</b>                            |   |                                   |
|   |  |   | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |   |                                   |
|   |  |   | F. Facility's Phone   |   |                                   |
| GENERATOR   | 7. Waste shipping & name description   | 8. Containers<br>No. Type   | 9. Total<br>Quantity  | 10. Unit<br>Wt./Vol   | 11. Price<br>G<br>CHARGES         |
|   | HM<br><b>USED OIL GALLON</b>   | <b>1</b> <b>250 gal</b>   |   |   | <b>0.15</b>                       |
|   | <b>RADIATOR FLUID</b>  |   |   |   | <b>0.55</b>                       |
|   | <b>NON REG USED OIL FILTERS</b>  | <b>1</b> <b>55 gal</b>  |   |   | <b>35.00</b>                      |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |   | I. Total Due<br><b>\$72.50</b><br>Please pay on this invoice within 15 days. Thank you. |                                   |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (in the event that these products/material are found to be hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |   |   |   |                                   |
| Printed Typed Name<br><i>[Signature]</i>  |  | Signature<br><i>[Signature]</i>   |   | Month Day Year  |                                   |
| TRANSPORT   | 13. Transporter 1 Acknowledgment of Receipt of Materials.  |   |   |   |                                   |
|   | Printed Typed Name<br><b>GEORGE L. VICENTE</b>   |   | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12 10 18</b> |
| FACILITY  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |   |   |   |                                   |
|   | Printed Typed Name<br><b>Evelyn Leon</b>   |   | Signature<br><i>[Signature]</i>   |   | Month Day Year<br><b>12 10 18</b> |
| Below 1000 ppm  |  | Halogen Levels  |   | Above 1000 ppm  |                                   |

