

SOIL REMOVAL REPORT West Lot Site Utica, New York 13502

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1. Introduction

1.1 General

This Soil Removal Report has been prepared by ARCADIS Geraghty & Miller, Inc., in association with GM Consulting Engineers, P.C., to document activities associated with the soil remedial action at the West Lot site (referred to hereafter as the site). This report addresses the soil component of the selected remedy for the site, as presented by the New York State Department of Environmental Conservation (NYSDEC) in the Record of Decision (ROD) issued for the site in March 1998.

The soil remedy specified in the ROD required the removal of soils and waste with concentrations of polychlorinated biphenyls (PCBs) and volatile organic compounds (VOCs) exceeding the NYSDEC soil cleanup goals from two specific areas of the site. The areas of the site identified for soil removal are referred to as the "former burn pit" and as the "Interim Remedial Measure (IRM) treatment cell". Based on information presented in the July 1997 Feasibility Study Report, an estimated volume of 2,200 cubic yards of soil was expected to be removed from the IRM treatment cell and an estimated volume of 870 cubic yards of soil was to be removed from the former burn pit area. The soil removed was to be disposed of off-site.

1.2 Project Description

The Soil Removal Action addressed the removal of soil from two areas on-site: 1) the IRM treatment cell; and 2) soils within the former burn pit area. A soil handling/staging area and other supporting facilities were constructed prior to beginning soil removal activities. Soils containing concentrations of PCBs and/or VOCs above the NYSDEC TAGM 4046 cleanup objectives were removed from these areas. Removal of soils was performed using conventional excavation and soil handling equipment. The excavated soils were characterized for disposal using DTECHTOR PCB immunoassay field test kits and sent off-site to either a Toxic Substance Control Act (TSCA) or non-TSCA disposal facility, as appropriate. In addition to removal of soils from the IRM treatment cell, this Soil Removal Report also addresses the management of debris and equipment associated with decommissioning the IRM system (e.g., liners, piping, valves, etc.). Work performed for this Soil Removal Action was conducted pursuant to the NYSDEC approved Soil Removal Work Plan (SRWP) (ARCADIS Geraghty & Miller 1999), and discussions with the NYSDEC during the course of field activities.

2. Site Preparation

This section describes the site preparation activities prior to performing the soil removal action.

2.1 Site Survey

Prior to conducting soil removal activities, a survey was performed to locate former soil sampling locations, estimate the volume of soil to be removed from the IRM cell, and to establish the general initial limits of excavation areas at the former burn pit. Based on the survey, the limits of soil to be excavated in the former burn pit were located and staked. The remedial contractor was responsible for surveying, placing, and maintaining control stakes in excavation and fill areas for the duration of the removal action. At the completion of each earthwork stage, the area disturbed during the previous stage was surveyed to determine level of progress and conformity to the workplan. A survey was performed of the excavation areas at the completion of the excavation within each area to document actual excavation volumes.

2.2 Clearing/Grubbing

Prior to commencing soil removal operations in the former burn pit area, approximately ½ acre was cleared and grubbed to allow access to the excavation areas. Trees and brush were removed to the ground surface using heavy construction equipment, chain saws, and brush hogs. The vegetative material was spread on-site.

During excavation activities, it was necessary to dismantle a section of railroad track associated with the abandoned railroad bed located immediately adjacent to the southern end of the former burn pit (depicted in Figure 2). Approximately 45-feet of rail and railroad ties were removed to complete excavation activities.

2.3 Soil Staging/Handling Areas

The soil staging area was arranged to allow temporary storage of discrete soil stockpiles prior to loading and shipping soils for off-site disposal. The soil staging area was located in the paved parking lot adjacent to the West Lot site (see Figure 1) and was used to stockpile soils from both the former burn pit and the IRM treatment cell. The soil staging area was constructed by placing a base liner of plastic/polyethylene sheeting over the entire area. The area was also constructed with an underlying perimeter sand berm and sloped to a sump to contain water and provide

a point to remove any water.

Soil management for the IRM treatment cell soils and former burn pit soils is discussed in more detail in Section 3. Soil Removal.

3. Soil Removal

This section presents the specific activities performed for the removal of soils from the IRM cell and former burn pit area. Section 3.1 and 3.2 summarize the removal activities for the IRM cell and former burn pit area, respectively. These sections include a summary of the general excavation and loading activities. Section 3.3 presents the sampling/analysis results of the stockpiled soils prior to off-site disposal. Fugitive dust control is presented in Section 3.4. Transportation and disposal of the stockpiled soils is addressed in Section 3.5. Section 3.6 presents the restoration activities following completion of excavation and off-site transport of soils. Prior to initiation of soil removal activities, the contractor mobilized to the site and prepared the work area for soil removal activities as described in Section 2.

3.1 IRM Cell

3.1.1 Site Preparation

Site preparation activities specific to the IRM decommissioning included the arrangement and preparation of soil stockpile areas, surveying, and preliminary layout of soil areas that were suspected to contain similar PCB concentrations. Arrangements for disposal of both TSCA and non-TSCA soils at the designated disposal facilities were confirmed prior to soil removal.

3.1.2 Soil Removal

In accordance with the Soil Removal Work Plan, the removal of soils from the IRM cell included the following components:

- Soils were excavated and temporarily staged in approximately 100 cubic yard piles in the soil staging area.
- Composite samples were collected from each 100 cubic yard soil pile and tested using DTECHTOR PCB immunoassay field test kits for total PCBs; and

• Based upon the results of the analysis, each soil pile was loaded into trucks and sent off-site for disposal as either TSCA or non-TSCA soils.

The IRM Cell decommissioning began on August 17, 1999 and was completed on August 31, 1999. Prior to excavation activities, lines were drawn on the IRM cell cover, dividing the cell into general areas suspected of having either greater than 50 milligrams per kilogram (mg/kg) PCBs or less than 50 mg/kg PCBs. This demarcation was based on existing analytical data from soil samples collected within the IRM Cell. The location of previous soil samples collected from the IRM cell were identified and marked on the IRM cell cover.

Areas identified by previous soil samples as containing greater than 50 mg/kg PCBs were excavated first and stockpiled separately in the soil staging area (100 cubic yard piles) for disposal as hazardous waste (greater than 50 mg/kg PCBs). The remaining soils in the IRM cell were excavated and temporarily stockpiled in approximately 100 cubic yard piles in the soil staging area. To minimize cross contamination, individual soil piles within the staging area were placed on an additional layer of polyethylene sheeting and covered with 6-mil polyethylene sheeting to prevent precipitation from contacting the soil. Each stockpile was physically separated from other stockpiles by approximately 5 feet. A five point composite sample was collected from each approximately 100 cubic yard pile and tested for total PCBs using the DTECHTOR PCB immunoassay field test kits. The soil piles were identified as either hazardous or non-hazardous based on the PCB concentrations. Based on the survey of the IRM cell, a total 2073 cubic yards were removed from the IRM cell. This included approximately 300 cubic yards of soil excavated from around the previous sample locations of greater than 50 mg/kg PCBs that was classified as a hazardous waste.

A Case 9010B excavator was used for soil removal, and soil was transported to the soil staging area by tandem dump truck. To minimize the possibility of cross-contamination by the IRM soils, the tandem dump truck was not operated over the IRM soils. The dump truck was only operated within the IRM cell after the IRM soils and liner had been removed from that area. The soils within the IRM cell remained covered with the IRM cell cover material to the extent practicable (in the IRM cell), except when the soil was being handled in that area. This practice minimized rainwater infiltration and runoff from the soils, in addition to minimizing the risk of cross-contamination of soils.

Decommissioning of the IRM cell also included removal of all above-grade PVC piping and valves associated with the soil vapor extraction system, as well as the

perimeter chain-link fence. This material was removed and segregated for later disposal.

3.1.2.1 Soil Description

Soils excavated from the IRM cell consisted of silty sands and gravels with various construction debris including, but not limited to, concrete, brick, metal pails, steel poles, and wood.

