

Appendix H
Waste Disposal Information

Waste Generation Report PCB Decontamination Activities - Southern Iowa Mechanical Site U.S. EPA Region VII CERCLIS SSID # A7K9 GES Project # 010901										
Manifest Number	Line No. from Manifest	Date Shipped	Volume	Units	Waste Shipping Name and Description	Method of Disposal	Disposal Facility	Unit Price	Transportation Cost	Total Amount Billed to Client
		9/4/2009	4.87	Tons	Contaminated Soil plus cleanup debris, PCB < 1 ppm	Landfill	Metro Waste Authority	\$ 50.00	\$ 1,065.00	\$ 1,504.78
		9/10/2009	11.03	Tons	Contaminated Soil plus cleanup debris, PCB < 1 ppm	Landfill	Metro Waste Authority	\$ 50.00	\$ 2,190.65	\$ 3,153.70
004646872 JJK	1	8/27/2009	4	drums	UN3077, Environmentally Hazardous Substance, Solid, n.o.s., (Polychlorinated biphenyls), 9, PCIII	Incineration	Clean Harbors	\$ 273.74	\$ 129.56	\$ 1,855.18
82709	1	8/27/2009	4	drums	Contaminated Soil plus cleanup debris, PCB < 1 ppm	Landfill	Metro Waste Authority	\$ 97.57	\$	\$ 448.82
		7/31/2009	1	load	Triad Transport - Rolloff Delivery	N/A	N/A	\$ -	\$ 2,168.71	\$ 2,494.02
		9/21/2009	1	load	Triad Transport - Rolloff Rental 8/1/09 to 8/31/09	N/A	N/A	\$ -	\$ 248.00	\$ 285.20
		10/1/2009	1	load	Triad Transport - Rolloff Rental 9/1/09 to 9/10/09	N/A	N/A	\$ -	\$ 80.00	\$ 92.00
Total Amount Billed for Transportation & Disposal Services									Grand Total \$	9,833.70

CERCLA OFF-SITE DISPOSAL REPORT

Information Required for CERCLA Off-site Waste Management Activities.

1. Superfund Site name/State/CERCLIS SSID number:
Southern Iowa Mechanical Site
3043 Pawnee Drive
Ottumwa, IA. 52501
CERCLIS SSID # A7K9

2. Type of action (Check two)

Removal Fund-financed
 Remedial PRP-financed

3. Type (check one) and form (check one) of waste; if more than one type, attach separate sheets for this and remaining questions for each type:

Type:	Form:
<input type="checkbox"/> solvents	<input type="checkbox"/> wastewater
<input type="checkbox"/> dioxins/furans	<input type="checkbox"/> liquid waste
<input type="checkbox"/> cyanides	<input type="checkbox"/> organic sludge
<input type="checkbox"/> heavy metals	(> 1% total solids)
(specify metals) _____	<input type="checkbox"/> inorganic sludge
<input type="checkbox"/> acids	(< 1% total org. carbon)
<input type="checkbox"/> PCBs	<input type="checkbox"/> contaminated soil
<input type="checkbox"/> halogenated organics	and debris
<input type="checkbox"/> other RCRA-listed hazardous	<input checked="" type="checkbox"/> solid or solidified
Wastes	
<input checked="" type="checkbox"/> non-hazardous or de-listed wastes	

4. Quantity of waste:

<input type="checkbox"/> cubic yard (CY)	<input type="checkbox"/> 15.9 tons
<input type="checkbox"/> gallons (gal)	<input type="checkbox"/> lab packs
<input checked="" type="checkbox"/> 4 drums	<input type="checkbox"/> boxes

5. Range, average, and/or representative concentrations of the contaminants of concern:

Contaminated Soil plus cleanup debris, PCB < 1 ppm

6. Pre-treatment of waste before transportation: **NONE**

<input type="checkbox"/> precipitation	<input type="checkbox"/> neutralization
<input type="checkbox"/> solidification	<input type="checkbox"/> fixation
<input type="checkbox"/> stabilization	<input type="checkbox"/> other(_____)

7. Receiving RCRA facility name/location/I.D. number/units:

Metro Waste Authority
12181 NE University Avenue
Mitchellville, IA 50169
IOAWA Solid Waste Permit # 77-SDP-01-72

8. Receiving Region: 7

9. Receiving Region Off-site Contact (RROC): **Mary Bitney**

10. Date (s) of shipments:	Date	Manifest Number	Line Item	Quantity
	8/27/09	82709	1	4 drums
	9/4/09	N/A		4.87 tons
	9/10/09	N/A		11.03 tons

11. Pre-treatment of waste at site before final treatment or disposal: **None**

12. Final method of treatment or disposal/unit receiving:

<input type="checkbox"/> precipitation	<input type="checkbox"/> neutralization
<input type="checkbox"/> incineration	<input checked="" type="checkbox"/> landfill
<input type="checkbox"/> land treatment	<input type="checkbox"/> injection
<input type="checkbox"/> recovery/re-use	<input type="checkbox"/> other (Fuels Blending)

13. Cost of activities:

Total T&D Cost \$ 7,978.52



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF NATURAL RESOURCES
RICHARD A. LEOPOLD, DIRECTOR

August 31, 2009

To: DAN CLINGAN, PROJECT MANAGER
DICO, INC.
C/O GREENLEAF ENVIRONMENTAL GP
4943 AUSTIN PARK AVE
BUFORD, GA 30518
BECKY WEHRMAN
METRO WASTE AUTHORITY
1105 PRAIRIE DR. SW
BONDURANT IA 50035

Re: New Special Waste Authorization # 77-SWA-75-09

The following special waste authorization (SWA) applies ONLY to the waste generator addressed above. This authorization allows the waste generator to dispose of the special waste referenced in accordance with the instructions, conditions and limitations contained in this SWA. A copy of this SWA must accompany the hauler to the landfill. The waste generator shall notify the department and landfill, prior to disposal, of any change in the characteristics of the special waste being disposed.

The issuance of an SWA does not obligate any waste disposal facility to accept the waste nor does it preclude the facility from imposing restrictions other than those listed in the SWA. The landfill has the final decision whether to accept the special waste. The issuance of an SWA does not exempt the waste generator from any local, state or federal laws or regulations. The department may revoke an SWA for cause at any time.

WASTE & VOLUME: One time disposal of approximately 80,000 pounds of soil scraping, PPE, and visqueen resulting from site cleanup. This waste was generated at 3043 Pawnee Drive in Ottumwa.