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |   |  |  |                  |
|---|--|---|--|--|------------------|
| 1. Generator's Name and Mailing Address<br><b>UNDER POWER CORP.</b><br>7900 N.W. 60 ST., MIAMI FL 33166   |  | PO# <b>WHT129</b><br><b>3637</b>  |  | A. Manifest Document #<br><b>174721</b>  |                  |
| 2. Generator's Phone (305) 468-9900   |  | County of Origin ( <b>DADE</b> )  |  | B. Generator's ID #'s<br>EPA _____ STATE _____   |                  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>  |  | C. State Transporter's ID <b>FLR000000166</b>  |                  |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORD</b><br><b>8470 NW 68 ST Miami, FL 33166</b>   |  | 6.  |  | D. Transporter's Phone <b>(305) 477-7497</b>   |                  |
|   |  |   |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>                |                  |
|   |  |   |  | F. Facility's Phone  |                  |
| 7. Waste shipping & name description  |  | 8. Containers   |  | 9. Total Quantity  | 10. Unit Wt./Vol |
| HM  |  | No. Type  |  | 11. Price  | G CHARGES        |
| NON REG USED OIL FILTERS  |  |   |  |  | 45.00            |
| USED OIL DRUM   |  | 01 TK   |  | 200  | 6L 30.00         |
| OILY WATER  |  |   |  |  | 0.75             |
| RADIATOR FLUID  |  |   |  |  | 0.75             |
| H. Additional Descriptions for Materials Listed Above<br><b>OIL</b>   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br><b>\$ 600</b><br>Please pay on this invoice within 15 days. Thank you. |                  |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |   |  |  |                  |
| Printed Typed Name<br><b>SHAN G.</b>  |  | Signature<br><i>[Signature]</i>   |  | Month<br><b>12</b>   | Day<br><b>11</b> |
| 13. Transporter 1, Acknowledgment of Receipt of Materials   |  | Signature<br><i>[Signature]</i>   |  | Month<br><b>12</b>   | Day<br><b>11</b> |
| Printed Typed Name<br><b>CHARLIE LEON</b>   |  | Signature<br><i>[Signature]</i>   |  | Month<br><b>12</b>   | Day<br><b>11</b> |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  | Signature<br><i>[Signature]</i>   |  | Month<br><b>12</b>   | Day<br><b>11</b> |
| Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature<br><i>[Signature]</i>   |  | Month<br><b>12</b>   | Day<br><b>11</b> |
| Below 1000 ppm  |  | Halogen Levels  |  | Above 1000 ppm   |                  |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |                                 |   |  |                                   |              |              |
|---|--|--|---------------------------------|---|--|-----------------------------------|--------------|--------------|
| 1. Generator's Name and Mailing Address<br><b>PANTHER LOGISTICS</b><br>8321 NW 90 STREET, MEDLEY FL 33166   |  | PO# <b>BILLING</b><br>7573   |                                 | A. Manifest Document #<br>174660  |  |                                   |              |              |
| 2. Generator's Phone ( 305 ) 471-0993   |  | County of Origin <b>DADE</b>   |                                 | B. Generator's ID #'s<br>EPA _____ STATE _____                          |  |                                   |              |              |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>   |                                 | C. State Transporter's ID <b>FLR000000166</b>                           |  |                                   |              |              |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br>8470 NW 68 St<br>Miami, FL 33166   |  | 6.   |                                 | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |  |                                   |              |              |
|   |  |  |                                 | F. Facility's Phone   |  |                                   |              |              |
| GENERATOR   | 7. Waste shipping & name description<br><b>HM</b>  |  | 8. Containers<br>No. Type       |   | 9. Total Quantity  | 10. Unit Wt./Vol                  | 11. Price    | G<br>CHARGES |
|   | <b>USED OIL GALLON</b>   |  | <b>01 TK</b>                    |   | <b>250</b>   | <b>GL</b>                         | <b>0.30</b>  |              |
|   | <b>USED OIL DRUM</b>   |  |                                 |   |  |                                   | <b>30.00</b> |              |
|   | <b>OILY WATER</b>  |  |                                 |   |  |                                   | <b>0.75</b>  |              |
|   | <b>NON REG USED OIL FILTERS</b>  |  | <b>02 RM</b>                    |   | <b>110</b>   | <b>GL</b>                         | <b>45.00</b> |              |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |                                 |   | I. Total Due<br><b>\$1200</b><br>Please pay on this invoice within 15 days. Thank you. |                                   |              |              |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |                                 |   |  |                                   |              |              |
| Printed Typed Name<br><b>EDUARDO SUAREZ</b>   |  | Signature<br><i>[Signature]</i>  |                                 |   | Month Day Year<br><b>12/11/18</b>  |                                   |              |              |
| TRANSPORT   | 13. Transporter 1 Acknowledgment of Receipt of Materials   |  |                                 |   |  |                                   |              |              |
|   | Printed Typed Name<br><b>CHARLEEN ROJAS</b>  |  | Signature<br><i>[Signature]</i> |   |  | Month Day Year<br><b>12/11/18</b> |              |              |
| FACILITY  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |  |                                 |   |  |                                   |              |              |
|   | Printed Typed Name<br><b>Evelyn Leon</b>   |  | Signature<br><i>[Signature]</i> |   |  | Month Day Year<br><b>12/11/18</b> |              |              |
| Below 1000 ppm  |  | Halogen Levels   |                                 | Above 1000 ppm  |  |                                   |              |              |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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CAN MIX WITH USED OIL  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

**Dade**  
**(305) 477-7497**

**EMC Oil Corporation**  
P.O. Box 520882 - Miami, FL 33152

**Toll Free**  
**(800) 344-8688**



**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |  |  |
|---|--|--|--|--|
| 1. Generator's Name and Mailing Address<br><b>TRANSPORTATION AMERICA</b><br>2760 N.W. 61 ST, MIAMI FL 33142 |  | PO#<br><b>7622-003</b>   | A. Manifest Document #<br><b>174728</b>        |  |
| 2. Generator's Phone ( <b>305</b> ) <b>634-9454</b>   |  | County of Origin ( <b>DADE</b> )   | B. Generator's ID #'s<br>EPA _____ STATE _____ |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166       |  | 4. US EPA ID Number<br><b>FLR000000166</b>                                 | C. State Transporter's ID <b>FLR000000166</b>  |  |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP</b><br><b>8470 NW 68 St Miami, FL 33166</b> |  | 6.   |  | D. Transporter's Phone <b>(305) 477-7497</b> |
|   |  | E. Dade County ID<br><b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |  | F. Facility's Phone                          |