3.2 Former Burn Pit

3.2.1 Site Preparation

Preparation of the former burn pit area for excavation included clearing and grubbing of the area for access by heavy equipment as described in Section 2.2. Truck and equipment access to the former burn pit area was also completed as part of the site preparation. In addition, arrangements for disposal of both TSCA and non-TSCA soils were confirmed prior to any soil removal.

3.2.2 Soil Excavation

Excavation was conducted in the three areas containing soils above NYSDEC TAGM 4046 cleanup objectives (based on previous soil sampling results). Figure 2 presents the limits of the excavations completed in each of the three areas. The 1997 SECOR Feasibility Study Report included an estimate of 870 cubic yards of soil, which required removal. However, at the completion of excavation activities, the site survey estimated a total of approximately 958 cubic yards were removed from the three excavation areas.

Prior to commencement of excavation activities, the depth to groundwater was measured by collecting water level measurements from monitoring wells MW-G and MW-AR. The water table was measured at a depth of approximately 10 feet bls at the time of excavation activities. Excavation activities proceeded as follows in each area:

1. The initial limits of excavation areas 1, 2, and 3 were staked by the survey crew. The initial excavations were performed to the specified limits and depth, with depths being confirmed using tape measures. Soils were loaded onto a dedicated on-site tandem dump truck and sent to the soil staging/handling area. Soil was placed in discrete, approximately 100 cubic yard soil piles for on-site sampling.

- 2. After excavation to the desired lateral and vertical limits was completed, the remaining soils were visually inspected, to the extent practical, and scanned for organic vapors using a photoionization detector (PID), or equivalent. If evidence of impacts existed based upon visual observations (e.g., staining) or elevated PID readings, additional soils were excavated prior to collection of post-excavation soil samples;
- 3. Following the completion of excavation activities, post-excavation samples were collected from the sidewalls and bottom of each excavation area. Where the excavation was performed to the water table, post-excavation samples were only collected from the excavation sidewalls and an excavation bottom sample was not collected (Area No. 3). Post-excavation confirmatory sampling and analytical procedures are described in Section 3.2.3.
- 4. Temporary fencing was installed around each excavation and maintained until approval for backfilling was authorized by the NYSDEC.

The following provides a brief description of each area of excavation.

Excavation Area No. 1

Excavation Area No. 1 was located along the northern portion of the former IRM excavation. Soils were excavated from Area No. 1 beginning on August 31, 1999 and completed on September 1, 1999. The excavation was initially performed to a depth of 8 feet below grade. However, due to elevated headspace readings taken from the base of the excavation, an additional foot of soil was excavated from the entire bottom of the excavation in order to remove the unsaturated, impacted soils. Soils excavated from Area No. 1 included silty sand to a depth of 8 ½ feet bls. overlying a gray fine to coarse sand and fine to medium gravel with trace amounts of silt from 8 ½ feet to 9 feet bls. Various construction and metal pails were also observed in soils excavated from Area No. 1.

At the completion of the excavation, two discrete post-excavation sidewall samples (EW-1-01 and EW-1-02) and one discrete base sample (EB-1-01) were collected from Area No. 1. Samples EW-1-01 and EB-1-01 were collected on August 31, 1999 and sample EW-1-02 was collected on September 1, 1999. Each post-excavation sample collected was packaged on ice in laboratory supplied bottles and shipped via Federal Express Priority Overnight Service to Severn-Trent Laboratories for analysis of VOCs by USEPA Method 8260 and PCBs by USEPA Method 8080. Accelerated

turnaround times (24 to 48 hours) were requested so backfilling activities could occur as quickly as possible.

Excavation Area No. 2

Excavation Area No. 2 was located along the eastern portion of the former burn pit excavation. This excavation include removal of a limited additional volume of soils based on previous excavation sidewall samples and additional delineation borings, which indicated residual levels of PCBs above NYSDEC cleanup goals.

Soil excavated from Area No. 2 was performed on September 3, 1999. The excavation was completed to a depth of 8 feet below grade. Soils excavated from Area No. 2 were screened using a PID and soils (from 0 to 6 feet bls) exhibiting no signs of contamination were stockpiled adjacent to the former burn pit for possible use as backfill. As approved by Peter Ouderkirk of the NYSDEC, these stockpiled soils could be used as backfill if analytical results of soil samples collected from the pile showed VOC and PCB concentrations below TAGM 4046 levels. Soils excavated from Area No. 2 were predominantly brown fine to medium sand and gravel with increasing silt content with depth.

One sidewall sample (EW-2-01) and one base sample (EB-2-01) were collected from the Area No. 2 excavation. In addition, one sample was collected from the stockpiled soil located in the former burn pit (BP-WC-2-Pile#1) to determine whether the soil could be used as clean backfill. All three samples were collected on September 3, 1999 and submitted to Severn-Trent for analysis of VOCs by USEPA Method 8260 and PCBs by USEPA Method 8080.

Excavation Area No. 3

Excavation Area No. 3 is located along the southern portion of the former burn pit excavation. Soils were excavated from Area No. 3 beginning on September 1, 1999 and completed to the water table (10' bls) on September 3, 1999. Due to elevated headspace readings throughout the central and eastern portion of the excavation, the excavation was completed to the water table. Soils excavated from Area No. 3 included brown fine to coarse sand and fine to medium gravels to a depth of six feet bls. From six to seven feet below grade, the former topsoil horizon (presumably the original grade prior to filling of this area for the railroad bed) and a black layer of organic material was observed. From seven to ten feet bls, soils consisted of gray fine to coarse sand and gravels. Strong odors were exhibited throughout Area No. 3 from a depth of 6 feet to just above the water table. Soils excavated from Area No. 3 were

screened using a PID and soils exhibiting no signs of contamination (above 6 feet bls) were stockpiled in the former burn pit for possible use as clean backfill (subject to analytical testing and NYSDEC approval).

Five post-excavation sidewall samples were collected (EW-3-01 through EW-3-05). Because the excavation was completed to the water table, no post-excavation base samples were collected. In addition, one sample was collected from each of the two soil piles set aside for use as backfill (BP-WC-3-Pile #1 and BP-WC-3-Pile #2).

3.2.3 Post-Excavation Sampling Results

Post-excavation samples were collected to verify that unsaturated soils in the former burn pit with VOC and PCB concentrations above NYSDEC cleanup objectives had been removed. Post-excavation samples were collected from the floor and sidewalls of the excavation and analyzed for VOCs (USEPA Method 8260) and PCBs (USEPA Method 8080). One sample was collected from each of the excavation sidewalls. The excavation sidewall samples were collected from approximately one-third (1/3) the way up from the base of the excavation or from an area of elevated PID readings or visibly stained soils. Sidewall samples were also generally collected from the approximate midpoint of the horizontal length of the excavation face.

A total of 10 post-excavation samples were collected from excavation areas 1 – 3 (see Figure 2). All analytical results were compared to NYSDEC TAGM No. 4046 soil cleanup guidelines. None of the post-excavation analytical sample results exceeded TAGM 4046 cleanup objectives. After review of the analytical data by Peter Ouderkirk of the NYSDEC, ARCADIS Geraghty & Miller was given approval to backfill the excavation. Post excavation sampling results for VOCs and PCBs are included in Table 1 and Table 2, respectively. The laboratory analytical data for post-excavation samples are included in Appendix A.

3.3 Stockpiled Soil Sampling Results

3,3.1 IRM Cell Soils

In accordance with the SRWP, each 100 cubic yards of soil removed from the IRM treatment cell was field tested for PCBs. After approximately 100 cubic yards of soil was stockpiled in the soil staging area, the soil was sampled for PCB analysis using a DTECHTOR PCB immunoassay field test kit. Each sample consisted of a composite of grab samples collected from five locations with each 100 cubic yard pile. Samples were collected using a hand auger as described in the SRWP. Only sample IRM-WC-

05-C exceeded the hazardous waste concentration of 50 parts per million PCBs (41-150 parts per million). None of the remaining samples collected from the IRM cell soils exceeded the hazardous waste concentration of 50 parts per million for PCBs. All test results performed using the DTECHTOR immunoassay kits are included in Table 3a.