GENERATOR: Dan Clingan
Dico, Inc. 5317-407-3248

ISSUE DATE: August 31, 2009

EXPIRATION DATE: November 31, 2009

DISPOSAL SITE: Metro Park East Sanitary Landfill (77-SDP-01-72)

SWA CONTACT: Becky Wehrman - (515) 333-4432

Authorized by: Susan Johnson
Iowa Department of Natural Resources

If you have questions regarding this authorization, please contact Susan Johnson at 515-281-7982.

cc: Iowa DNR Field Office #5, Des Moines, IA

METRO WASTE AUTHORITY

Metro Park East Landfill
12181 NE University Avenue, Mitchellville, Iowa 50189 Phone: 515-967-2076

MEMORANDUM

DATE: 9/03/09
TO: Dan Clingan
FROM: Deb Danley

SUBJECT: Special Waste Permit Approval

Metro Park East Landfill hereby provides formal notice of its intention to accept the following material for disposal:

SWCS-low level PCB soil and absorbant.

This is under permit # 904.

Included please find the approved permit. If you have any questions on this matter, please feel free to contact Mike Fairchild, Operations Manager, at 515-333-4447.

Thank you.

Metro Waste Authority Special Waste Permit

904 MPE Permit Number
In process DNR Permit Number

Basic Job Information

Customer # 60 MWA Contact Person Becky General Material Description:
Job # 904 Out of Service Area? Yes-released SWCS - low level PCB soil and absorbent

Job Details

MPE Expiration:	<u>11/30/2009</u>	Waste Generator Name/Contact	<u>Dico, Inc</u>
DNR Expiration:	<u>In process</u>	Address/Phone	<u>3043 Pawnee Dr., Okemwa, IA 52501</u>
Material Code	<u>SWCS</u>	Contractor Name/Contact	<u>Greenleaf Envi 317-407-3248</u>
Rate	<u>\$50/ton</u>	Address/Phone	
Quantity/Load	<u>Den Clingan</u>	Customer Billed	<u>60</u>
Total Quant Permitted	<u>20 Tons</u>	Hauler Name/Phone	<u>TriAd</u>
Current Amount		Site Address if Different	<u>3043 Pawnee Dr., Okemwa, IA 62501</u>

Delivery Instructions

Thank you for your business. This permit allows delivery of the ONLY the identified special waste as described above. Special waste is managed differently than typical refuse and is only accepted as weather conditions allow. Failure to contact the scale house may result in refusal at the gate. Metro Park East Landfill is located at 12181 NE 12th Ave, Mitchellville which is approximately five miles east of Southeast Polk High School on University Ave (Hwy 163). Questions regarding permitting, delivery or other special waste jobs can be directed to Becky Wehman at 515-333-4432.

DELIVERY DAY PROCEDURE

1. Call the scale house at 515-333-4432 or 515-333-4432
2. Have copy of THIS permit with driver
3. Failure to follow steps 1 and 2 may result in refusal at gate

Instructions/Notes: Place in hole #2 with heavy face. Cover with refuse prior to completion.

APPROVALS: Authorized Signature for Metro Waste Authority
 Printed Name _____ Date 9-5-09

Analytical Laboratory Report

Client Identification:	Stinson Morrison Hecker LLP	Sample Matrix:	Soil/Solid
Fibertec Project Number:	35396	Sample Number:	35396-005

Client Sample Information

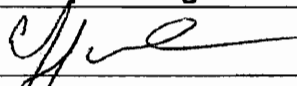
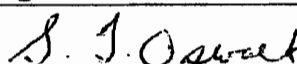
Project Identification:	SIM-Ottumwa PCB Site	Client Sample Description:	Rolloff Composite
Project Number:	NA	Client Sample Number:	5
Sample Date:	8/11/2009	Chain of Custody Number:	89300

Comments: **All Results Reported On Dry Weight Basis. Percent Moisture = 7.78%.**

Definitions/ Qualifiers:	A: Spike recovery or precision unusable due to dilution. B: The analyte was detected in the associated method blank. E: The analyte was detected at a concentration greater than the calibration range, therefore the result is estimated.	J: The concentration is an estimated value. U: The analyte was not detected at or above the reporting limit.	X: Matrix Interference has resulted in a raised reporting limit or distorted result. W: Results reported on a wet-weight basis. *: Value reported is outside QA limits
-----------------------------	--	---	--

Analyte	Result	Units	Report Limit	Dilution Factor	Prep Batch	Prep Date/Time	Analysis Date/Time	Analyst
Dry Weight Determination (ASTM D 2974-87)								
Percent Moisture (Water Content)	7.8	%	0.1	1	MC090814	8/18/2009	8/19/2009	BMG
Polychlorinated Biphenyls (PCBs) (EPA 3550B/EPA 8082)								
Aroclor-1016	U	µg/kg	330	1	PS09H14F	8/14/2009	8/17/2009	TMC
Aroclor-1221	U	µg/kg	330	1	PS09H14F	8/14/2009	8/17/2009	TMC
Aroclor-1232	U	µg/kg	330	1	PS09H14F	8/14/2009	8/17/2009	TMC
Aroclor-1242	U	µg/kg	330	1	PS09H14F	8/14/2009	8/17/2009	TMC
Aroclor-1248	U	µg/kg	330	1	PS09H14F	8/14/2009	8/17/2009	TMC
Aroclor-1254	390	µg/kg	330	1	PS09H14F	8/14/2009	8/17/2009	TMC
Aroclor-1260	U	µg/kg	330	1	PS09H14F	8/14/2009	8/17/2009	TMC
Aroclor-1262	U	µg/kg	330	1	PS09H14F	8/14/2009	8/17/2009	TMC
Aroclor-1268	U	µg/kg	330	1	PS09H14F	8/14/2009	8/17/2009	TMC

NON-HAZARDOUS WASTE MANIFEST

Load Number:		Date:	
Generator Information:		Generator Information- Send Manifest to:	
DICO Inc. 3043 Pawnee Ottumwa, IA 52501		Legal Dept. Titan International Inc 2701 Spruce St. Quincy, IL 62301	
Contractor Information, (Emergency Contact)		Hauler Information:	
Greenleaf Environmental 4943 Austin Park Av. Buford GA 30518		J. Pettiecord Inc. 5043 NE 22 nd Street Des Moines, IA 50131 Phone: 515-263-8900	
Disposal Facility or Staging Area Location:			
Metro Waste Authority 12181 E University Mitchellville, IA			
Waste Shipping Name and Description		Unit Wt./Vol.	Quantity
Contaminated Soil, PCB less than 1 PPM Plus Cleanup debris			Cubic Yard 20CU Y
Transporter Name	Transporter Signature	Date	
Ch. L. Alexander		9-4-09	
Disposal Facility Receipt of Materials			
Printed Name	Signature	Date	
S.T. OSWALT		9 4 09	



Metro Waste Authority

300 E. Locust St. • STE. 100
Des Moines, IA 50309
www.mwaloday.com

SITE		INVOICE #		GRID		WEIGHMASTER	
03		30006499		PH 2A		Josie	
DATE IN	DATE OUT	TIME IN	TIME OUT	VEHICLE	ROLL OFF		
09/04/09	09/04/09	10:21	10:38	WGH			
REFERENCE				ORIGIN			
904							