| 7. Waste shipping & name description                      | 8. Containers |      | 9. Total Quantity | 10. Unit Wt./Vol | 11. Price | G |
|---|---------------|------|-------------------|------------------|-----------|---|
|   | No.           | Type |                   |                  |           |   |
| HM<br><input checked="" type="checkbox"/> USED OIL GALLON |               |      | <b>275</b>        |                  | -0.25     |   |
| NON REG USED OIL FILTERS                                  |               |      |                   |                  | 0.00      |   |

|   |   |   |
|---|---|---|
| H. Additional Descriptions for Materials Listed Above | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1½% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. | I. Total Due<br><b>(-\$1875)</b><br>Please pay on this invoice within 15 days. Thank you. |
|---|---|---|

12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.)

|   |                                     |               |                    |                  |                   |
|---|-------------------------------------|---------------|--------------------|------------------|-------------------|
| Printed Typed Name<br><b>Lazaro Bravo</b> | <input checked="" type="checkbox"/> | Signature<br> | Month<br><b>12</b> | Day<br><b>11</b> | Year<br><b>18</b> |
|---|-------------------------------------|---------------|--------------------|------------------|-------------------|

|  |               |                    |                  |                   |  |
|--|---------------|--------------------|------------------|-------------------|--|
| 13. Transporter 1 Acknowledgment of Receipt of Materials |               |                    |                  |                   |  |
| Printed Typed Name<br><b>CHARLIE LEON</b>                | Signature<br> | Month<br><b>12</b> | Day<br><b>11</b> | Year<br><b>18</b> |  |

|  |               |                    |                  |                   |  |
|--|---------------|--------------------|------------------|-------------------|--|
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |               |                    |                  |                   |  |
| Printed Typed Name<br><b>Evelyn Leon</b>   | Signature<br> | Month<br><b>12</b> | Day<br><b>11</b> | Year<br><b>18</b> |  |

|                                     |                |                |                |
|-------------------------------------|----------------|----------------|----------------|
| <input checked="" type="checkbox"/> | Below 1000 ppm | Halogen Levels | Above 1000 ppm |
|-------------------------------------|----------------|----------------|----------------|

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

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Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |  |  |  |                         |
|---|--|--|--|--|--|-------------------------|
| 1. Generator's Name and Mailing Address<br><b>EMC OIL CORP</b><br><b>11900 SW 222 STREET, # C, MIAMI FL 33170</b>   |  | PO#<br><b>8451</b>   | A. Manifest Document #<br><b>174761</b>        |  |  |                         |
| 2. Generator's Phone ( <b>786</b> ) <b>553-5585</b>   |  | County of Origin ( <b>DADE</b> )   | B. Generator's ID #'s<br>EPA _____ STATE _____ |  |  |                         |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>  |  |  |                         |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP</b><br><b>8470 NW 68 St</b><br><b>Miami, FL 33166</b>  |  | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>   |  | E. Dade County ID<br><b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b> |                         |
| 7. Waste shipping & name description  |  | 8. Containers<br>No. Type  | 9. Total<br>Quantity                           | 10. Unit<br>Wt./Vol  | 11. Price  | G<br>CHARGES            |
| <input checked="" type="checkbox"/> <b>USED OIL GALLON</b>  |  |  | <b>500</b>                                     |  | <b>0.35</b>  | <b>175.00</b>           |
| <input type="checkbox"/> <b>OILY WATER</b>  |  |  |  |  | <b>0.75</b>  |                         |
| <input type="checkbox"/> <b>NON REG USED OIL FILTERS</b>  |  |  |  |  | <b>50.00</b>   |                         |
| H. Additional Descriptions for Materials Listed Above<br><b>CHOKNO</b>  |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br><b>175.00</b><br>Please pay on this invoice within 15 days. Thank you. |  |                         |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |  |  |                         |
| Printed Typed Name<br><b>Ladina</b>   |  | Signature<br><b>[Signature]</b>  |  | Month  | Day  | Year                    |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |  |  |  |                         |
| Printed Typed Name<br><b>CHARLIE LEON</b>   |  | Signature<br><b>[Signature]</b>  |  | Month  | Day  | Year<br><b>12/12/18</b> |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |  |  |  |                         |
| Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature<br><b>[Signature]</b>  |  | Month  | Day  | Year<br><b>12/12/18</b> |
| <input checked="" type="checkbox"/> Below 1000 ppm  |  | Halogen-Levels   |  | <input type="checkbox"/> Above 1000 ppm  |  |                         |