Of the three soil piles sampled for use as possible backfill, samples BP-WC-3-Pile #1 and BP-WC-3-Pile #1 had results below TAGM 4046 guidelines and therefore were used for backfill in their respective excavations. PCB levels for soil pile BP-WC-3-Pile #2 exceeded the TAGM level of 10 mg/kg for total PCBs and therefore were loaded for off-site disposal as non-hazardous wastes. Laboratory results for these samples are included in Apendix A.

3.3.2 Former Burn Pit Soils

As required by the disposal facility for non-hazardous soils (High Acres Landfill), one sample was collected per 500 cubic yards of soil excavated from the former burn pit and submitted for analysis of TCLP VOCs. Each sample was collected using a hand auger from the entire depth of the stockpile. The five composite points were laboratory composited and analyzed for VOCs using USEPA Method TCLP 8260. A total of two composite samples were collected from the stockpiled burn pit soils. Laboratory analytical results indicated all the soils removed from the burn pit were below TCLP concentration for VOCs. Field testing results also indicated that stockpiled soils from the former burn pit contained less that 50 mg/kg PCBs (see Table 3b). Therefore a total of 958 cubic yards of soil removed from the burn pit was characterized as non-hazardous for off-site soil disposal. Laboratory results are included in Appendix B.

3.4 Fugitive Dust Control

This section describes the standard and contingent fugitive dust monitoring and suppression measures implemented as part of the remedial action for the site. The components of the fugitive dust control plan included the following:

- Fugitive dust sources;
- Ambient air monitoring action levels; and
- Dust suppression operations.

3.4.1 Fugitive Dust Sources

Fugitive dust sources associated with this project included excavation, material handling, and the following specific fugitive dust sources:

- Excavation and soil handling;
- · Vehicular; and
- Soil stockpiles.

3.4.2 Ambient Air Monitoring Action Levels

In accordance with the STWP and HASP, fugitive dust monitoring was performed using a PDM Mini-ram Particulate meter during all site activities. The action level of 150 ug/m³, integrated over a fifteen minute period, was never exceeded during site activities. Health & Safety logs are included in Appendix C.

3.5 Waste Transportation, Treatment and Disposal

Wastes, both hazardous and non-hazardous, were generated by soil removal activities associated with this project. These wastes were properly managed to minimize environmental impacts and to comply with applicable regulations. Each shipment of soil was shipped under a non-hazardous waste tracking document or hazardous waste (TSCA) manifest, based upon characterization results. All uncontaminated debris and trash generated during clean operations was recycled or disposed using roll-off dumpsters at a permitted industrial waste landfill.

3.5.1 Soil Loading

After being characterized as hazardous (TSCA) or non-hazardous, soils were carefully loaded onto trucks for disposal as discussed below. Transport vehicles (rear-end dump trucks and trailers) were loaded directly from the soil staging areas. After the vehicle was loaded, the transport tarpaulins were tied down before transporting the waste offsite. During the entire loading operation, dust monitoring and suppression measures (if necessary) were performed, as required.

Trucks used for off-site transport of soils entered the site from the employee parking lot, and backed onto the soil staging area from the south side, over the decontamination pad. During loading, trucks were parked within the soil staging area.

All trucks exited the soil staging area through the decontamination pad where any soils were scraped off using shovels/brooms.

Efforts were made to eliminate contamination of the surrounding area during loading. Spillage during loading was cleaned up immediately, to prevent tracking off-site. Prior to leaving the site, each truck was inspected for presence of dirt.

The adjacent employee parking lot was visually monitored and cleaned periodically to remove any spilled materials or dust. Following completion of soil load out activities, the polyethylene sheeting was removed from the soil staging area. The parking lot area was then swept using a mechanical sweeper.

3.5.2 Non-Hazardous and Hazardous Waste Transportation

All wastes were shipped by licensed haulers in accordance with applicable state and local regulations. Each shipment of waste generated during remediation was properly characterized, loaded, and manifested prior to exiting the site. SLC Constructors, Inc. loaded all waste. Each transport vehicle was decontaminated after loading was completed prior to leaving the site. Soil load out activities began on August 30, 1999 and were completed on September 14, 1999. All non-hazardous waste soils (approximately 4,200 tons) were transported by Fred Burrows Trucking, of Whitesboro, New York, to High Acres Landfill located in Fairport, New York and hazardous waste soils (approximately 365 tons) were transported to CWM Chemical Services, L.L.C. facility located in Model City, New York.

Hazardous Waste Manifest/Non-Hazardous Tracking Documents

Hazardous waste manifests and tracking documents for non-hazardous waste were prepared by the remedial contractor and completed for each shipment of waste prior to that shipment exiting the site.

The transporter signed the manifest or tracking document, as applicable, and recorded the date when the shipment was received and accepted. It was the responsibility of the transporter to possess a copy of a related applicable waste transporters permit.

Copies of the non-hazardous waste tracking documents and hazardous waste manifests are included in Appendix D and Appendix E, respectively.

Debris Disposal

All debris removed from the site was managed as non-hazardous waste and was loaded into roll-off dumpsters transported by Oneida Herkimer Solid Waste Authority for land burial. Debris generated included PVC piping, the chain-link fence, and liner material from the IRM cell, and miscellaneous construction debris generated during excavation/restoration activities. A total of three roll-off dumpsters were used to haul debris off the site.

3.6 Site Restoration Activities

Following completion of excavation activities, the former burn pit and IRM cell were regraded and backfilled with clean fill material to complement surrounding grades. Prior to initiating backfilling activities, a NYSDOT-approved backfill source was identified. A copy of the clean fill certificate is included in Appendix F. Backfill was placed in the excavation in appropriate 12-inch lifts and compacted to maintain pre-excavation conditions. Backfilled areas were seeded to establish a vegetative cover.

4. Certification

This is to certify that the Soil Removal Action for the West Lot Site and associated construction activities were completed in accordance with the RD Work Plan, as approved by the NYSDEC.

GM Consulting Engineers, P.C.

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5. References

ARCADIS Geraghty & Miller, Inc., 1999. Remedial Design Work Plan, West Lot Site, Utica, New York NYSDEC Site No. 633036. April 1999.

SECOR International, Incorporated, 1997. Feasibility Study Report, West Lot Site, Former Lockheed Martin Corporation Facility, 525 French Road, Utica, Oneida County, New York. July 1997

Tables

Table 1. Summary of Volatile Organic Compound Concentrations in Post-Excavation Samples, Former Burn Pit, September 1999, West Lot Site, Utica, New York.