000050 SPECIAL WASTE CASH CUSTOMER

Manual Gross Wt. 41900 LB
Scale 2 Tare Wt. 32160 LB
Net Weight 9740 LB

Inbound - Cash ticket

Thank You For Your Business

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	DNR FEE/TAX	TOTAL
4.87	TON	CONTAMINATED SOIL	46.350	226.22	17.78	244.00
		<i>CLIP TICKET 876</i>				
Please Pay From This Invoice						

We are continuously improving the MPE landfill.
The landfill is open 6:30 a.m. - 4:30 p.m. Monday - Friday
and 7:00 a.m. - 2:00 p.m. on Saturday. Closed Sunday and
holidays. Scale House phone: (515)333-4448

HANDLING DICO, INC.
COMMENTS 3043 PAWNEE DR.
COMMENTS OTTUMWA, IA 52501
COMMENTS SW CS PETTI 876
SIGNATURE _____

NET AMOUNT	
244.00	TENDERED
244.00	CHANGE
0.00	CHECK NO.
CC	

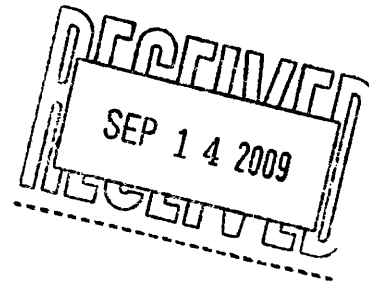
J. Pettiecord, Inc.

5043 NE 22nd Street
Des Moines, Iowa 50313

Invoice

Date	Invoice #
9/10/2009	24422

Bill To
Greenleaf Environmental 4943 Austin Park Ave Buford, GA 30518



S.O. No.	P.O. No.	Terms	JPI Job Number
282		Net 30	

Item	Description	Invoiced	Rate	Amount
	Rolloff Dumpster to Ottumwa Iowa for Project at DICO Inc. 8-25-09			
Roll off Truck	Roll off Truck	4	60.00	240.00
Truck Driver	Truck Driver per hour	4	48.00	192.00
	9-4-09			
Roll off Truck	Roll off Truck	4.75	60.00	285.00
Truck Driver	Truck Driver per hour	4.75	48.00	228.00
Roll off Container	Roll off Container	8	15.00	120.00

010901
SFM

Total	\$1,065.00
Payments/Credits	\$0.00
Balance Due	\$1,065.00

NON-HAZARDOUS WASTE MANIFEST

Load Number:		Date:	
Generator Information:		Generator Information- Send Manifest to:	
DICO Inc. 3043 Pawnee Ottumwa, IA 52501		Legal Dept. Titan International Inc 2701 Spruce St. Quincy, IL 62301	
Contractor Information, (Emergency Contact)		Hauler Information:	
Greenleaf Environmental 4943 Austin Park Av. Buford GA 30518		TriAd Transport, Inc 5900 Triad Road McAlester, OK 74501 Phone: (918) 426-4751	
Disposal Facility or Staging Area Location:			
Metro Waste Authority 12181 E University Mitchellville, IA			
Waste Shipping Name and Description	Unit Wt./Vol.	Quantity	
Contaminated Soil, PCB less than 1 PPM Plus Cleanup debris		Cubic Yard 20CU Y	
Transporter Name	Transporter Signature	Date	
Disposal Facility Receipt of Materials			
Printed Name	Signature	Date	
Josie Lehman	<i>Josie Lehman</i>	9-10-09	



Metro Waste Authority

300 E. Locust St. • STE. 100
Des Moines, IA 50309
www.mwatoday.com

000050 SPECIAL WASTE CASH CUSTOMER

SITE		INVOICE #		GRID		WEIGHMASTER	
03		30008242		PH 2A		Josie	
DATE IN	DATE OUT	TIME IN	TIME OUT	VEHICLE	ROLL OFF		
09/10/09	09/10/09	10:20	10:58	WGH			
REFERENCE				ORIGIN			
904							

Manual Gross Wt. 64840 LB
 Scale 2 Tare Wt. 42780 LB
 Net Weight 22060 LB

Inbound - Cash ticket

Thank You For Your Business

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	DMR FEET/AX	TOTAL
11.03	TON	CONTAMINATED SOIL	46.350	511.74	40.26	552.00

Please Pay From This Invoice

We are continuously improving the MPE Landfill.

The landfill is open 6:30 a.m. - 4:30 p.m. Monday - Friday and 7:00 a.m. - 2:00 p.m. on Saturday. Closed Sunday and holidays. Scale House phone: (515)333-4448

HANDLING DFCO, INC.
 COMMENTS 3043 PAMNEE DR.
 COMMENTS OTTUMWA, IA 52501
 COMMENTS SW CS TRIAD 1056
 SIGNATURE

NET AMOUNT	552.00
TENDERED	
CHANGE	552.00
CHECK NO.	0.00
CC	

UNIFORM STRAIGHT BILL OF LADING
Original — Not Negotiable
TRIAD TRANSPORT, INC.

288918

TEL: 918-426-4751 800-364-1139 FAX: 918-426-2865
SPLIT: YES NO EPA ID#: OKD981588791

TRUCK #: 1056

P. O. # _____ MANF#: _____ LOAD #: _____ PRO #: 1213883 TRAILER #: 252

JIN: <u>Triad Transport Ponca City OK</u>		DESTINATION: <u>Ponca City OK</u>	
SHIPPER: <u>Triad Transport</u>		CONSIGNEE: <u>Triad Transport</u>	
STREET: _____		STREET: _____	
CYST: <u>Ponca City OK</u> ZIP _____		CYST: <u>Ponca City OK</u> ZIP _____	

NO. SHIPPING UNITS	H M	KIND OF PACKAGES DESCRIPTION OF ARTICLES (IF HAZARDOUS MATERIALS - PROPER SHIPPING NAME)	HAZARD CLASS	I. D. NUMBER	PACKING GROUP	TYPE OF CONTAINER	WEIGHT SUBJECT TO CORRECTION
X		R10 Box #8599		See Manifest			

Subject to Section 7 of Conditions of Applicable Bill of Lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

R. S.
(Signature of Consignor)

Where the applicable tariff provisions specify a limitation of the carrier's liability (NMFC Item 172), if there is no release or value declaration by the shipper, and the shipper does not declare a value or release the carrier's liability, that liability shall be limited to the extent provided by NMFC Item 172. California intrastate shipments must comply with NMFC Item 173.

* If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight".
NOTE—To obtain greater coverage for this shipment in excess of that afforded by the carrier's tariff, in addition to the requirements for obtaining excess coverage in such tariff, the shipper must enter the value of the shipment and check the box indicating excess coverage.

