

**BEFORE THE ENVIRONMENTAL APPEALS BOARD
UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, D.C.**

In re:)
))
))
HAGERSTOWN AIRCRAFT)
SERVICES, INC.,)
 Respondent)
))
Docket No. RCRA-03-2011-0112)

MOTION TO SET ASIDE DEFAULT ORDER AND
TEMPORARILY STAY PROCEEDINGS

Exhibit C

I am forwarding the following items:

1. Time line
2. Change of Site Name
3. Manifest sheets
4. Receipts from Safety – Kleen
5. Photos of shop
6. Contingency Plan
7. MDE – report 5/3/2013
8. MDE – report 6/26/2013
9. Hazardous training
10. Weekly inspection log



14235 Oak Springs Road Hagerstown, Maryland 21742 Telephone 301 733 7604 Fax 301 739 0527

Time line beginning from MDE inspection of 5/3/13

On 5/3/13 Maryland Department of the Environment came to our business for an inspection and made recommendations for the necessary corrective actions to become compliant with their department. Listed below are the actions we have taken so far as of 7/23/13.

Inspectors were Anthony N. Enweze and Paul Sudano Site Complaint #SC-0-13-HAZ-153

1. RCRA Subtitle C site identification form. On 5/8/2013 applied to change the site name to Hagerstown Aircraft Services, Inc. The was completed on 7/16/2013 (see attached)
2. Hired Safety-Kleen Systems, Inc. – waste was removed from the site on 6/21/2013 and 7/19/2013. Please see attached manifests. As of 7/24/2013 we have spent \$2,301.40 to comply with inspection notifications. (attached invoices from Safety-kleen)
3. Labeled barrels and show accumulation start date.
4. Purchased waste boxes 4ft and 8ft fluorescent bulbs. (see attached photo)
5. Container is now provided for spent aerosol cans. (see attached photo)
6. Contingency Plan for hazardous waste has been written with pertinent info regarding an emergency. (copy attached)
7. Weekly inspection log of waste storage containers. (see attached copies)
8. Spill kit has been purchased (see attached photo)
9. Hazardous waste training course has been purchase (see attached)
10. The dryer in the strip shop has been dismantled and disposed of eff 7/24/13 (see attached photos)
11. The solvent recycling system has been repaired and is now recycling thinner. (see photo)
12. Parts washers are located in the engine shop, maintenance shop and sheet metal shop. These parts washers are serviced on a quarterly rotation. (see photos)
13. Oil recycling we have a 300 gallon waste oil recycling container (see photos)
14. Oil filter recycle – two 55 gallon drums for oil filter disposal (see photos)

This Notice confirms that you have filed a Subsequent Notification of Regulated Waste Activity by Letter or RCRA Subtitle C Site Identification Form 8700-12 for the installation located at the address shown below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA) for the EPA Identification Number identified below.

Information from your Subsequent Notification has been used to update our databases and files.

You are required to submit a subsequent notification to the Maryland Department of the Environment ("MDE") if your business moves to another location, if the contact for your site changes, if an additional owner has been added or replaced since you submitted your initial notification, if the generator category changes because of changes in the amount of waste generated or accumulated, or if the type of regulated waste activity you conduct changes.

If you have any questions regarding hazardous waste requirements, please contact the MDE at (410) 537-3400 or check our web site: http://www.mde.state.md.us/programs/Land/HazardousWaste/HazardousWasteHome/Pages/programs/landprograms/hazardous_waste/home/index.aspx

EPA ID NUMBER:

MDD042682398

DATE ISSUED:

July 16, 2013

INSTALLATION MAILING ADDRESS:

Hagerstown Aircraft Services, Inc
ATTN: Kimberly A. Potter
14235 Oak Spring Rd
Hagerstown, Maryland 21742

INSTALLATION LOCATION ADDRESS:

Hagerstown Aircraft Services, Inc
14235 Oak Spring Rd
Hagerstown, MD 21742

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number MDD046282398	2. Page 1 of 1	3. Emergency Response Phone 1-800-468-1768	4. Manifest Tracking Number 003772902 SKS			
5. Generator's Name and Mailing Address HAGERSTOWN AIRCRAFT SERVICE 14235 Oak Springs Rd Hagerstown MD 21742-1331 Generator's Phone: 301-733-7604				Generator's Site Address (if different than mailing address)				
6. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC.				U.S. EPA ID Number		TXR0000081205		
7. Transporter 2 Company Name				U.S. EPA ID Number				
8. Designated Facility Name and Site Address 7408 SAFETY-KLEEN SYSTEMS, INC. 3700 LAGRANGE ROAD SMITHFIELD, KY 40068 Facility's Phone: 502-845-2453				U.S. EPA ID Number		KYD053348108		
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			D001	D004	D005
X	1. UN1263, WASTE PAINT, 3, PG III	0001	DM	0700	P	D006	D007	D008
	2.							
	3.							
	4.							
14. Special Handling Instructions and Additional Information SK SHIP#210534554 61141866 1967396 CSO: 24 HR EMERGENCY #1-800-468-1768 (SAFETY-KLEEN) SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY								
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 ALVIN S. SUMMIT				Signature [Signature]		Month Day Year 06/11/13		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name [Signature]				Signature [Signature]		Month Day Year 06/11/13		
Transporter 2 Printed/Typed Name				Signature		Month Day Year		
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number:								
18b. Alternate Facility (or Generator)						U.S. EPA ID Number		
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H111		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.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number MD0046282398	2. Page 1 of 2	3. Emergency Response Phone 1-800-468-1760	4. Manifest Tracking Number 003772902 SKS			
5. Generator's Name and Mailing Address HAGERSTOWN AIRCRAFT SERVICE 14235 Oak Springs Rd Hagerstown MD 21742-1331 Generator's Phone: 301-733-7604				Generator's Site Address (if different than mailing address)				
6. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC.				U.S. EPA ID Number TXR000081205				
7. Transporter 2 Company Name SJTRANSPORTATION CO				U.S. EPA ID Number NJ0071629976				
8. Designated Facility Name and Site Address 7408 SAFETY-KLEEN SYSTEMS, INC. 3700 LAGRANGE ROAD SMITHFIELD, KY 40068 502-845-2453 Facility's Phone:				U.S. EPA ID Number KYD053348108				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
		No.	Type					
X	1. UN1263, WASTE PAINT, 3, PG III	1500	DM	0500	P	D001	D004	D005
	2.					D006	D007	D008
	3.							
	4.							
14. Special Handling Instructions and Additional Information SK SHIP#210534554 61141856 1967596 CSB: 24 HR EMERGENCY #1-800-468-1760 (SAFETY-KLEEN) SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY BSL 7303804								
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 ALLEN M. SHANMOT				Signature		Month Day Year 06/01/13		
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 John Galt				Signature		Month Day Year 06/01/13		
Transporter 2 Printed/Typed Name R C Slippey JR				Signature		Month Day Year 6/27/13		
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number:								
18b. Alternate Facility (or Generator)						U.S. EPA ID Number		
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H141		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name D. Hester				Signature		Month Day Year 7/6/13		

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

DESIGNATED FACILITY TO GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number MD0046282398	2. Page 1 of 1	3. Emergency Response Phone 1-800-468-1750	4. Manifest Tracking Number 003772903 SKS		
5. Generator's Name and Mailing Address HAZERSTOWN AIRCRAFT SERVICE 14236 Oak Springs Rd Hagerstown MD 21742-1331 Generator's Phone: 301-733-7604				Generator's Site Address (if different than mailing address)			
6. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC.				U.S. EPA ID Number TXR0000081205			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address 113227 CLEAN HARBORS EL DORADO 309 AMERICAN CIRCLE EL DORADO AR 71730 Facility's Phone: 870-863-7173				U.S. EPA ID Number ARD069748192			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes	
		No.	Type				
X	1. NA3082, HAZARDOUS WASTE, LIQUID, N.D.S., (CHROMIUM), 9, PB III	2008	DM	(1000)	P	D007	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information BK SHIP#210534525 61141866 1967596 DSG: 24 HR EMERGENCY #1-800-468-1750 (SAFETY-KLEEN) BK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY							
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 ALAN SHANHOCH				Signature <i>[Signature]</i>		Month Day Year 09/1/13	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ Transporter signature (for exports only): _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name John Carr				Signature <i>[Signature]</i>		Month Day Year 09/01/13	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____							
18b. Alternate Facility (or Generator)				U.S. EPA ID Number			
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H141		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name				Signature		Month Day Year	