Analyte	Sample ID: Collection Date:	EW-1-01 8/31/99	EW-1-02 9/1/99	EW-1-02D DUP-1	EB-1-01 8/31/99	EW-2-01 9/3/99	E8-2-01 9/3/99	EW-3-01 9/2/99
Chloromethai	ne	< 10	< 10	< 10	< 10	< 10	< 10	< 10
Bromometha	ne	< 10	< 10	< 10	< 10	< 10	< 10	< 10
Vinyl Chloride	e	< 10	< 10	< 10	< 10	< 10	< 10	< 10
Chloroethane		< 10	< 10	< 10	< 10	< 10	< 10	< 10
Methylene Cl	nloride	2 J	0.5 J	0.6 J	1 J	2 J	2 J	1 J
Acetone		20 B	10 JB	29 B	32 B	5 JB	6 JB	19 B
Carbon Disulf	fide	< 5	< 5	< 5	1 J	< 5	< 5	< 5
Vinyl Acetate	;	< 10	< 10	< 10	< 10	< 10	< 10	< 10
1,1-Dichloroe	ethene	< 10	< 10	< 10	< 10	< 10	< 10	< 5
1,1-Dichloroe	thane	< 5	< 5	< 5	< 5	< 5	< 5	< 5
cis-1,2-Dichlo	proethene	2 J	< 5	< 5	2 J	< 5	< 5	1 J
rans-1,2-Dic	hloroethene	0.5 J	< 5	< 5	16	< 5	< 5	< 5
Chloroform		< 5	< 5	< 5	< 5	< 5	< 5	< 5
1,2-Dichloroe	thane	0.5 J	< 5	< 5	< 5	< 5	< 5	< 5
2-Butanone		1 J	< 10	< 10	< 10	1 J	< 10	< 10
l,1,1-Trichloi	roethane	< 5	< 5	< 5	< 5	< 5	< 5	< 5
Carbon Tetrac	chloride	< 5	< 5	< 5	< 5	< 5	< 5	< 5
3romadichlar	omethane	< 5	< 5	< 5	< 5	< 5	< 5	< 5
1,2-Dichlorop	ropane	< 5	< 5	< 5	< 5	< 5	< 5	< 5
is-1,3-Dichlo	ropropene	< 5	< 5	< 5	< 5	< 5	< 5	< 5
Trichloroether	ne	6	1 J	3 J	11	1 J	1 J	< 5
Dibromochlor	omethane	< 5	< 5	< 5	< 5	< 5	< 5	< 5
,1,2-Trichlor	roethane	< 5	< 5	< 5	< 5	< 5	< 5	< 5
Benzene		< 5	< 5	< 5	< 5	< 5	< 5	< 5
rans-1,3-Dich	nloropropene	< 5	< 5	< 5	< 5	< 5	< 5	< 5
Bromoform		< 5	< 5	< 5	< 5	< 5	< 5	< 5
-Methyl-2-Pe	entanone	< 10	< 10	< 10	< 10	< 10	< 10	< 10
2-Hexanone		< 10	< 10	< 10	< 10	< 10	< 10	< 5
etrachloroetl	hene	2 J	< 5	< 5	< 5	4 J	4 J	< 5
,1,2,2-Tetra	chloroethane	< 5	< 5	< 5	< 5	0.8 J	< 5	7
oluene		< 5	2 J	2 J	2 J	< 5	< 5	< 5
hlorobenzen	е	< 5	< 5	< 5	< 5	< 5	< 5	< 5
thylbenzene		< 5	< 5	< 5	1 J	< 5	< 5	10
Styrene		< 5	< 5	< 5	< 5	< 5	< 5	< 5
(ylene (total)		< 5	0.6 J	0.7 J	5 J	< 5	< 5	24

Concentrations reported in micrograms per kilogram (ug/kg), equivalent to parts per billion (ppb) .

J Estimated value.

U Parameter was analyzed for but was not detected.

NA Not analyzed.

Table 1. Summary of Volatile Organic Compound Concentrations in Post-Excavation Samples, Former Burn Pit, September 1999, West Lot Site, Utica, New York.

Analyte	Sample ID: Collection Date:	EW-3-02 9/2/99	EW-3-03 9/2/99	EW-3-04 9/3/99	EW-3-05 9/3/99	Rinse Blank 9/3/99
Chlorometha	ne	< 10	< 10	< 10	< 10	< 10
Bromometha		< 10	< 10	< 10	< 10	< 10
Vinyl Chloride		< 10	< 10	< 10	< 10	< 10
Chloroethane		< 10	< 10	< 10	< 10	< 10
Methylene Ch		1 J	2 J	2 J	2 J	0.5 J
Acetone		10 JB	15 JB	5 JB	26 B	2 JB
Carbon Disulf	ide	< 5	< 5	< 5	< 5	< 5
Vinyl Acetate		< 10	< 10	< 10	< 10	< 10
1,1-Dichloroe		< 5	< 5	< 10	< 10	< 10
1,1-Dichloroe		< 5	< 5	< 5	< 5	< 5
cis-1,2-Dichlo		2 J	0.8 J	8	2 J	< 5
trans-1,2-Dicl		< 5	< 5	< 5	< 5	< 5
Chloroform		< 5	< 5	< 5	< 5	< 5
1,2-Dichloroe	thane	< 5	< 5	< 5	< 5	< 5
2-Butanone		< 10	3 J	< 10	< 10	< 10
1,1,1-Trichlor	roethane	< 5	< 5	< 5	< 5	< 5
Carbon Tetrac	chloride	< 5	< 5	< 5	< 5	< 5
Bromodichlor	omethane	< 5	< 5	< 5	< 5	< 5
1,2-Dichlorop	ropane	< 5	< 5	< 5	< 5	< 5
cis-1,3-Dichlo	ropropene	< 5	< 5	< 5	< 5	< 5
Trichloroether	ne	2 J	1 J	8	3 J	< 5
Dibromochlor	omethane	< 5	< 5	< 5	< 5	< 5
1,1,2-Trichlor	oethane	< 5	< 5	< 5	< 5	< 5
Benzene		2 J	2 J	< 5	< 5	< 5
Trans-1,3-Dic	hloropropene	< 5	< 5	< 5	< 5	< 5
Bromoform		< 5	< 5	< 5	< 5	< 5
4-Methyl-2-Pe	entanone	< 10	< 10	< 10	< 10	< 10
2-Hexanone		< 10	< 10	< 10	< 10	< 10
Tetrachloroetl	nene	< 5	< 5	17	54	< 5
Toluene		18	150	1 J	1 J	< 5
1,1,2,2-Tetra	chloroethane	< 5	< 5	< 5	< 5	< 5
Chlorobenzene	е	< 5	< 5	< 5	< 5	< 5
Ethylbenzene		91	130	< 5	2 Ј	< 5
Styrene		< 5	< 5	< 5	< 5	< 5
Xylene (total)		250	470	< 5	0.9 J	< 5

Concentrations reported in micrograms per kilogram (ug/kg), equivalent to parts per billion (ppb) .

J Estimated value.

U Parameter was analyzed for but was not detected.

NA Not analyzed.

Table 2. Summary of PCB Concentrations in Post-Excavation Samples, Former Burn Pit, West Lot Site, Utica, New York.

	Sample ID:	EW-1-01	EW-1-02	EW-1-02D	EB-1-01	EW-2-01	EB-2-01	EW-3-01
Analyte	Collection Date:	8/31/99	9/1/99	DUP-1	8/31/99	9/3/99	9/3/99	9/2/99
Aroclor-1016		< 33	< 33	< 33	< 33	< 33	< 33	< 33
Aroclor-1221		< 67	< 67	< 67	< 67	< 67	< 67	< 67
Aroclor-1232		< 33	< 33	< 33	< 33	< 33	< 33	< 33
Aroclor-1242		< 33	< 33	< 33	< 33	< 33	< 33	< 33
Aroclor-1248		< 33	< 33	< 33	< 33	< 33	< 33	< 33
Aroclor-1254		58	7.9 J	17 J	1200	19 J	11 J	< 33
Aroclor-1260		< 33	< 33	< 33	< 33	< 33	< 33	< 33

Concentrations reported in micrograms per kilogram (ug/kg), equivalent to parts per billion (ppb) .

J Estimated value.

U Parameter was analyzed for but was not detected.

NA Not analyzed.

Table 2. Summary of PCB Concentrations in Post-Excavation Samples, Former Burn Pit, West Lot Site, Utica, New York

Analyte	Sample ID: Collection Date:	EW-3-02 9/2/99	EW-3-03 9/2/99	EW-3-04 9/3/99	EW-3-05 9/3/99	Rinse Blank 9/3/99	
Aroclor-1016		< 33	< 33	< 33	< 33	< 33	
Aroclor-1221		< 67	< 67	< 67	< 67	< 67	
Aroclor-1232		< 33	< 33	< 33	< 33	< 33	
Aroclor-1242		< 33	< 33	< 33	< 33	< 33	
Aroclor-1248		< 33	< 33	< 33	< 33	< 33	
Aroclor-1254		< 33	< 33	73	29 J	< 33	
Aroclor-1260		< 33	< 33	< 33	< 33	< 33	

Concentrations reported in micrograms per kilogram (ug/kg), equivalent to parts per billion (ppb) .

J Estimated value.

U Parameter was analyzed for but was not detected.

NA Not analyzed.

Table 3a. Concentrations of PCBs in IRM Treatment Cell Soils, West Lot Site, Utica, New York.