Per _____ VALUE: _____ CHECK HERE FOR EXCESS COVERAGE:

AGENCY CONTACT: _____
COMMENTS: Loaded Pick up only
Stop #2 Southern Iowa Mechanical Ottumwa IA
Stop #3 Metro West Authority Mitchellville IA

	YES	NO
PLACARDS REQUIRED		X
PLACARDS SUPPLIED BY SHIPPER		
TRIAD PLACARDS		

The property received in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or lawfully filed tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or lawfully filed tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

LINERS FURNISHED BY: TRIAD CUSTOMER / VEHICLE FURNISHED BUT NOT USED: YES NO

LOADING	ACTION	UNLOADING
9/10/09 0800	DATE & APPOINTMENT TIME	9/10/09
0900	ACTUAL ARRIVAL DATE & TIME	
0830	DETENTION END TIME	

REMINDER
Wear P.P.E. when needed, be sure Trailer is Clean; Observe Facility Rules;
Observe Loading/Unloading & Make Accurate Count; Be sure Manifest is Accurate & Complete;
Check Compatibility of Hazardous Materials-DO NOT HAUL INCOMPATIBLE MATERIALS;
Secure and Weigh Load-Check Axle Weights—DO NOT HAUL OVERWEIGHT.

LOADING OF TRIAD EQUIPMENT IS ACKNOWLEDGEMENT OF THE ACCEPTANCE BY THE CUSTOMER OF THE TERMS AND CONDITIONS PROVIDED ON THE SHIPMENT CONFIRMATION.

Equipment Condition: _____

Shipper per _____ Date _____ Consignee per [Signature] Date 9-10-09
C or per [Signature] Date 9/10/09 Print Name: Pinnic Staley

Work requested outside scope of Standard Operating Procedure: _____

Person Requesting Work: (SIGNATURE) _____ D1174 _____ Date _____

TRIAD TRANSPORT, INC.

P. O. BOX 818 • McALESTER, OK 74502
918 426-4751

INVOICE DATE
9/16/09

INVOICE NUMBER
1213883-00

SHIPPER
TRIAD TRANSPORT
PONCA CITY OK 74600000

CONSIGNEE
TRIAD TRANSPORT
PONCA CITY OK 74600000

BILL TO
GREENLEAF ENVIRONMENTAL GROUP
4943 AUSTIN PARK AVE
BUFORD GA 30518

PLEASE PAY FROM THIS INVOICE

EXCEPTIONS MUST BE NOTED ON DELIVERY RECEIPT

BTC- 10727 THIRD PARTY

B/L NUMBER 288918 TRACTOR NO. 1056 TRAILER NO. 252 SHIP DATE 9/09/09

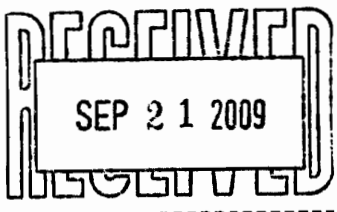
QUANTITY	DESCRIPTION OF ARTICLES AND REMARKS	WEIGHT	RATE	CHARGES
1.00	EMAIL THIS FOR GAR MOB/DEMOB CHARGE S/O SOUTHERN IOW OTTUMWA S/O METRO WASTE MITCHELLVILLE FUEL SURCHARGE	44000	1.75282 MI NC NC 17.50000 PCT	1865.00 325.85
1.00	Delivered 9/11/09 9:00AM	44000	TOTAL	2190.85

"Upon failure to pay freight charges within our Standard Credit Period, we reserve the right to add Interest Charges, Service Charges and any Collection Cost, and Legal Fees we may incur."

PAY THIS AMOUNT 2190.85

STANLEY STANLEY RINNIE LEE

US



Brian Mills

Metro Waste Authority
MPE Special Waste Application

Faxed to MPC?
 Faxed to CO?

This is a new job.
 This is an update to an existing job.

PCB Interns Permit Non-PCB Interns Analytica attached? in process DNR Permit Number

Customer # MWA Contact Person
Job # Out of Service Area?

General Materials Description

Start date Generator: Contact:
Stop date Address
Material Code Phone: Fax:
Rate Contractor Phone:
Account contact: Hauler: Contact:
Contact email: Hauler Address:
Total Quant Permitted Hauler Phone: Hauler Fax:
Current Amount Site Address:

CHARACTERISTICS REQUIRED TO BE TESTED
 Solid? Sludge? OA-1 TCLP SEMIVOL
NA pH OA-2 PCB CONTENT
NA Flash Point TCLP METALS PAINT FILTER
 Paint Filter Test TCLP VOC FLASH POINT
 Precipitant? TCLP PEST PAF
Process generating:
Container Size/Type:
Physical Description:
Notes:

HAZARDOUS SAFETY
Does handling charge apply? Yes No
 Listed? Ignitable? Corrosive? Reactive? Hard to Manage?
Special handling instructions:
I hereby CERTIFY that the material named is not a hazardous waste as defined by 40CFR261 or any applicable state law, that all known or suspected hazards have been disclosed, that there are no other economical or environmentally safe ways to manage this material and that all information submitted is complete and accurate.
Generator signature: *[Signature]*
Date: 10/13/09

8/21/2009 Date
Environmental Tech Services Mgr
Internal Notes or Additional Information:
analytics are attached. PCB content is below 5ppm for paint chips debris is PPE and absorbant

Analytical Laboratory Report

Client Identification:	Stinson Morrison Hecker LLP	Sample Matrix:	Other (Solid)
Fibertec Project Number:	35643	Sample Number:	35643-001

Client Sample Information

Project Identification:	SIM-Ottumwa PCB Site	Client Sample Description:	Clean up Debris- Solids
Project Number:	NA	Client Sample Number:	1-4
Sample Date:	8/26/2009	Chain of Custody Number:	89266

Comments:

Definitions/ Qualifiers:	A: Spike recovery or precision unusable due to dilution. B: The analyte was detected in the associated method blank. E: The analyte was detected at a concentration greater than the calibration range, therefore the result is estimated.	J: The concentration is an estimated value. U: The analyte was not detected at or above the reporting limit.	X: Matrix Interference has resulted in a raised reporting limit or distorted result. W: Results reported on a wet-weight basis. *: Value reported is outside QA limits
-------------------------------------	--	---	--

Analyte	Result	Units	Report Limit	Dilution Factor	Prep Batch	Prep Date/Time	Analysis Date/Time	Analyst
Polychlorinated Biphenyls (PCBs) (EPA 3550B/EPA 8082) (Dilution made in prep lab-sample would not concentrate)								
Aroclor-1016	U	µg/kg	660	2	PS09I03E	9/3/2009	9/4/2009	BDA
Aroclor-1221	U	µg/kg	660	2	PS09I03E	9/3/2009	9/4/2009	BDA
Aroclor-1232	U	µg/kg	660	2	PS09I03E	9/3/2009	9/4/2009	BDA
Aroclor-1242	U	µg/kg	660	2	PS09I03E	9/3/2009	9/4/2009	BDA
Aroclor-1248	U	µg/kg	660	2	PS09I03E	9/3/2009	9/4/2009	BDA
Aroclor-1254	1200	µg/kg	660	2	PS09I03E	9/3/2009	9/4/2009	BDA
Aroclor-1260	U	µg/kg	660	2	PS09I03E	9/3/2009	9/4/2009	BDA
Aroclor-1262	U	µg/kg	660	2	PS09I03E	9/3/2009	9/4/2009	BDA
Aroclor-1268	U	µg/kg	660	2	PS09I03E	9/3/2009	9/4/2009	BDA