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number MDD046282398	2. Page 1 of 1	3. Emergency Response Phone 1-800-468-1760	4. Manifest Tracking Number 003828534 SKS			
5. Generator's Name and Mailing Address HAGERSTOWN AIRCRAFT SERVICE 14235 Oak Springs Rd Hagerstown MD 21742-1831 Generator's Phone: 301-733-7604				Generator's Site Address (if different than mailing address)				
6. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC.				U.S. EPA ID Number TXR000081205				
7. Transporter 2 Company Name				U.S. EPA ID Number				
8. Designated Facility Name and Site Address CLEAN HARBORS ENVIRONMENTAL SERVICES INC 2900 ROCKEFELLER AVE CLEVELAND, OH 44115 Facility's Phone: 216-429-2402				U.S. EPA ID Number OH0000724153				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	X	1. UN1824, WASTE SODIUM HYDROXIDE SOLUTION, 8, PG III		201 DF 0125			P	D002
		2.						
		3.						
		4.						
14. Special Handling Instructions and Additional Information TSD: 119422 61353448 1967586 CSO: 21 24 HR EMERGENCY #1-800-468-1760 (SAFETY-KLEEN) SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY								
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				Signature		Month Day Year		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name				Signature		Month Day Year		
Transporter 2 Printed/Typed Name				Signature		Month Day Year		
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number: _____								
18b. Alternate Facility (or Generator)				U.S. EPA ID Number				
Facility's Phone: _____								
18c. Signature of Alternate Facility (or Generator)						Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H141		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name				Signature		Month Day Year		

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number MDD0046282398	2. Page 1 of 1	3. Emergency Response Phone 1-800-468-1750	4. Manifest Tracking Number 003828536 SKS		
5. Generator's Name and Mailing Address HAGERSTOWN AIRCRAFT SERVICE 14235 Oak Springs Rd Hagerstown MD 21742-1331				Generator's Site Address (if different than mailing address)			
Generator's Phone: 301-733-7604				U.S. EPA ID Number TXR000001205			
6. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC.				U.S. EPA ID Number			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address SAFETY-KLEEN SYSTEMS, INC. 1200 SYLVAN STREET LINDEN, NJ 07036				U.S. EPA ID Number NJ0002182897			
Facility's Phone: 908-862-2000							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
X	1. UN1219, WASTE ISOPROPANOL, 3, PG II	001	DR	450	P	D001	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information TSD: 7404 61353440 1967596 CSB: 31 24 HR EMERGENCY #1-800-468-1750 (SAFETY-KLEEN) SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY							
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				Signature		Month Day Year	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Craig M. Barlow				Signature [Signature]		Month Day Year 07 19 13	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H141		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name				Signature		Month Day Year	

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number MD0046282398	2. Page 1 of 1	3. Emergency Response Phone 1-800-468-1760	4. Manifest Tracking Number 003828535 SKS		
5. Generator's Name and Mailing Address HAGERSTOWN AIRCRAFT SERVICE 14235 Oak Springs Rd Hagerstown MD 21742-1331 Generator's Phone: 301-733-7604				Generator's Site Address (if different than mailing address)			
6. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC.				U.S. EPA ID Number TXR000091205			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address SAFETY-KLEEN SYSTEMS, INC. 3700 LAGRANGE ROAD SMITHFIELD, KY 40068 Facility's Phone: 502-845-2453				U.S. EPA ID Number KYD053348108			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
X	1. NA3092, HAZARDOUS WASTE, LIQUID, N.O.S., (LEAD, BENZENE), 9, PG III	001	DM	0150	P	D005	D019
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information TSD: 7408 61353440 1967596 CSB: 5 24 HR EMERGENCY #1-800-468-1760 (SAFETY-KLEEN) SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY							
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Generator's/Offeror's Printed/Typed Name C. L. ...				Signature C. L. ...		Month Day Year 7/19/13	
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 Craig M. Barlow				Signature Craig M. Barlow		Month Day Year 07/19/13	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____							
18b. Alternate Facility (or Generator)				U.S. EPA ID Number			
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H141		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name				Signature		Month Day Year	

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

Safety-Kleen Systems, Inc.