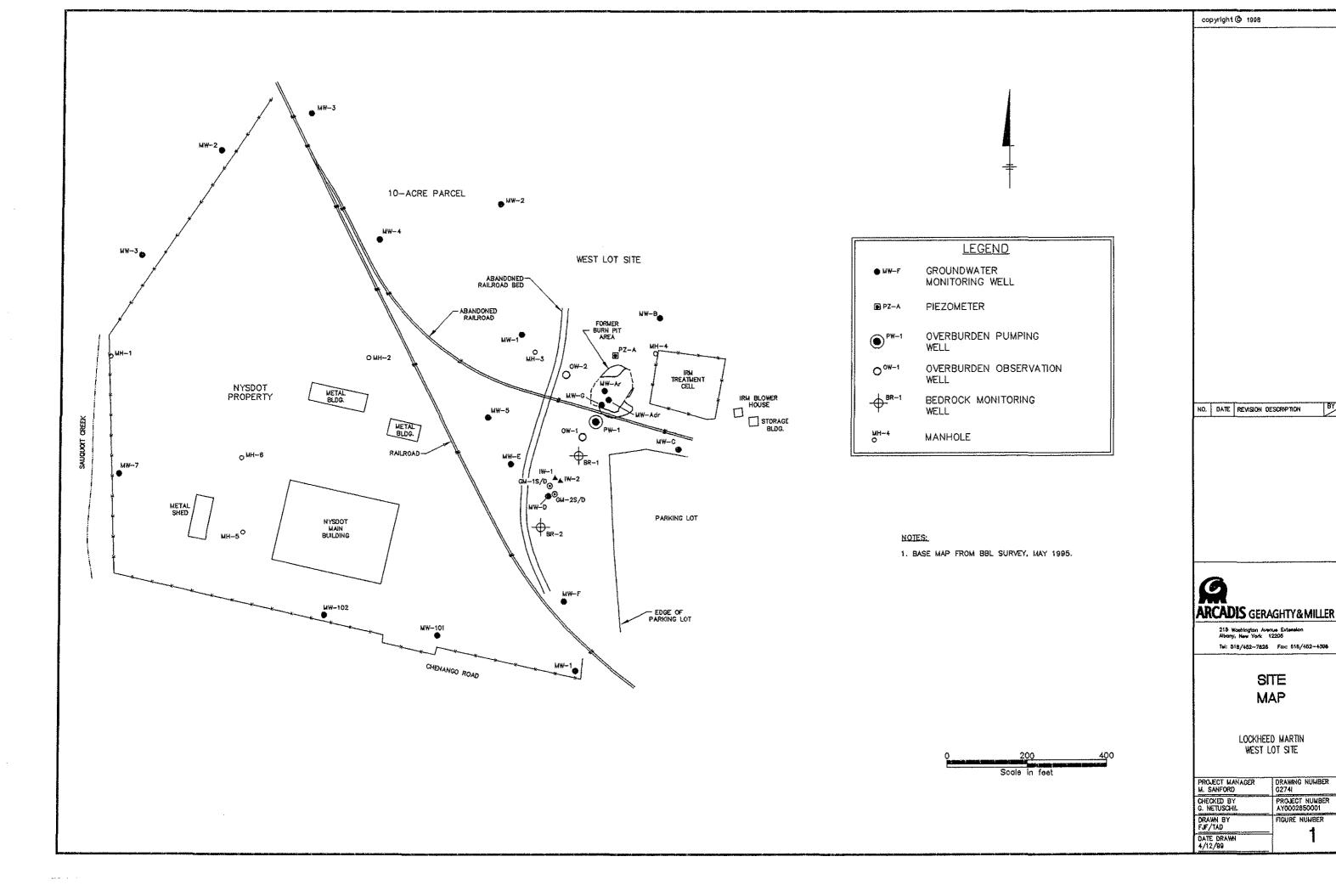
Sample ID	Date	Location	DTECHTOR Reading	PCB Equivalent (ppm)	Dilution (Y/N)	Hazardous (Y/N)
IRM - WC - 01 - D		Hot Spot 1	22	1.1 - 4.0	N	N
IRM - WC - 01 - 2D	8/17/99	Hot Spot 1	23	1.1 - 4.0	N	N
EW - Hot Spot - E -1D		Hot Spot 1 (East Well)	28	1.1-4.0	N	N
IRM - WC- 01 - C		Soil Pile #1 Composite	38	1.1 - 4.0	N	N
IRM - WC - 03 - C		Soil Pile #3 Composite	30	1.1 - 4.0	N	N
IRM - WC - 03 - 2C	8/18/99	Soil Pile #3 Composite Dup	22	1.1 - 4.0	N	N
IRM - WC - 04 - C	8/18/99	Soil Pile #4 Composite	38	1.1 - 4.0	N	N
IRM - WC - 05 - C		Soil Pile #5 Composite	50	41-150	Y	Υ
IRM - WC - 06 - C	8/19/99	Soil Pile #6 Composite	28	1.1 - 4.0	N	N
IRM - WC - 07 - C	8/19/99	Soil Pile #7 Composite	44	4.1 - 15.0	N	N
IRM - WC - 08 - C	8/19/99	Soil Pile #8 Composite	28	1.1 - 4.0	N	N
IRM - WC - 10 - C	8/20/99	Soil Pile #10 Composite	45	4.1 - 15.0	N	N
IRM - WC - 11 - C	8/20/99	Soil Pile #11 Composite	43	4.1 - 15.0	N	N
IRM - WC - 11 - D	8/20/99	Soil Pile #1 Grab	33	1.1 - 4.0	N	N
IRM - WC - 12 - C	8/20/99	Soil Pile #12 Composite	34	1.1 - 4.0	N	N
IRM - WC - 12 - 2C	8/20/99	Soil Pile #12 Composite Dup	18	5 - 10	Y	Ν
IRM - WC - 13 - D	8/20/99	Soil Pile #13 Grab	42	4.1 - 15	N	N
IRM - WC - 13 - C	8/20/99	Soil Pile #13 Composite	39	1.1 - 4.0	N	N
IRM - WC - 14 - C	8/23/99	Soil Pile #14 Composite	20	0.5 - 1.0	N	N
IRM - WC - 15 - C	8/23/99	Soil Pile #15 Composite	61	16 - 25	N	N
IRM - WC - 15 - 2C	8/23/99	Soil Pile #15 Composite Dup	36	1.1 - 4.0	N	N
IRM - WC - 16 - C	8/23/99	Soil Pile #16 Composite	43	4.1 - 15	N	N
IRM - WC - 17 - C	8/23/99	Soil Pile #17 Composite	30	1.1 - 4.0	N	N
IRM - WC - 18 - C	8/23/99	Soil Pile #18 Composite	37	1.1 - 4.0	N	N
IRM - WC - 19 - C	8/24/99	Soil Pile #19 Composite	34	1.1 - 4.0	N	N
IRM - WC - 20 - C	8/24/99	Soil Pile #20 Composite	41	4.1 - 15	N	N
IRM - WC - 21 - C	8/24/99	Soil Pile #21 Composite	LO	< 0.5	N	N
IRM - WC - 21 - 2C	8/24/99	Soil Pile #21 Composite Dup	53	4.1 - 15	N	N
IRM - WC - 22 - C	8/24/99	Soil Pile #22 Composite	53	4.1 - 15	N	N
IRM - WC - 23 - C	8/24/99	Soil Pile #23 Composite	22	1.1 - 4.0	N	N
IRM - WC - 24 - C	8/25/99	Soil Pile #24 Composite	22	1.1 - 4.0	N	N
IRM - WC - 25 - C	8/25/99	Soil Pile #25 Composite	50	4.1 - 15	N	N
IRM - WC - 26 - C	8/25/99	Soil Pile #26 Composite	25	1.1 - 4.0	N	N
IRM - WC - 27 - C	8/25/99	Soil Pile #27 Composite	45	4.1 -15	N	N
IRM - WC - 28 - D	8/25/99	Soil Pile #28 Grab	38	1.1 - 4.0	N	N
IRM - WC - 29 - C	8/26/09	Soil Pile #29 Composite	53	4.1 - 15	N	N
IRM - WC - 30 - C	8/31/99	Soil Pile #30 Composite	22	1.1 - 4.0	N	N
IRM - WC - 31 - C	8/31/99	Soil Pile #31 Composite	18	1.1 - 4.0	N	N
IRM - WC - 32 - C	9/1/99	Soil Pile #32 Composite	15	0.5 - 1.0	N	N