D1177

Analytical Laboratory Report

Client Identification:	Stinson Morrison Hecker LLP	Sample Matrix:	TCLP Extract
Fibertec Project Number:	35643	Sample Number:	35643-001A

Client Sample Information

Project Identification:	SIM-Ottumwa PCB Site	Client Sample Description:	Clean up Debris- Solids
Project Number:	NA	Client Sample Number:	1-4
Sample Date:	8/26/2009	Chain of Custody Number:	89266

Comments:

Definitions/Qualifiers:

A: Spike recovery or precision unusable due to dilution.	J: The concentration is an estimated value.	X: Matrix Interference has resulted in a raised reporting limit or distorted result.
B: The analyte was detected in the associated method blank.	U: The analyte was not detected at or above the reporting limit.	W: Results reported on a wet-weight basis.
E: The analyte was detected at a concentration greater than the calibration range, therefore the result is estimated.		*: Value reported is outside QA limits

Analyte	Result	Units	Report Limit	Dilution Factor	Prep Batch	Prep Date/Time	Analysis Date/Time	Analyst
---------	--------	-------	--------------	-----------------	------------	----------------	--------------------	---------

TCLP RCRA-8 Elements by ICP-MS (EPA 3010A/EPA 6020) (TCLP(1311)Extraction date: 9/2/2009; Tumbler temperature was high.)

Arsenic	U	mg/L	1.0	1	PT09104B	9/4/2009	9/4/2009	JLH
Barium	1.7	mg/L	1.0	1	PT09104B	9/4/2009	9/4/2009	JLH
Cadmium	U	mg/L	0.20	1	PT09104B	9/4/2009	9/4/2009	JLH
Chromium	U	mg/L	1.0	1	PT09104B	9/4/2009	9/4/2009	JLH
Lead	U	mg/L	1.0	1	PT09104B	9/4/2009	9/4/2009	JLH
Selenium	U	mg/L	0.20	1	PT09104B	9/4/2009	9/4/2009	JLH
Silver	U	mg/L	1.0	1	PT09104B	9/4/2009	9/4/2009	JLH

TCLP Mercury (EPA 7470A) (TCLP(1311)Extraction date: 9/2/2009; Tumbler temperature was high.)

Mercury	U	mg/L	0.050	1	PM09104B	9/4/2009	9/4/2009	JLH
---------	---	------	-------	---	----------	----------	----------	-----

D1178

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

AD005279274

2. Page 1 of 1

3. Emergency Response Phone

800-369-5500

4. Waste Tracking Number

82709

5. Generator's Name and Mailing Address

DICO Inc.
2701 Spruce St
Quincy IL 62301
Generator's Phone: 515-710-9654

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

DICO Inc
3043 Pawnee Dr
Ottumwa, IA 52501

6. Transporter 1 Company Name

Seneca Companies

U.S. EPA ID Number

IA D000678060

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

DICO Inc
200 SW 14th St
Dsm IA 50309
Facility's Phone: 515-202-0510

U.S. EPA ID Number

9. Waste Shipping Name and Description

1. Clean-up debris - solid Non-USDOT or Non-USEPA Regulated material

10. Containers

No. Type

004 DM

11. Total Quantity

Est 100

12. Unit Wt./Vol.

P

13. Special Handling Instructions and Additional Information

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/Officer's Printed/Typed Name

Don Clingan

Signature

[Signature]

AGENT FOR DICO INC

Month Day Year

03 27 09

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

David Van Wyk

Signature

[Signature]

Month Day Year

8 27 09

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:

D1179

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

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

Paul E. Sandifer

Signature

[Signature]

Month Day Year

8 27 09

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY



Invoice

Remit To:
P.O. Box 3360
Des Moines, IA
50316

Toll Free - 800.369.5500
Web - senecacompanies.com

W. O. NUMBER: 131390
CUSTOMER P.O. NUMBER:
CUSTOMER ACCT. NUMBER: 71294

INVOICE NUMBER: 689898
INVOICE DATE: 09/09/09
PAGE 2

DESCRIPTION	QUANTITY	UM	RATE	AMOUNT
SALES TAX				.00
TOTAL			\$	780.55

TERMS: NET 10 Days. This sale is subject to terms and conditions listed on reverse side

CERCLA OFF-SITE DISPOSAL REPORT

Information Required for CERCLA Off-site Waste Management Activities.

1. Superfund Site name/State/CERCLIS SSID number:

**Southern Iowa Mechanical Site
3043 Pawnee Drive
Ottumwa, IA. 52501
CERCLIS SSID # A7K9**

2. Type of action (Check two)

Removal Fund-financed
 Remedial PRP-financed

3. Type (check one) and form (check one) of waste; if more than one type, attach separate sheets for this and remaining questions for each type:

Type:	Form:
<input type="checkbox"/> solvents	<input type="checkbox"/> wastewater
<input type="checkbox"/> dioxins/furans	<input type="checkbox"/> liquid waste
<input type="checkbox"/> cyanides	<input type="checkbox"/> organic sludge
<input type="checkbox"/> heavy metals	(> 1% total solids)
(specify metals) _____	<input type="checkbox"/> inorganic sludge
<input type="checkbox"/> acids	(< 1% total org. carbon)
<input checked="" type="checkbox"/> PCBs	<input type="checkbox"/> contaminated soil
<input type="checkbox"/> halogenated organics	and debris
<input type="checkbox"/> other RCRA-listed hazardous	<input checked="" type="checkbox"/> solid or solidified
Wastes	
<input type="checkbox"/> non-hazardous or de-listed wastes	

4. Quantity of waste:

<input type="checkbox"/> cubic yard (CY)	<input type="checkbox"/> tons
<input type="checkbox"/> gallons (gal)	<input type="checkbox"/> lab packs
<input checked="" type="checkbox"/> drums	<input type="checkbox"/> boxes

5. Range, average, and/or representative concentrations of the contaminants of concern:

PCB > 50 ppm

6. Pre-treatment of waste before transportation: **NONE**

<input type="checkbox"/> precipitation	<input type="checkbox"/> neutralization
<input type="checkbox"/> solidification	<input type="checkbox"/> fixation
<input type="checkbox"/> stabilization	<input type="checkbox"/> other(_____)

7. Receiving RCRA facility name/location/I.D. number/units:

Clean Harbors
11600 North Aptus Road
Grantsville, UT 84029
EPA ID# UTD981552177

8. Receiving Region: **8**

9. Receiving Region Off-site Contact (RROC): **Terry Brown**

10. Date (s) of shipments:	Date	Manifest Number	Line Item	Quantity
	8/27/09	004646872 JJK	1	4 - drums

11. Pre-treatment of waste at site before final treatment or disposal: **None**

12. Final method of treatment or disposal/unit receiving:

<input type="checkbox"/> precipitation	<input type="checkbox"/> neutralization
<input checked="" type="checkbox"/> incineration	<input type="checkbox"/> landfill
<input type="checkbox"/> land treatment	<input type="checkbox"/> injection
<input type="checkbox"/> recovery/re-use	<input type="checkbox"/> other (<u>Fuels Blending</u>)