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |  |  |  |
|---|--|--|--|--|--|
| 1. Generator's Name and Mailing Address<br><b>FIM AUTO REPAIR</b><br>3940 NW 26 ST, MIAMI FL 33142  |  | PO# <b>EMC LOANER TANK</b><br>4370   |  | A. Manifest Document #<br>174488   |  |
| 2. Generator's Phone ( 305 ) 870-0115   |  | County of Origin ( <b>DADE</b> )   |  | B. Generator's ID #'s<br>EPA _____ STATE _____                                     |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>   |  | C. State Transporter's ID <b>FLR000000166</b>                                      |  |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP.</b><br>8470 NW 68 St<br>MIAMI, FL 33166   |  | 6.   |  | D. Transporter's Phone (305) 477-7497  |  |
|   |  |  |  | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>            |  |
|   |  |  |  | F. Facility's Phone  |  |
| 7. Waste shipping & name description  |  | 8. Containers  |  | 9. Total   |  |
| HM  |  | No. Type   |  | Quantity   |  |
|   |  |  |  | 10. Unit   |  |
|   |  |  |  | Wt./Vol  |  |
|   |  |  |  | 11. Price  |  |
|   |  |  |  | G  |  |
|   |  |  |  | CHARGES  |  |
| NON REG USED OIL FILTERS  |  |  |  | 0.00   |  |
| USED OIL GALLON   |  | 01 TK  |  | 300 GL 0.00  |  |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | i. Total Due<br><b>nc</b><br>Please pay on this invoice within 15 days. Thank you. |  |
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| Printed Typed Name  |  | Signature  |  | Month Day Year   |  |
| <i>[Signature]</i>  |  | <i>[Signature]</i>   |  | 12   12   18   |  |
| 13. Transporter 1. Acknowledgment of Receipt of Materials   |  |  |  |  |  |
| Printed Typed Name  |  | Signature  |  | Month Day Year   |  |
| <b>CHARLIE LEON</b>   |  | <i>[Signature]</i>   |  | 12   12   18   |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |  |  |  |
| Printed Typed Name  |  | Signature  |  | Month Day Year   |  |
| <b>Evelyn Leon</b>  |  | <i>[Signature]</i>   |  | 12   12   18   |  |
| Below 1000 ppm  |  | Halogen Levels   |  | Above 1000 ppm   |  |

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |  |  |
|---|--|--|--|--|
| 1. Generator's Name and Mailing Address<br><b>MIAMI COMPRESSOR REBUILDERS</b><br>3230 N.W. 38 ST, MIAMI FL 33142<br>305 576-1259  |  | PO#<br><b>4690</b>   | A. Manifest Document #<br><b>174756</b>        |  |
| 2. Generator's Phone ( )  |  | County of Origin ( )<br><b>DADE</b>  | B. Generator's ID #'s<br>EPA _____ STATE _____ |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br>8470 N.W. 68th Street, Miami, FL 33166   |  | 4. US EPA ID Number<br><b>FLR000000166</b>   | C. State Transporter's ID <b>FLR000000166</b>  |  |
| 5. Designated Facility Name and Site Address<br><b>E.M.C. OIL CORP</b><br>8470 NW 68 St<br>Miami, FL 33166  |  | 6.   | D. Transporter's Phone <b>(305) 477-7497</b>   |  |
|   |  | E. Dade County ID<br><b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>   |  | F. Facility's Phone  |
| 7. Waste shipping & name description  |  | 8. Containers  | 9. Total Quantity                              | 10. Unit Wt./Vol   |
| HM  |  | No. Type   |  | 11. Price  |
|   |  |  |  | G  |
| USED OIL GALLON   |  | 01 TK  | 500  | 0.25   |
| OILY WATER  |  |  |  | 0.65   |
| CHARGES   |  |  |  |  |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  | I. Total Due<br><b>\$125.00</b><br>Please pay on this invoice within 15 days. Thank you. |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |  |
| Printed Typed Name<br><b>Marylou Hidalgo</b>  |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br><b>12   12   18</b>  |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  | Printed Typed Name<br><b>CHARLE LEON Refondo</b>   |  | Signature<br><i>[Signature]</i>  |
|   |  | Month Day Year<br><b>12   12   18</b>  |  |  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |  |  |
| Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature<br><i>[Signature]</i>  |  | Month Day Year<br><b>12   12   18</b>  |
| Below 1000 ppm  |  | Halogen Levels   |  | Above 1000 ppm   |