2600 N Central Expy, Suite 400
Richardson, TX 75080
800-669-5740
410-525-0001

CUSTOMER# 1967596 HAGERSTOWN AIRCRAFT SERVICE
14235 Oak Springs Rd
Hagerstown MD 21742-1331
PHONE 301-733-7604

REFERENCE NBR.
61353440
SRVC WEEK: 2013-29
SRVC DATE: 07/19/13 12:55

BILL TO CUSTOMER# 0001967596 BILL TO ADDRESS:
HAGERSTOWN AIRCRAFT SERVICE
14235 Oak Springs Rd
Hagerstown MD 21742-1331
PHONE 301-733-7604

PURCHASE ORDER#

TAX EXEMPTION NBR

PRODUCT/SERVICES

SERVICE/ PRODUCT	QTY	UNIT PRICE	TAX	TOTAL CHARGE	
651178/ 871352 CONC BASES 15GL SERVICE TERM 1 WEEK	1.000	250.0000	0.00	250.00	
# CONIS: 1 ISDF: MANIFEST#: 003828534SKS FORM CD: US SK SHIP# 210743227 CNI#: 130716952530 QTY: 125 WT/VOL P PROFILE: 0651178 SKD01 7372697					
651162/ 871580 2-PROPANOL (IPA) 55GL SERVICE TERM 1 WEEK	1.000	240.0000	0.00	240.00	
# CONIS: 1 ISDF: 7404 MANIFEST#: 003828536SKS FORM CD: US SK SHIP# 210743240 CNI#: 130716952552 QTY: 450 WT/VOL P PROFILE: 0651162 SKD01 7372696					
651171/ 875000 LQD FOR FUEL 55GL SERVICE TERM 8 WEEK	1.000	99.0000	0.00	99.00	
# CONIS: 1 ISDF: 7408 MANIFEST#: 003828535SKS FORM CD: US SK SHIP# 210743250 CNI#: 130716952576 QTY: 150 WT/VOL P PROFILE: 0651171 SKD01 7372708					
53150 MDL 53 W/PRM SOLVENT S/N 69159357 CLEAN 23 SPENT 0 SERVICE TERM 12 WEEK Placement	1.000	219.6000	13.18	232.78	
100001 FEE, FUEL SURCHARGE	1.000	16.1200	0.97	17.09	
10024 FEE, DEL/SU 53/4 COMS	1.000	0.0000	0.00	0.00	
PROMO NBR: 1					
TOTAL SERVICE/PRODUCTS			824.7200	14.15	838.87
			TOTAL CHARGE		838.87
			CREDITS		0.00
			TOTAL DUE		838.87

UNPAID BALANCE THIS RECEIPT

838.87

Machine clean and good condition? Yes
Lamp Assembly Condition No
Decals in place and legible? Yes
Fusible link installed? Yes
Emergency closing of lid unobstructed? Yes
Machine properly grounded? Yes
Local Phone No. Sticker Affixed to Machine No
Spent solvent meets acceptance criteria? Yes

POSTED

GENERATOR STATUS
220-2200 lbs/month

Customer certifies that (i) the above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and (ii) no material change has occurred either in the characteristics of the waste/material or in the process generating the waste/material. Customer agrees to pay the above charges and to be bound by the terms and conditions (1) set forth in (a) the General Terms and Conditions provided separately to Customer or (b) any SK agreement signed by Customer and SK, and (2) incorporated herein by reference. Unless otherwise indicated in the payment received section, SK is authorized to charge Customer's account for this transaction. Customer certifies that the individual signing this Service Acknowledgement is duly authorized to sign and bind Customer. The following provision is applicable to Safety-Kleen's parts cleaner and paint gun cleaner services: Customer agrees that it will not introduce any substance into the solvent or aqueous cleaning solution, including without limitation any hazardous waste or hazardous waste constituent, except to the extent such introduction is incidental to the normal use of the machine. Customer further agrees that it will not clean parts/paint guns that have been contaminated with or otherwise introduce polychlorinated biphenyls (PCB's), herbicides, pesticides, dioxins or listed hazardous waste into the solvent or aqueous cleaning solution. Safety-Kleen has the capacity and is permitted to accept, store, and/or reclaim the spent parts washer solvent; paint thinners, solvents and paints generated by customer; or dry cleaning filter cartridges, powder, and still residues containing perchloroethylene, petroleum naphtha, or trifluorotrchloroethane dry cleaning solvents. IN THE EVENT OF AN EMERGENCY CALL 24 HR EMERGENCY # 1-800-468-1760 (Safety-Kleen Contract