13. Cost of activities:

Total T&D Cost (4 drums) \$ 1,855.18



WASTE MATERIAL PROFILE SHEET

Clean Harbors Profile No. CH389312

GENERAL INFORMATION

GENERATOR EPA ID #/REGISTRATION # *Notrequired* GENERATOR NAME: *DICO Inc*
 GENERATOR CODE (Assigned by Clean Harbors) *D11430* CITY *Ottumwa* STATE/PROVINCE *IA* ZIP/POSTAL CODE *52501*
 ADDRESS *3043 Pawnee Drive* PHONE: *(678) 714-8420 x 231*
 CUSTOMER CODE (Assigned by Clean Harbors) *GR000012* CUSTOMER NAME: *Greenleaf Environmental Group Inc*
 ADDRESS *4943 Austin Park Avenue* CITY *Buford* STATE/PROVINCE *GA* ZIP/POSTAL CODE *30518*

B. WASTE DESCRIPTION

WASTE DESCRIPTION: *PCB debris and insulation*

PROCESS GENERATING WASTE (Please provide detailed description of process generating waste):

Steel Beam Decontamination

C. PHYSICAL PROPERTIES (at 25C or 77F)

PHYSICAL STATE <input checked="" type="checkbox"/> SOLID WITHOUT FREE LIQUID POWDER MONOLITHIC SOLID LIQUID WITH NO SOLIDS LIQUID/SOLID MIXTURE % FREE LIQUID % SETTLED SOLID % TOTAL SUSPENDED SOLID SLUDGE GAS/AEROSOL	NUMBER OF PHASES/LAYERS 1 2 3 TOP <i>0.00</i> % BY VOLUME (Approx.) MIDDLE <i>0.00</i> BOTTOM <i>0.00</i>			VISCOSITY (If liquid present) 1 - 100 (e.g. Water) 101 - 500 (e.g. Motor Oil) 501 - 10,000 (e.g. Molasses) > 10,000		COLOR <i>varies</i>
	ODOR NONE <input checked="" type="checkbox"/> MILD STRONG Describe:	BOILING POINT °F (°C) <= 95 (<=35) 95 - 100 (35-38) 101 - 129 (38-54) >= 130 (>54)		MELTING POINT °F (°C) < 140 (<60) 140-200 (60-93) <input checked="" type="checkbox"/> > 200 (>93)		TOTAL ORGANIC CARBON <= 1% 1-9% <input checked="" type="checkbox"/> >= 10%
FLASH POINT °F (°C) < 73 (<23) 73 - 100 (23-38) 101 -140 (38-60) 141 -200 (60-93) > 200 (>93)	pH <= 2 2.1 - 6.9 <input checked="" type="checkbox"/> 7 (Neutral) 7.1 - 12.4 >= 12.5	SPECIFIC GRAVITY < 0.8 (e.g. Gasoline) 0.8-1.0 (e.g. Ethanol) <input checked="" type="checkbox"/> 1.0 (e.g. Water) 1.0-1.2 (e.g. Antifreeze) > 1.2 (e.g. Methylene Chloride)	ASH < 0.1 0.1 - 1.0 1.1 - 5.0 5.1 - 20.0		BTU/LB (MJ/kg) <input checked="" type="checkbox"/> < 2,000 (<4.6) 2,000-5,000 (4.6-11.6) 5,000-10,000 (11.6-23.2) > 10,000 (>23.2) Actual:	

D. COMPOSITION (List the complete composition of the waste, include any inert components and/or debris. Ranges for individual components are acceptable. If a trade name is used, please supply an MSDS. Please do not use abbreviations.)

CHEMICAL	MIN	MAX	UOM
BUILDING INSULATION WITH ADHESIVE AND FOIL	75.0000000	85.0000000	%
POLYCHLORINATED BIPHENYLS	50.0000000	5000.0000000	PPM
SMALL FOAM PAD AND FILTER	1.0000000	2.0000000	%
SMALL PLASTIC HOSE	15.0000000	20.0000000	%
SOIL AND RAGS	0.0000000	3.0000000	%

DOES THIS WASTE CONTAIN ANY HEAVY GAUGE METAL DEBRIS OR OTHER LARGE OBJECTS (EX., METAL PLATE OR PIPING >1/4" THICK OR >12" LONG, METAL REINFORCED HOSE >12" LONG, METAL WIRE >12" LONG, METAL VALVES, PIPE FITTINGS, CONCRETE REINFORCING BAR OR PIECES OF CONCRETE >3")? YES NO

If yes, describe, including dimensions:

DOES THIS WASTE CONTAIN ANY METALS IN POWDERED OR OTHER FINELY DIVIDED FORM? YES NO

DOES THIS WASTE CONTAIN OR HAS IT CONTACTED ANY OF THE FOLLOWING; ANIMAL WASTES, HUMAN BLOOD, BLOOD PRODUCTS, BODY FLUIDS, MICROBIOLOGICAL WASTE, PATHOLOGICAL WASTE, HUMAN OR ANIMAL DERIVED SERUMS OR PROTEINS OR ANY OTHER POTENTIALLY INFECTIOUS MATERIAL? YES NO

I acknowledge that this waste material is neither infectious nor does it contain any organism known to be a threat to human health. This certification is based on my knowledge of the material. Select the answer below that applies:

The waste was never exposed to potentially infectious material. YES NO

Chemical disinfection or some other form of sterilization has been applied to the waste. YES NO

I ACKNOWLEDGE THAT THIS PROFILE MEETS THE CLEAN HARBORS BATTERY PACKAGING REQUIREMENTS. YES NO

I ACKNOWLEDGE THAT MY FRIABLE ASBESTOS WASTE IS DOUBLE BAGGED AND WETTED. YES NO

SPECIFY THE SOURCE CODE ASSOCIATED WITH THE WASTE. *G39*

SPECIFY THE FORM CODE ASSOCIATED WITH THE WASTE. *W409*

D1184



CONSTITUENTS

Are these values based on testing or knowledge? Knowledge Testing

If based on knowledge, please describe the rationale applied to identify and characterize the waste material (ex., include reference to Material Safety Data Sheets, process considerations, operating procedures).

Generator knowledge

Please indicate which constituents below apply. Concentrations must be entered when applicable to assist in accurate review and expedited approval of your waste profile. Please note that the total regulated metals and other constituents sections require answers.