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



*2200-001*

|   |  |  |                   |
|---|--|--|-------------------|
| 1. Generator's Name and Mailing Address<br><i>EMC OIL CORP</i>  |  | A. Manifest Document # <i>156327</i>                                       |                   |
| 2. Generator's Phone ( <i>305 477 7497</i> )  |  | B. Generator ID #'s<br>EPA <i>14291</i> STATE <i>33191</i>                 |                   |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b>   |  | C. State Transporter's ID <i>FLR000000166</i>                              |                   |
| 4. US EPA ID Number<br><b>FLR000000166</b>  |  | D. Transporter's Phone <b>(305) 477-7497</b>                               |                   |
| 5. Designated Facility Name and Site Address<br><i>8470 NW 685th Miami, FL 33166</i>  |  | E. Dade County ID<br><i>SW-01124</i><br><i>LW-00227</i><br><i>LW-00273</i> |                   |
| 6. Facility's Phone<br><i>EMC OIL CORP</i>  |  | F. Facility's Phone  |                   |
| 7. Waste shipping & name description  |  | 8. Containers  | 9. Total Quantity |
| HM  |  | No. Type   | Unit Wt./Vol      |
| 10. Price   |  | G  |                   |
| CHARGES   |  |  |                   |
| <input checked="" type="checkbox"/> USED OIL<br>USED OIL FILTERS<br>OILY WATER<br>RADIATOR FLUID<br>NON REG. ABSORBENT MATERIAL<br>OTHER: SPECIFY   |  | 200  |                   |
| H. Additional Descriptions for Materials Listed Above   |  | I. Total Due <i>\$900</i>  |                   |
| IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof.  |  | Please pay on this invoice within 15 days. Thank you.                      |                   |
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| Printed Typed Name<br><i>MANUEL PAEZ</i>  |  | Signature<br><i>[Signature]</i>  |                   |
| Month Day Year<br><i>12 11 18</i>   |  |  |                   |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |                   |
| Printed Typed Name<br><i>Chal. Leon</i>   |  | Signature<br><i>[Signature]</i>  |                   |
| Month Day Year<br><i>12 11 18</i>   |  |  |                   |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |                   |
| Printed Typed Name<br><i>Evelyn Leon</i>  |  | Signature<br><i>[Signature]</i>  |                   |
| Month Day Year<br><i>12 11 18</i>   |  |  |                   |
| Below 1000 ppm  |  | Above 1000 ppm   |                   |
| Halogen Levels  |  |  |                   |