838.87 +
85.00 +
85.00 +
1,140.87 +
143.66 +
2,301.40 *

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PROTECTION CHOICES PEOPLE
MAKE GREEN WORK

SAFETY-KLEEN SYSTEMS, INC
2600 North Central Expressway Ste 400
Richardson, TX 75080

DUNS NO: 05-397-6551
FED ID NO: 39-6090019

INVOICE

Billing Account #	Service Account #	Invoice #	Invoice Date
1967596	1967596	61252112	07/03/13

Billing Address
HAGERSTOWN AIRCRAFT SERVICE
14235 OAK SPRINGS RD
HAGERSTOWN MD 21742-1331

Service Address
HAGERSTOWN AIRCRAFT SERVICE
14235 OAK SPRINGS RD
HAGERSTOWN MD 21742-1331

Branch Location
BR BALTIMORE

Terms
Net 30

For Questions Call:
410-525-0001

Service Date
06/27/13

PO Number	Department #	Department	Manifest #	Tax Status/#

QUANTITY	PART#	TERM	SERIAL/PROFILE #	UNIT PRICE	UOM	SALES TAX	TOTAL
1	82119	8	PROFILE, QUICK PICK SURVEY	\$85.0000	EA	\$0.00	\$85.00

SUBTOTAL	\$85.00
TOTAL TAX	\$0.00
TOTAL AMOUNT DUE	\$85.00

**

Comments:

Pay Your Invoice Online! You can also opt for paperless billing with our new customer portal. Simply go to www.safety-kleen.com and click on My Account.

POSTED

Please be advised delinquent payments may result in a Late Payment Charge of \$25.



SAFETY-KLEEN SYSTEMS, INC
2600 North Central Expressway Ste 400
Richardson, TX 75080

Billing Account #	Service Account #	Invoice #	Invoice Date
1967596	1967596	61252112	07/03/13

PLEASE RETURN THIS PORTION WITH PAYMENT.
MAKE ANY ADDRESS CORRECTIONS BELOW

Date Due	Amount Due
08/02/13	\$85.00

000612521120001967596700000085005

MDG2012 00000624 1 MB 0405 9 1
HAGERSTOWN AIRCRAFT SERVICE
14235 OAK SPRINGS RD
HAGERSTOWN MD 21742-1331



SAFETY-KLEEN SYSTEMS, INC.
PO BOX 382066
PITTSBURGH, PA 15250-8066





SAFETY-KLEEN SYSTEMS, INC
2600 North Central Expressway, Ste 400
Richardson, TX 75080

DUNS NO: 05-397-5551
FED ID NO: 39-6090019

Billing Address

HAGERSTOWN AIRCRAFT SERVICE
14235 OAK SPRINGS RD
HAGERSTOWN MD 21742-1331

Service Address

HAGERSTOWN AIRCRAFT SERVICE
14235 OAK SPRINGS RD
HAGERSTOWN MD 21742-1331

Branch Location
BR BALTIMORE

Terms
Net 30

For Questions Call:
410-525-0001

Service Date
06/12/13

INVOICE

Page 1 of 1

Billing Account #	Service Account #	Invoice #	Invoice Date
1967596	1967596	61089051	06/13/13

PO Number

Department #

Department

Manifest #

Tax Status/#

QUANTITY	PART#	TERM	SERIAL/PROFILE #	UNIT PRICE	UOM	SALES TAX	TOTAL
1	82119	8	PROFILE QUICK PICK SURVEY	\$85.0000	EA	\$0.00	\$85.00

SUBTOTAL \$85.00
TOTAL TAX \$0.00
TOTAL AMOUNT DUE **\$85.00**

Comments:

Pay Your Invoice Online! You can also opt for paperless billing with our new customer portal. Simply go to www.safety-kleen.com and click on My Account.