RCRA	REGULATED METALS	REGULATORY LEVEL (mg/l)	TCLP mg/l	TOTAL	UOM	NOT APPLICABLE
D004	ARSENIC	5.0				<input checked="" type="checkbox"/>
D005	BARIUM	100.0				<input checked="" type="checkbox"/>
D006	CADMIUM	1.0				<input checked="" type="checkbox"/>
D007	CHROMIUM	5.0				<input checked="" type="checkbox"/>
D008	LEAD	5.0				<input checked="" type="checkbox"/>
D009	MERCURY	0.2				<input checked="" type="checkbox"/>
D010	SELENIUM	1.0				<input checked="" type="checkbox"/>
D011	SILVER	5.0				<input checked="" type="checkbox"/>
VOLATILE COMPOUNDS				OTHER CONSTITUENTS		
D018	BENZENE	0.5			MAX	UOM
D019	CARBON TETRACHLORIDE	0.5				NOT APPLICABLE
D021	CHLOROBENZENE	100.0				<input checked="" type="checkbox"/>
D022	CHLOROFORM	6.0				<input checked="" type="checkbox"/>
D028	1,2-DICHLOROETHANE	0.5				<input checked="" type="checkbox"/>
D029	1,1-DICHLOROETHYLENE	0.7				<input checked="" type="checkbox"/>
D035	METHYL ETHYL KETONE	200.0				<input checked="" type="checkbox"/>
D039	TETRACHLOROETHYLENE	0.7				<input checked="" type="checkbox"/>
D040	TRICHLOROETHYLENE	0.5				<input checked="" type="checkbox"/>
J043	VINYL CHLORIDE	0.2				<input checked="" type="checkbox"/>
SEMI-VOLATILE COMPOUNDS				MAX		
D023	o-CRESOL	200.0				<input checked="" type="checkbox"/>
D024	m-CRESOL	200.0				<input checked="" type="checkbox"/>
D025	p-CRESOL	200.0				<input checked="" type="checkbox"/>
D026	CRESOL (TOTAL)	200.0				<input checked="" type="checkbox"/>
D027	1,4-DICHLOROBENZENE	7.5				<input checked="" type="checkbox"/>
D030	2,4-DINITROTOLUENE	0.13				<input checked="" type="checkbox"/>
D032	HEXACHLOROBENZENE	0.13				<input checked="" type="checkbox"/>
D033	HEXACHLOROBUTADIENE	0.5				<input checked="" type="checkbox"/>
D034	HEXACHLOROETHANE	3.0				<input checked="" type="checkbox"/>
D036	NITROBENZENE	2.0				<input checked="" type="checkbox"/>
D037	PENTACHLOROPHENOL	100.0				<input checked="" type="checkbox"/>
D038	PYRIDINE	5.0				<input checked="" type="checkbox"/>
D041	2,4,5-TRICHLOROPHENOL	400.0				<input checked="" type="checkbox"/>
D042	2,4,6-TRICHLOROPHENOL	2.0				<input checked="" type="checkbox"/>
PESTICIDES AND HERBICIDES				UOM		
D012	ENDRIN	0.02				<input checked="" type="checkbox"/>
D013	LINDANE	0.4				<input checked="" type="checkbox"/>
D014	METHOXYCHLOR	10.0				<input checked="" type="checkbox"/>
D015	TOXAPHENE	0.5				<input checked="" type="checkbox"/>
D016	2,4-D	10.0				<input checked="" type="checkbox"/>
D017	2,4,5-TP (SILVEX)	1.0				<input checked="" type="checkbox"/>
D020	CHLORDANE	0.03				<input checked="" type="checkbox"/>
D031	HEPTACHLOR (AND ITS EPOXIDE)	0.008				<input checked="" type="checkbox"/>

HOCs <input checked="" type="checkbox"/> NONE <input type="checkbox"/> < 1000 PPM <input type="checkbox"/> >= 1000 PPM	PCBs NONE <input type="checkbox"/> < 50 PPM <input checked="" type="checkbox"/> >= 50 PPM IF PCBs ARE PRESENT, IS THE WASTE REGULATED BY TSCA 40 CFR 761? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
--	---

ADDITIONAL HAZARDS

Does this waste have any undisclosed hazards or prior incidents associated with it, which could affect the way it should be handled?

YES NO (If yes, explain)

CHOOSE ALL THAT APPLY

- DEA REGULATED SUBSTANCE
- EXPLOSIVE
- FUMING
- OSHA REGULATED CARCINOGENS
- POLYMERIZABLE
- RADIOACTIVE
- REACTIVE MATERIAL
- NONE OF THE ABOVE

D1185



F. REGULATORY STATUS

YES NO USEPA HAZARDOUS WASTE?
YES NO DO ANY STATE WASTE CODES APPLY?
Texas Waste Code
YES NO DO ANY CANADIAN PROVINCIAL WASTE CODES APPLY?
YES NO IS THIS WASTE PROHIBITED FROM LAND DISPOSAL WITHOUT FURTHER TREATMENT PER 40 CFR PART 268?
LDR CATEGORY: This is subject to LDR.
VARIANCE INFO:
YES NO IS THIS A UNIVERSAL WASTE?
YES NO IS THE GENERATOR OF THE WASTE CLASSIFIED AS CONDITIONALLY EXEMPT SMALL QUANTITY GENERATOR (CESQG)?
YES NO IS THIS MATERIAL GOING TO BE MANAGED AS A RCRA EXEMPT COMMERCIAL PRODUCT, WHICH IS FUEL (40 CFR 261.2 (C)(2)(II))?
YES NO DOES TREATMENT OF THIS WASTE GENERATE A F006 OR F019 SLUDGE?
YES NO IS THIS WASTE STREAM SUBJECT TO THE INORGANIC METAL BEARING WASTE PROHIBITION FOUND AT 40 CFR 268.3(C)?
YES NO DOES THIS WASTE CONTAIN VOC'S IN CONCENTRATIONS >=500 PPM?
YES NO DOES THE WASTE CONTAIN GREATER THAN 20% OF ORGANIC CONSTITUENTS WITH A VAPOR PRESSURE >= .3KPA (.044 PSIA)?
YES NO DOES THIS WASTE CONTAIN AN ORGANIC CONSTITUENT WHICH IN ITS PURE FORM HAS A VAPOR PRESSURE > 77 KPA (11.2 PSIA)?
YES NO IS THIS CERCLA REGULATED (SUPERFUND) WASTE ?
YES NO IS THE WASTE SUBJECT TO ONE OF THE FOLLOWING NESHAP RULES?
Hazardous Organic NESHAP (HON) rule (subpart G) Pharmaceuticals production (subpart GGG)
YES NO IF THIS IS A US EPA HAZARDOUS WASTE, DOES THIS WASTE STREAM CONTAIN BENZENE?
YES NO Does the waste stream come from a facility with one of the SIC codes listed under benzene NESHAP or is this waste regulated under the benzene NESHAP rules because the original source of the waste is from a chemical manufacturing, coke by-product recovery, or petroleum refinery process?
YES NO Is the generating source of this waste stream a facility with Total Annual Benzene (TAB) >10 Mg/year?
What is the TAB quantity for your facility? Megagram/year (1 Mg = 2,200 lbs)
The basis for this determination is: Knowledge of the Waste Or Test Data Knowledge Testing
Describe the knowledge:

G. DOT/TDG INFORMATION

DOT/TDG PROPER SHIPPING NAME:

UN3077, ENVIRONMENTALLY HAZARDOUS SUBSTANCES, SOLID, N.O.S., (POLYCHLORINATED BIPHENOLS), 9, PG III

H. TRANSPORTATION REQUIREMENTS

ESTIMATED SHIPMENT FREQUENCY ONE TIME WEEKLY MONTHLY QUARTERLY YEARLY OTHER

CONTAINERIZED 1-5 CONTAINERS/SHIPMENT
STORAGE CAPACITY: 5
CONTAINER TYPE: CUBIC YARD BOX PALLET TOTE TANK DRUM OTHER: DRUM SIZE: 55
BULK LIQUID GALLONS/SHIPMENT: 0 Min -0 Max GAL
BULK SOLID SHIPMENT UOM: TON YARD TONS/YARDS/SHIPMENT: 0 Min - 0 Max

I. SPECIAL REQUEST

COMMENTS OR REQUESTS:

If a LDR is not required, I would prefer not to provide one. Please check on this. Thanks

GENERATOR'S CERTIFICATION

I hereby certify that all information submitted in this and attached documents is correct to the best of my knowledge. I also certify that any samples submitted are representative of the actual waste. If Clean Harbors discovers a discrepancy during the approval process, Generator grants Clean Harbors the authority to amend the profile, as Clean Harbors deems necessary, to reflect the discrepancy.

AUTHORIZED SIGNATURE

NAME (PRINT)

TITLE

DATE

dclingan@greenleafgroup.net

8/24/2009

This waste profile has been submitted using Clean Harbors' electronic signature system.

D1186

7Q2465000

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number EAD005279278	2. Page 1 of 3	3. Emergency Response Phone 318 515-265-9363	4. Manifest Tracking Number 004646872 JJK
5. Generator's Name and Mailing Address DICO, Inc. 2701 Spruce St. Quincy, IL 62301		Generator's Site Address (if different than mailing address) DICO, Inc. 3043 Pawnee Dr. Ottumwa, IA 52501			
6. Transporter 1 Company Name Seneca Companies		U.S. EPA ID Number EAD000678060			
7. Transporter 2 Company Name Clean Harbors Environmental Services SMITH SYSTEMS TRAVIS		U.S. EPA ID Number MAD039322250 NEA986282133			
8. Designated Facility Name and Site Address Clean Harbors 11600 North Aphas Rd. Wendover UT 84083 Grantsville, UT 84029		U.S. EPA ID Number UTD981552177			
Facility's Phone: 435-884-8100					
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
			Nr.	Type	12. Unit Wt./Vol.
	1.	UN3077, Environmentally Hazardous Substance Solid, N.O.S., (Polychlorinated Biphenyls), 9, 8, 11	4	DM	1600 P
	2.				
	3.				
13. Waste Codes					
					PCB None
14. Special Handling Instructions and Additional Information PCB debris + insulation : profile CH 389312 w/o # 7Q2465000					
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 Exportor, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27 (a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.					
Generator's/Officer's Printed/Typed Name Jamie Harder for owner					Signature <i>[Signature]</i>
					Month Day Year 8 27 09
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.				
	Transporter signature (for exports only): <i>[Signature]</i> Port of entry/exit: _____ Date leaving U.S.: _____				
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials				
	Transporter 1 Printed/Typed Name David Van Wyk		Signature <i>[Signature]</i>		Month Day Year 08 27 09
	Transporter 2 Printed/Typed Name Tim Olson		Signature <i>[Signature]</i>		Month Day Year 8 27 09
DESIGNATED FACILITY	18. Discrepancy				
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection				
	18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number: _____				
	Facility's Phone: _____				
18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____					
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)					
1. H040		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 Autumn Anderson					Signature <i>[Signature]</i>
					Month Day Year 9 9 09

D1187

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet) 21. Generator ID Number **LAADCO58792783** 22. Page **3** 23. Manifest Tracking Number **004646872JJK**

24. Generator's Name **DICO Inc**

25. Transporter's Company Name **Clear herbs** U.S. EPA ID Number **MAAD057322750**

26. Transporter's Company Name U.S. EPA ID Number

27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers		29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes		
		No.	Type					
TRANS								

32. Special Handling Instructions and Additional Information

33. Transporter's Acknowledgment of Receipt of Materials
 Printed Type Name: **Ray Terance** Signature: *[Signature]* Month: **9** Day: **18** Year: **07**

34. Transporter's Acknowledgment of Receipt of Materials
 Printed Type Name: Signature: Month: Day: Year:

35. Discrepancy **D1189**

36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)



INVOICE

REMIT TO:

Clean Harbors Env. Services
PO Box 3442
Boston, MA 02241-3442

OFFICE:

Clean Harbors Env Services Inc
1537 Vermont Street
Des Moines, IA 50314
(515) 262-2638

SOLD TO:

Jeff Sturgeon
Greenleaf Environmental Group Inc
4943 AUSTIN PARK AVE
Buford, GA 30518- 0000



If you have any questions regarding this invoice, please
contact your customer service representative at the
telephone number listed above

JOB SITE/GENERATOR:

DICO Inc
3043 Pawnee Drive
Ottumwa, IA 52501

Job Description: Drum Shipment

** Payable in USD funds **

Table with 6 columns: Last Service Date, Invoice No, Customer, Sales Order, Purchase Order, Terms. Row 1: 27 Aug 2009, 7Q0931674, GR000012, 7Q2465000, No PO Needed, NET 30 DAYS

SUMMARY BY LINE TYPE

Summary table with 2 columns: Description, Amount. Rows: Disposal (\$980.00), Fees (\$114.98), Transportation (\$127.96), SUBTOTAL (\$1,222.94 USD), TAX (0.00), INVOICE TOTAL (\$1,222.94 USD)

← PLEASE PAY THIS AMOUNT

Table with 8 columns: Manifest Info, Item ID, Description, Shipment Qty, Shipment UOM, Billing Qty, Billing UOM, Unit Price, Amount

27 Aug 2009

Main manifest table with 8 columns. Rows include: 004646872JJK 1 DISPSL / CHSL PCB debris and insulation (4 DM, 4.000 55DM, 245.0000, \$980.00), FEE-DOWN Utah PCB Waste for Disposal (0.800 T, 4.7500, \$3.80), HUBTRANS Freight to manifested disposal facility (4.000 EA, 31.9899, \$127.96), FEE Recovery Fee (1,111.760 EA, 0.1000, \$111.18). Totals: SUBTOTAL \$1,222.94, TAX \$0.00, TOTAL \$1,222.94

Handwritten: 010901 SJM

D1190

Interest will be charged at a rate of 1.5% per month for all past due amounts.