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST



|   |  |  |                           |
|---|--|--|---------------------------|
| 1. Generator's Name and Mailing Address<br><i>Truck Max<br/>6000 NW 75 St</i>   |  | A. Manifest Document #<br>156209   |                           |
| 2. Generator's Phone (305) _____  |  | Generator's ID #s<br>EPA _____ STATE _____   |                           |
| 3. Transporter 1 Company Name<br>EMC Oil Corporation  |  | 4. US EPA ID Number<br>FLR000000166  |                           |
| 5. Designated Facility Name and Site Address<br>EMC OIL CORP<br>8470 NW 69 St, Miami, FL 33166  |  | 6. Dade County ID<br>SW-01124<br>LW-00227<br>LW-00233                                      |                           |
| 7. Waste shipping & name description<br>HM  |  | 8. Containers<br>No. Type  | 9. Total Quantity<br>500  |
|   |  | 10. Unit<br>Wt./Vol  | 11. Price<br>G<br>CHARGES |
| H. Additional Descriptions for Materials Listed Above<br><i>W: PAID</i>   |  | I. Total Due<br><i>(-\$12500)</i><br>Please pay on this invoice within 15 days. Thank you. |                           |
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| Printed Typed Name<br><i>Antonio Romero</i>   |  | Signature<br><i>Antonio Romero</i>   |                           |
| Month Day Year<br>12 10 18  |  |  |                           |
| 13. Transporter 1 Acknowledgment of Receipt of Materials  |  |  |                           |
| Printed Typed Name<br><i>Chal. Leon</i>   |  | Signature<br><i>Chal. Leon</i>   |                           |
| Month Day Year<br>12 10 18  |  |  |                           |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |                           |
| Printed Typed Name<br><i>Evelyn Leon</i>  |  | Signature<br><i>Evelyn Leon</i>  |                           |
| Month Day Year<br>12 10 18  |  |  |                           |
| <input checked="" type="checkbox"/> Below 1000 ppm  |  | Halogen Levels Above 1000 ppm  |                           |

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4205

**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



| 1. Generator's Name and Mailing Address<br><i>Do. A. - Hyun Bn. 1068 NW 125</i>   |  | A. Manifest Document # <i>150329</i>   |                                 |                                |                                   |                                   |         |
|---|--|--|---------------------------------|--------------------------------|-----------------------------------|-----------------------------------|---------|
| 2. Generator's Phone ( )  |  | B. Generator's ID #'s<br>EPA STATE   |                                 |                                |                                   |                                   |         |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   |                                 |                                |                                   |                                   |         |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP</b><br><b>8470 NW 68 St Miami, FL 33166</b>   |  | 6. County of Origin<br><b>Dade</b>   |                                 |                                |                                   |                                   |         |
|   |  | C. State Transporter's ID <b>FLR000000166</b>  |                                 |                                |                                   |                                   |         |
|   |  | D. Transporter's Phone <b>(305) 477-7497</b>   |                                 |                                |                                   |                                   |         |
|   |  | E. Dade County ID<br><b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>   |                                 |                                |                                   |                                   |         |
|   |  | F. Facility's Phone  |                                 |                                |                                   |                                   |         |
| GENERATOR   | 7. Waste shipping & name description   | 8. Containers  |                                 | 9. Total Quantity              | 10. Unit Wt./Vol                  | 11. Price                         | G       |
|   | HM   | No.  | Type                            |                                |                                   |                                   | CHARGES |
|   | <input checked="" type="checkbox"/>  | USED OIL   |                                 |                                | 500                               |                                   |         |
|   |  | USED OIL FILTERS   |                                 |                                |                                   |                                   |         |
|   |  | OILY WATER   |                                 |                                |                                   |                                   |         |
|   |  | RADIATOR FLUID   |                                 |                                |                                   |                                   |         |
|   |  | NON REG. ABSORBENT MATERIAL  |                                 |                                |                                   |                                   |         |
|   | OTHER: SPECIFY   |  |                                 |                                |                                   |                                   |         |
| H. Additional Descriptions for Materials Listed Above   |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/2% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |                                 | I. Total Due                   |                                   | (-\$2000)                         |         |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (In the event that these products/material are found to be Hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  | Printed Typed Name<br><b>SANTIAGO</b>  |                                 | Signature<br><b>X SANTIAGO</b> |                                   | Month Day Year<br><b>12 12 18</b> |         |
| TRANSPORT   | 13. Transporter 1 Acknowledgment of Receipt of Materials   |  |                                 |                                |                                   |                                   |         |
|   | Printed Typed Name<br><b>Chal Leon</b>   |  | Signature<br><b>Chal Leon</b>   |                                | Month Day Year<br><b>12 12 18</b> |                                   |         |
| FACILITY  | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |  |                                 |                                |                                   |                                   |         |
|   | Printed Typed Name<br><b>Evelyn Leon</b>   |  | Signature<br><b>[Signature]</b> |                                | Month Day Year<br><b>12 12 18</b> |                                   |         |
| <input checked="" type="checkbox"/>   | Below 1000 ppm   | Halogen Levels   |                                 | Above 1000 ppm                 |                                   |                                   |         |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**  
Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**  
Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