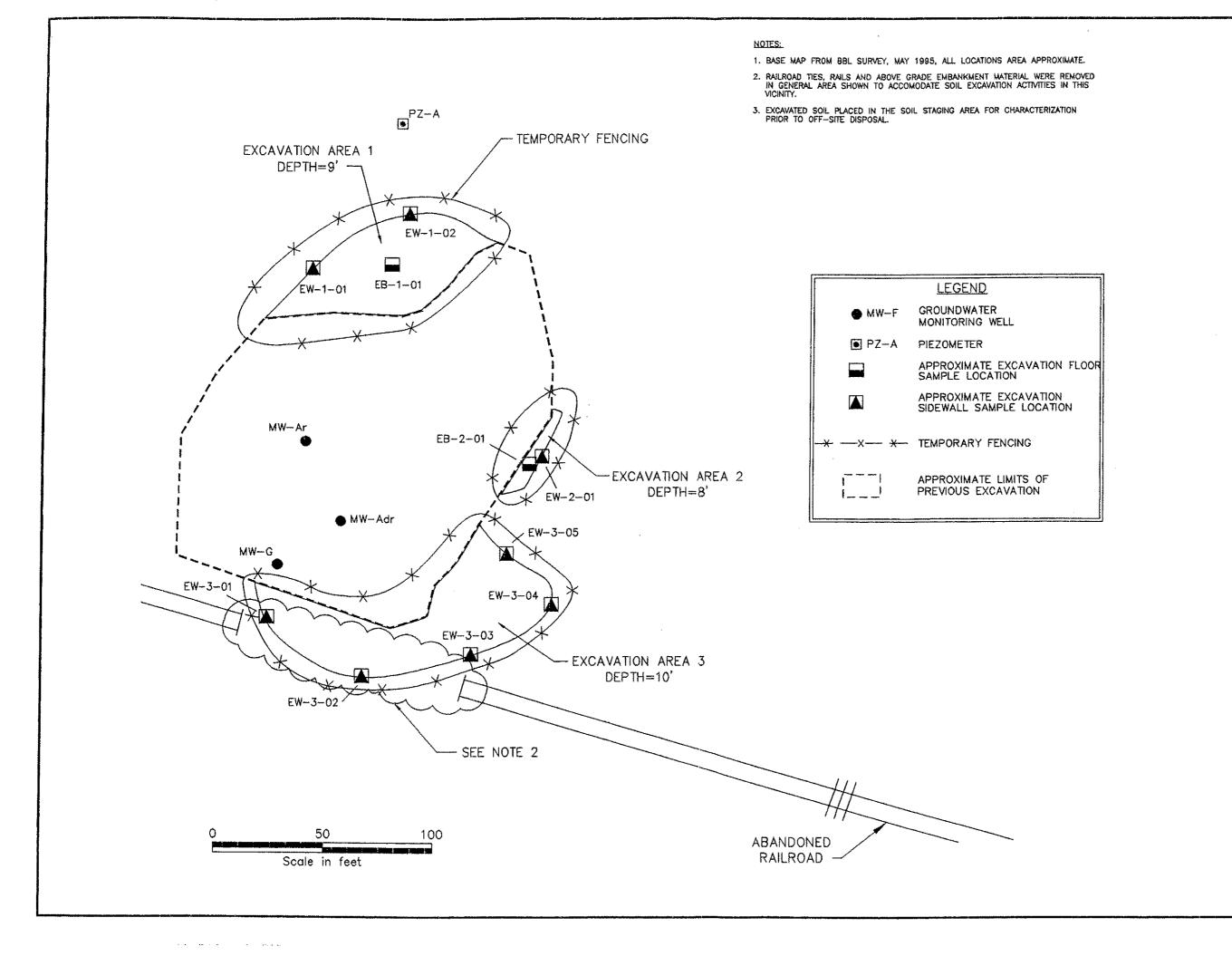
Table 3b. Concentration of PCBs in Former Burn Pit Soils, West Lot Site, Utica, New York.

Sample ID	Date	Location	DTECHTOR Reading	PCB Equivalent (ppm)	Dilution (Y/N)	Hazardous (Y/N)
BP - WC - 1 - C	9/2/99	Soil Pile BP#1 Composite	21	1.1 - 4.0	N	N
BP - WC - 2 - C	9/2/99	Soil Pile BP#2 Composite	23	1.1 - 4.0	N	N
BP - WC - 3 - C	9/2/99	Soil Pile BP#3 Composite	18	0.5 - 1.0	N	N
BP - WC - 4 - C	9/2/99	Soil Pile BP#4 Composite	40	1.1 - 4.0	N	N
BP - WC - 5 - C	9/2/99	Soil Pile BP#5 Composite	32	1.1 - 4.0	N	N
BP - WC - 6 - C	9/2/99	Soil Pile BP#6 Composite	20	0.5 - 1.0	N	N
BP - WC - 7 - C	9/2/99	Soil Pile BP#7 Composite	17	0.5 - 1.0	N	N
BP - WC - 8 - C	9/2/99	Soil Pile BP#8 Composite	28	1.1 - 4.0	N	N
BP - WC - 9 - C	9/3/99	Soil Pile BP#9 Composite	22	1.1 - 4.0	N	N
BP - WC - 10 - C	9/3/99	Soil Pile BP#10 Composite	33	1.1 - 4.0	N	N
BP - WC - 11 - C	9/7/99	Soil Pile BP#11 Composite	16	0.5 - 1.0	N	N
BP - 10C - 3 - Pile #2	9/8/99	BP - WC- 3 - Pile #2	LO	<0.5	N	N

Note: Analysis performed using DTECHTOR PCB Immunoassay Test Kits.







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NO. DATE REVISION DESCRIPTION

ARCADIS GERAGHTY&MILLER

215 Washington Avenue Didension Abony, New York 12206 Tel: 618/462-7626 Fex: 518/462-4396

FORMER BURN PIT EXCAVATION AREAS

AND SAMPLE LOCATIONS

LOCKHEED MARTIN WEST LOT SITE

> DRAWNG NUMBER G274H

PROJECT NUMBER AY0002850001

FIGURE NUMBER

PROJECT MANAGER M. SANFORD

CHECKED BY G. NETUSCHIL

DRAWN BY FJF/TAD

DATE DRAWN 10/18/99

Appendix - A -

Former Burn Pit Post Excavation Laboratory Analytical Data



RECEIVED

SEP 2 6 1999

ARCADIS Geraghty & Miller

September 15, 1999

Severn Trent Laboratories 200 Monroe Turnpike Monroe, Connecticut 06468

Tel: (203) 261-4458 Fax: (203) 261-5346 www.stl-inc.com

Mr. Marc Sanford ARCADIS/GERAGHTY & MILLER 215 Washington Ave. Ext. Albany, NY 12205

Dear Mr. Sanford:

Please find enclosed the analytical results of 11 sample(s) received at our laboratory on September 4, 1999. This report contains sections addressing the following information at a minimum:

sample summary

definition of data qualifiers and terminology

analytical methodology

analytical results

state certifications chain-of-custody

STL Report #7099-2198A	Purchase Order #AY000265.0003.00001
Project ID: UTICA, LKM	

Copies of this analytical report and supporting data are maintained in our files for a minimum of five years unless special arrangements have been made. Unless specifically indicated, all analytical testing was performed at this laboratory location and no portion of the testing was subcontracted.

We appreciate your selection of our services and welcome any questions or suggestions you may have relative to this report. Please contact your customer service representative at (203) 261-4458 for any additional information. Thank you for utilizing our services: we hope you will consider us for your future analytical needs.

