

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number FLCESQG	2. Page 1 of 1	3. Emergency Response Phone 305-807-3895	4. Waste Tracking Number 697708	
5. Generator's Name and Mailing Address SHERWOOD AVIATION 4000 NW 128TH STREET OPA LOCKA, FL 33054			Generator's Site Address (if different than mailing address)			
Generator's Phone: 305 47-2994						
6. Transporter 1 Company Name CHEM KLEAN CORPORATION			U.S. EPA ID Number FLR000231258			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address CHEM KLEAN CORPORATION 830 NW 10TH STREET MIAMI, FL 33172			U.S. EPA ID Number FLR000231258			
Facility's Phone: 305-863-7807						
GENERATOR	9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.
			No.	Type		
	1. NON-DOT/NON RCRA REGULATED MATERIAL (TURBO OIL)		01	DM	55	G
	2.					
	3.					
4.						
13. Special Handling Instructions and Additional Information APPROVAL #4990-TURBOOIL-03 1 X 55 HALOGEN SHIFFER TEST PASSED.						
14. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.						
Generator's/Offor's Printed/Typed Name X [Signature]			Signature X [Signature]		Month 10	Day 20
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit: Date leaving U.S.:			
Transporter Signature (for exports only):						
TRANSPORTER	16. Transporter Acknowledgment of Receipt of Materials					
	Transporter 1 Printed/Typed Name C. AREDOSS		Signature [Signature]		Month 10	Day 20
	Transporter 2 Printed/Typed Name		Signature		Month	Day
DESIGNATED FACILITY	17. Discrepancy					
	17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
	Manifest Reference Number:					
	17b. Alternate Facility (or Generator)			U.S. EPA ID Number		
	Facility's Phone:					
17c. Signature of Alternate Facility (or Generator)					Month	Day
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name Christian Ramos			Signature [Signature]		Month 10	Day 31