Dade  
(305) 477-7497

EMC Oil Corporation  
P.O. Box 520882 - Miami, FL 33152

Toll Free  
(800) 344-8688



**UNIFORM WASTE TRANSPORTERS MANIFEST**



NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST

|   |  |  |  |  |                                 |   |                                   |                |  |
|---|--|--|--|--|---------------------------------|---|-----------------------------------|----------------|--|
| 1. Generator's Name and Mailing Address<br><b>3300 SW 11 Ave FT Lauderdale</b>  |  | PO#  |  | A. Manifest Document # <b>156313</b>                       |                                 |   |                                   |                |  |
| 2. Generator's Phone ( )  |  | County of Origin <b>Broward</b>            |  | B. Generator's ID #'s<br>EPA _____ STATE _____             |                                 |   |                                   |                |  |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b>   |  | 4. US EPA ID Number<br><b>FLR000000166</b> |  | C. State Transporter's ID <b>FLR000000166</b>              |                                 |   |                                   |                |  |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL CORP.<br/>2470 NW 68th<br/>Miami FL 33166</b>  |  | 6.   |  | D. Transporter's Phone <b>(305) 477-7497</b>               |                                 |   |                                   |                |  |
|   |  |  |  | E. Dade County ID <b>SW-0124<br/>LW-00227<br/>LW-00233</b> |                                 |   |                                   |                |  |
|   |  |  |  | F. Facility's Phone  |                                 |   |                                   |                |  |
| GENERATOR   | 7. Waste shipping & name description<br><b>HM</b>  |  | 8. Containers<br>No. Type  |  | 9. Total Quantity               | 10. Unit Wt./Vol                                      | 11. Price                         | G              |  |
|   | <b>USED OIL</b>  |  | <b>1 TK</b>  |  | <b>150</b>                      | <b>gls</b>  | <b>\$0.25</b>                     | <b>CHARGES</b> |  |
|   | <b>USED OIL FILTERS</b>  |  |  |  |                                 |   |                                   |                |  |
|   | <b>OILY WATER</b>  |  |  |  |                                 |   |                                   |                |  |
|   | <b>RADIATOR FLUID</b>  |  |  |  |                                 |   |                                   |                |  |
|   | <b>NON REG. ABSORBENT MATERIAL</b>   |  |  |  |                                 |   |                                   |                |  |
|   | <b>OTHER: SPECIFY</b>  |  |  |  |                                 |   |                                   |                |  |
| H. Additional Descriptions for Materials Listed Above   |  |  | IMPORTANT: Payment due upon receipt of invoice. A service charge of 1 1/4% (18% per annum) will be charged on over 30 days past due balance in the event it shall become necessary to collect the herein above sums or any part thereof, the purchaser agrees to pay all the replaceable cost thereof. |  |                                 | I. Total Due<br><b>(\$37.50)</b>                      |                                   |                |  |
|   |  |  |  |  |                                 | Please pay on this invoice within 15 days. Thank you. |                                   |                |  |
| 12. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are all in respects in proper condition for transport by highway according to applicable international and national government regulations. I also confirm that the contents of this consignment contains no hazardous materials. (in the event that these products/material are found to be hazardous, I accept the responsibility for its proper disposal under Federal and State Regulations, including any contamination caused through commingling.) |  |  |  |  |                                 |   |                                   |                |  |
| Printed Typed Name<br><b>[Signature]</b>  |  |  |  | Signature<br><b>[Signature]</b>                            |                                 | Month Day Year<br><b>12/11/18</b>                     |                                   |                |  |
| TRANSPORT   | 13. Transporter 1 Acknowledgment of Receipt of Materials   |  |  |  |                                 |   |                                   |                |  |
|   | Printed Typed Name<br><b>Joel Salumino</b>   |  |  |  | Signature<br><b>[Signature]</b> |   | Month Day Year<br><b>12/11/18</b> |                |  |
|   | 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest. |  |  |  |                                 |   |                                   |                |  |
| Printed Typed Name<br><b>Evelyn Leon</b>  |  |  |  | Signature<br><b>[Signature]</b>                            |                                 | Month Day Year<br><b>12/11/18</b>                     |                                   |                |  |
| <input checked="" type="checkbox"/> Below 1000 ppm  |  | Halogen Levels                             |  | <input type="checkbox"/> Above 1000 ppm                    |                                 |   |                                   |                |  |