POSTED

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PROTECTION-CHOICES PEOPLE
MAKE GREEN WORK

SAFETY-KLEEN SYSTEMS, INC
2600 North Central Expressway, Ste 400
Richardson, TX 75080

DUNS NO: 05-397-6551
FED ID NO: 39-6090019

INVOICE

Billing Account #	Service Account #	Invoice #	Invoice Date
1967596	1967596	61141866	06/24/13

Billing Address
HAGERSTOWN AIRCRAFT SERVICE
14235 OAK SPRINGS RD
HAGERSTOWN MD 21742-1331

Service Address
HAGERSTOWN AIRCRAFT SERVICE
14235 OAK SPRINGS RD
HAGERSTOWN MD 21742-1331

Branch Location
BR BALTIMORE

Terms
Net 30

For Questions Call:
410-525-0001

Service Date
06/21/13

PO Number	Department #	Department	Manifest #	Tax Status/#
06 21 13			003772903SXS	

QUANTITY	PART#	TERM	SERIAL/PROFILE #	UNIT PRICE	UOM	SALES TAX	TOTAL
2	871030	12	641720	\$400.0000	DR	\$0.00	\$800.00
	Paint Stripper						
1	875000	12	641716	\$99.0000	DR	\$0.00	\$99.00
	Petroleum distillate based paints consolidated in drums						
1	53150	12	67596	\$219.6000	EA	\$13.18	\$232.78
	30G PARTS WASHER SERVICE - SOLVENT						
0	8003369	12		\$0.0000	EA	\$0.00	\$0.00
	DRUM OPEN HEAD 55GL - BLACK - USED						
1	100001	24		\$16.1200	EA	\$0.97	\$17.09
	FEE FUEL SURCHARGE						
1	3230	24		\$0.0000	EA	\$0.00	\$0.00
	TAX HANDLING N/C DRUM DROP 30						
1	10024	24		\$0.0000	EA	\$0.00	\$0.00
	FEE DEL/SU 53/4 COMS						
2	874875	24		\$0.0000	EA	\$0.00	\$0.00
	SAMPLE TRANSFER						

SUBTOTAL \$1,134.72
 TOTAL TAX \$14.15
TOTAL AMOUNT DUE \$1,148.87

Comments:
 Pay Your Invoice Online! You can also opt for paperless billing with our new customer portal. Simply go to www.safety-kleen.com and click on My Account.

Please be advised delinquent payments may result in a Late Payment Charge of \$25.





SAFETY-KLEEN SYSTEMS, INC
 2600 North Central Expressway Ste 400
 Richardson, TX 75080

DUNS NO: 05-397-6551
 FED ID NO: 39-6090019

INVOICE

Billing Account #	Service Account #	Invoice #	Invoice Date
1967596	1967596	61204453	06/28/13

Billing Address
 HAGERSTOWN AIRCRAFT SERVICE
 14235 OAK SPRINGS RD
 HAGERSTOWN MD 21742-1331

Service Address
 HAGERSTOWN AIRCRAFT SERVICE
 14235 OAK SPRINGS RD
 HAGERSTOWN MD 21742-1331

Branch Location
 BR BALTIMORE

Terms
 Net 30
Service Date
 06/26/13

PO Number Department # Department Manifest # Tax Status/#

QUANTITY	PART#	TERM	SERIAL/PROFILE #	UNIT PRICE	UOM	SALES TAX	TOTAL
1	3207	24		\$53.1000	EA	\$0.00	\$53.10
	BOX FLOR BULBS 8"						
1	3383	12		\$10.0000	EA	\$0.00	\$10.00
	55 GALLON DRUM - USED OIL FILTERS						
1	8003369	12		\$76.0000	EA	\$4.56	\$80.56
	DRUM OPEN HEAD 55GL - BLACK - USED						
2	3230	24		\$0.0000	EA	\$0.00	\$0.00
	TAX HANDLING INC DRUM DROP 30						

SUBTOTAL \$139.10
 TOTAL TAX \$4.56
TOTAL AMOUNT DUE \$143.66

Comments:
 Pay Your Invoice Online! You can also opt for paperless billing with our new customer portal. Simply go to www.safety-kleen.com and click on My Account.

POSTED

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