Dear Generator: The following chemicals contain hazardous substances which when mixed with used oil reduces the recycling potential and can cause harmful effects to the environment.

**DO NOT MIX WITH USED OIL**

Antifreeze - Freon - Solvents - Thinner - Degreasers - Detergents - Cleaners - Radiator Fluid - Leaded Gasoline - Cutting Oil

**CAN MIX WITH USED OIL**

Motor Oil - Diesel Fuel - Grease - Brake Fluids - Hydraulic Fluids - Transmission Fluids

These lists are based on current information and may be expanded as more data becomes available. THANK YOU

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**UNIFORM WASTE TRANSPORTERS MANIFEST**  
**NO HAZARDOUS MIXTURES ACCEPTED - READ BOTTOM OF MANIFEST**



|   |  |  |   |  |
|---|--|--|---|--|
| 1. Generator's Name and Mailing Address<br><b>JAP TECH #2</b><br><b>7701-B PINES BLVD., PEMBROKE PINES FL 33024</b>   |  | PO#<br><b>1206-002</b>   | A. Manifest Document #<br><b>174742</b> |  |
| 2. Generator's Phone ( <b>954</b> ) <b>985-9855</b>   |  | County of Origin ( <b>BROWARD</b> )  |   | B. Generator's ID #'s<br>EPA _____ STATE _____                                     |
| 3. Transporter 1 Company Name<br><b>EMC Oil Corporation</b><br><b>8470 N.W. 68th Street, Miami, FL 33166</b>  |  | 4. US EPA ID Number<br><b>FLR000000166</b>   |   | C. State Transporter's ID <b>FLR000000166</b>                                      |
| 5. Designated Facility Name and Site Address<br><b>EMC OIL COP</b><br><b>8470 NW 68th</b><br><b>MIAMI, FL 33166</b>   |  | 6.   |   | D. Transporter's Phone (305) <b>477-7497</b>                                       |
|   |  |  |   | E. Dade County ID <b>SW-01124</b><br><b>LW-00227</b><br><b>LW-00233</b>            |
|   |  |  |   | F. Facility's Phone  |
| 7. Waste shipping & name description  |  | 8. Containers  | 9. Total Quantity                       | 10. Unit Wt./Vol   |
| HM  |  | No. Type   |   | 11. Price  |
|   |  |  |   | G  |
| NON REG USED OIL FILTERS  |  |  |   | 0.00   |
| USED OIL GALLON   |  | 1 TK   | 200                                     | 6/5  |
|   |  |  |   | 0.00   |
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| OIL<br>Full   |  |  |   |  |
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| Printed Typed Name<br><b>X DAVID RODRIGUEZ</b>  |  | Signature<br><b>X [Signature]</b>  |   | Month Day Year<br><b>12/11/18</b>  |
| 13. Transporter 1, Acknowledgment of Receipt of Materials   |  |  |   |  |
| Printed Typed Name<br><b>Joel Salamin</b>   |  | Signature<br><b>Joel</b>   |   | Month Day Year<br><b>12/11/18</b>  |
| 14. Facility Owner or Operator: Certification of receipt of waste material covered by this manifest.  |  |  |   |  |
| Printed Typed Name<br><b>Evelyn Leon</b>  |  | Signature<br><b>[Signature]</b>  |   | Month Day Year<br><b>12/11/18</b>  |
| Below 1000 ppm  |  | Halogen Levels   |   | Above 1000 ppm   |

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