I have reviewed and approved the enclosed data for final release.

Very truly yours.

C. Curran tory Manager

JCC

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7099-2198A ARCADIS/GERAGHTY & MILLER

Case Narrative

Volatile Organics - Volatile organics were determined by purge and trap GC/MS using guidance provided in Method 5030B/8260B. The instrumentation used was a Tekmar Model 2000/2016 Concentrator interfaced with a Hewlett-Packard Model 5970A GC/MS/DS.

No problems were encountered.

Polychlorinated Biphenyls (PCB's) - PCB samples were extracted and analyzed by GC/ECD using guidance provided in Methods 3510C/3550B/8082. The instrumentation used was a Hewlett-Packard Gas Chromatograph equipped with an Electron Capture Detector (Ni⁶³).

All samples were extracted, concentrated and analyzed without any apparent problems.

All soil samples required acid and sulfur cleanup prior to analysis.

Sample EB-2-01MSB was not extracted. An LCS, PBLK77QC, was extracted, which is essentially the same as an MSB except it also contains Aroclor-1242 as a spiking compound.

Surrogates were diluted out of sample BP-WC-3PILE#2.

Manual integrations were performed if required, and any affected peaks were designated with an "FF" on the area report in the column titled "Code". Manual integrations were initialed by the analyst that performed the integration.

TABLE VO-1.0 7099-2198A ARCADIS/GERAGHTY & MILLER TCL VOLATILE ORGANICS

All values are ug/L.

	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	 ·····
Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	Method Blank VBLKO7 VBLKO7 1.00	RINSE BLANK 992198A-07 VBLK07 1.00	Quant. Limits with no Dilution
Chloromethane Bromomethane Vinyl Chloride Chloroethane Methylene Chloride Acetone Carbon Disulfide Vinyl Acetate 1,1-Dichloroethene 1,1-Dichloroethene cis-1,2-Dichloroethene trans-1,2-Dichloroethene Chloroform 1,2-Dichloroethane 2-Butanone 1,1,1-Trichloroethane Carbon Tetrachloride Bromodichloromethane 1,2-Dichloropropane cis-1,3-Dichloropropene Trichloroethene Dibromochloromethane 1,1,2-Trichloroethane Benzene trans-1,3-Dichloropropene Bromoform 4-Methyl-2-Pentanone 2-Hexanone Tetrachloroethene Toluene 1,1,2,2-Tetrachloroethane Chlorobenzene Ethylbenzene Styrene	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		10000000000000000000000000000000000000
Xylene (total) Date Received Date Extracted Date Analyzed	U N/A 09/07/99	U 09/04/99 N/A 09/07/99	5.0

TABLE VO-1.1 7099-2198A ARCADIS/GERAGHTY & MILLER TCL VOLATILE ORGANICS

All values are ug/Kg dry weight basis.

		y	y	y
Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	Method Blank VBLKKM VBLKKM 1.00	EW-3-04 992198A-01 VBLKKM 1.30	EW-3-05 992198A-02 VBLKKM 1.12	Quant. Limits with no Dilution
Chloromethane Bromomethane Vinyl Chloride Chloroethane Methylene Chloride Acetone Carbon Disulfide Vinyl Acetate 1,1-Dichloroethene 1,1-Dichloroethene cis-1,2-Dichloroethene trans-1,2-Dichloroethene chloroform 1,2-Dichloroethane 2-Butanone 1,1,1-Trichloroethane Carbon Tetrachloride Bromodichloromethane 1,2-Dichloropropane cis-1,3-Dichloropropene Trichloroethene Dibromochloromethane 1,1,2-Trichloroethane Benzene trans-1,3-Dichloropropene Bromoform 4-Methyl-2-Pentanone 2-Hexanone Tetrachloroethene Toluene 1,1,2,2-Tetrachloroethane Chlorobenzene Ethylbenzene Styrene Xylene (total)	מממממממממממממממממ מממממ ממממממממ ממממממ	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	000008 20000000000000000000000000000000	10 10 10 10 10 10 10 10 10 10 10 10 10 1
Date Received Date Extracted Date Analyzed	N/A 09/07/99	09/04/99 N/A 09/07/99	09/04/99 N/A 09/07/99	

TABLE VO-1.2 7099-2198A ARCADIS/GERAGHTY & MILLER TCL VOLATILE ORGANICS

All values are ug/Kg dry weight basis.

	<u>.</u>			
Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	EW-2-01 992198A-03 VBLKKM 1.11	EB-2-01 992198A-04 VBLKKM 1.09	EB-2-01 FMS 992198A-04 FMS VBLKKM 1.09	Quant. Limits with no Dilution
Chloromethane Bromomethane Vinyl Chloride Chloroethane Methylene Chloride Acetone Carbon Disulfide Vinyl Acetate 1,1-Dichloroethene 1,1-Dichloroethene cis-1,2-Dichloroethene trans-1,2-Dichloroethene chloroform 1,2-Dichloroethane 2-Butanone 1,1,1-Trichloroethane Carbon Tetrachloride Bromodichloromethane 1,2-Dichloropropane cis-1,3-Dichloropropene Trichloroethene Dibromochloromethane 1,1,2-Trichloroethane Benzene trans-1,3-Dichloropropene Bromoform 4-Methyl-2-Pentanone 2-Hexanone Tetrachloroethene Toluene 1,1,2,2-Tetrachloroethane Chlorobenzene Ethylbenzene Styrene Xylene (total)	U U U U U U U U U U U U U U U U U U U	25 B 2	56X 46X 58X 55X 49X 12BX 57X 73X 53X 58X 51 52 55X 46X 32X 46X 52X 46X 52X 42X 57X 42X 42X 57X 42X 57X 42X 57X 42X 57X 42X 57X 42X 57X 42X 57X 42X 57X 57X 42X 57X 57X 57X 57X 57X 57X 57X 57X 57X 57	00000000000000000000000000000000000000
Date Received Date Extracted Date Analyzed	09/04/99 N/A 09/07/99	09/04/99 N/A 09/07/99	09/04/99 N/A 09/07/99	

TABLE VO-1.3 7099-2198A ARCADIS/GERAGHTY & MILLER TCL VOLATILE ORGANICS

All values are ug/Kg dry weight basis.

	EB-2-01	BP-WC-	BP-WC-	
Client Sample I.D.	FMSD	3PILE#1	3PILE#2	
	992198A-04			Quant.
Lab Sample I.D.	FMSD	992198A-08	992198A-09	Limits
Method Blank I.D.	VBLKKM	VBLKKM	VBLKKM	with no
Quant. Factor	1.09	1.11	1.08	Dilution
				7.0
Chloromethane	50X	U	Ŭ	10 10
Bromomethane	48X	al Ber ü rlerei	ម្ចាប់ មេជា ប្រើប្រធានា	10
Vinyl Chloride	52X		្រុ 	
Chloroethane	41X			_1 <u>0</u>
Methylene Chloride	46X	.6J	.6J	5.0
Acetone	30BX	2ЈВ	4JB	10
Carbon Disulfide	52X	U	ŭ	5.0
Vinyl Acetate	72X		or constant	10
1,1-Dichloroethene	49X	ש	<u>"</u>	5.0
1,1-Dichloroethane	52X	and the figure of the first of	The state of the s	5.0
cis-1,2-Dichloroethene	49	Ŭ	3 <u>J</u>	5.0
trans-1,2-Dichloroethene	46		<u>u</u>	5.0
Chloroform	48X	Ŭ	Ŭ	5.0
1,2-Dichloroethane	49X		HERONOUS ALCO	5.0
2-Butanone	43X	U	.9J	10
1,1,1-Trichloroethane	48X		u u	5.0
Carbon Tetrachloride	49X	Ŭ	ט	5.0
Bromodichloromethane	48X		HARLEY WARREN	5.0
1,2-Dichloropropane	54X	U	U	5.0
cis-1,3-Dichloropropene	49X	The Contract of the Contract o	U	5.0
Trichloroethene	51X	Ü	18	5.0
Dibromochloromethane	51X	The state of the s	$oldsymbol{v}_{i}$	5.0
1,1,2-Trichloroethane	49X	ָ ט	ָ ט	5.0
Benzene	54X	v	1.5	5.0
trans-1,3-Dichloropropene	47X	บ	บ	5.0
Bromoform	57X	Company of the compan	744, 3 3 J, 224, 3	5.0
4-Methyl-2-Pentanone	68X	U	บ	10
2-Hexanone	73X	U	i kana ja	10
Tetrachloroethene	59X	ΰ	33	5.0
Toluene	54X	e i ekrej u jihayi	. 11	5.0
1,1,2,2-Tetrachloroethane	62X	U	Ŭ	5.0
Chlorobenzene	51X	U	e de la	5.0
Ethylbenzene	53X	U	2J	5.0
Styrene	56X	ע אין	ט	5.0
Xylene (total)	160X	U	19	5.0
Date Received	09/04/99	09/04/99	09/04/99	
Date Extracted	N/A	N/A	N/A	
Date Analyzed	09/07/99	09/07/99	09/07/99	

TABLE VO-1.4 7099-2198A ARCADIS/GERAGHTY & MILLER TCL VOLATILE ORGANICS

All values are ug/Kg dry weight basis.

Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	BP-WC- 2PILE#1 992198A-10 VBLKKM 1.04	Quant. Limits with no Dilution
Chloromethane Bromomethane Vinyl Chloride Chloroethane Methylene Chloride Acetone Carbon Disulfide Vinyl Acetate 1,1-Dichloroethene 1,1-Dichloroethene cis-1,2-Dichloroethene trans-1,2-Dichloroethene Chloroform 1,2-Dichloroethane 2-Butanone 1,1,1-Trichloroethane Carbon Tetrachloride Bromodichloromethane 1,2-Dichloropropane cis-1,3-Dichloropropene Trichloroethene Dibromochloromethane 1,1,2-Trichloroethane Benzene trans-1,3-Dichloropropene Bromoform 4-Methyl-2-Pentanone 2-Hexanone Tetrachloroethene Toluene 1,1,2,2-Tetrachloroethane Chlorobenzene Ethylbenzene Styrene Xylene (total)	U .6J .6JB U U U U U U U U U U U	10 10 10 10 10 10 10 10 10 10 10 10 10 1
Date Received Date Extracted Date Analyzed	09/04/99 N/A 09/07/99	

TABLE GC-1.0 7099-2198A ARCADIS/GERAGHTY & MILLER 8082 POLYCHLORINATED BIPHENYLS (PCB's)

All values are ug/L.

Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	Method Blank 090899-B02 PBLK80 1.00	PBLK80 QC2 090899-B02 QC2 PBLK80 1.00	RINSE BLANK 992198A-07 PBLK80 1.00	Quant. Limits with no Dilution
Aroclor-1016 Aroclor-1221 Aroclor-1232 Aroclor-1242 Aroclor-1248 Aroclor-1254 Aroclor-1260		U 3 1X ⟨⟨⟨⟩⟨ U	ប (១) (១ ១ (១) (១) ប	1.0 1.0 1.0
Date Received Date Extracted Date Analyzed	09/08/99 09/10/99	09/08/99 09/10/99	09/04/99 09/08/99 09/10/99	

TABLE GC-1.1 7099-2198A

ARCADIS/GERAGHTY & MILLER 8082 POLYCHLORINATED BIPHENYLS (PCB's)

All values are ug/Kg dry weight basis.

Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	Method Blank 090799-B02 PBLK77 1.00	PBLK77 QC 090799-B02QC PBLK77 1.00	EW-3-04 992198A-01 PBLK77 1.28	Quant. Limits with no Dilution
Aroclor-1016 Aroclor-1221 Aroclor-1232 Aroclor-1242 Aroclor-1248 Aroclor-1254 Aroclor-1260	U U U	U	ן ע	33. 67. 33. 33. 33. 33.
Date Received Date Extracted Date Analyzed	09/07/99 09/07/99	09/07/99 09/07/99	09/04/99 09/07/99 09/07/99	

TABLE GC-1.2 7099-2198A

ARCADIS/GERAGHTY & MILLER 8082 POLYCHLORINATED BIPHENYLS (PCB's)

All values are ug/Kg dry weight basis.

Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	EW-3-05	EW-2-01	EB-2-01	Quant.
	992198A-02	992198A-03	992198A-04	Limits
	PBLK77	PBLK77	PBLK77	with no
	1.10	1.16	1.20	Dilution
Aroclor-1016 Aroclor-1221 Aroclor-1232 Aroclor-1242 Aroclor-1248 Aroclor-1254 Aroclor-1260	U State of the state of the sta			33. 33. 33.
Date Received	09/04/99	09/04/99	09/04/99	
Date Extracted	09/07/99	09/07/99	09/07/99	
Date Analyzed	09/07/99	09/07/99	09/07/99	

TABLE GC-1.3 7099-2198A ARCADIS/GERAGHTY & MILLER 8082 POLYCHLORINATED BIPHENYLS (PCB's)

All values are ug/Kg dry weight basis.

Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	EB-2-01 MS 992198A-04MS PBLK77 1.20	EB-2-01 MSD 992198A-04 MSD PBLK77 1.20	BP-WC- 3PILE#1 992198A-08 PBLK77 1.11	Quant. Limits with no Dilution
Aroclor-1016 Aroclor-1221 Aroclor-1232 Aroclor-1242 Aroclor-1248 Aroclor-1254 Aroclor-1260		ប ប ប	U U U U U U U U U U U U U U U U U U U	33. 33. 33.
Date Received Date Extracted Date Analyzed	09/04/99 09/07/99 09/08/99	09/04/99 09/07/99 09/08/99	09/04/99 09/07/99 09/07/99	

TABLE GC-1.4 7099-2198A APCADIS/GEPACHTY & MILL

ARCADIS/GERAGHTY & MILLER 8082 POLYCHLORINATED BIPHENYLS (PCB's)

All values are ug/Kg dry weight basis.

Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	BP-WC- 3PILE#2 992198A-09 PBLK77 532.	BP-WC- 2PILE#1 992198A-10 PBLK77 5.15	Quant. Limits with no Dilution
Aroclor-1016 Aroclor-1221 Aroclor-1232 Aroclor-1242 Aroclor-1248 Aroclor-1254 Aroclor-1260	U D U	Ŭ	33.
Date Received Date Extracted Date Analyzed	09/04/99 09/07/99 09/08/99	09/04/99 09/07/99 09/08/99	

ORGANICS APPENDIX

- U Indicates that the compound was analyzed for but not detected.
- J Indicates that the compound was analyzed for and determined to be present in the sample. The mass spectrum of the compound meets the identification criteria of the method. The concentration listed is an estimated value, which is less than the specified minimum detection limit but is greater than zero.
- B This flag is used when the analyte is found in the blanks as well as the sample. It indicates possible sample contamination and warns the data user to use caution when applying the results of this analyte.
- N Indicates that the compound was analyzed for but not requested as an analyte. Value will not be listed on tabular result sheet.
- S Estimated due to surrogate outliers.
- X Matrix spike compound.
- (1) Cannot be separated.
- (2) Decomposes to azobenzene. Measured and calibrated as azobenzene.
- A This flag indicates that a TIC is a suspected aldol condensation product.
 - E Indicates that it exceeds calibration curve range.
 - D This flag identifies all compounds identified in an analysis at a secondary dilution factor.
- C Confirmed by GC/MS.
- T Compound present in TCLP brank
- P This flag is used for a pesticide/aroclor target analyte when there is a greater than 25 percent difference for detected concentrations between the two GC columns (see Form X).

STATE CERTIFICATIONS

In some instances it may be necessary for environmental data to be reported to a regulatory authority with reference to a certified laboratory. For your convenience, the laboratory identification numbers for Severn Trent Laboratories-Connecticut are provided in the following table. Many states certify laboratories for specific parameters or tests within a category (i.e. method 325.2 for wastewater). The information in the following table indicates the lab is certified in a general category of testing such as drinking water or wastewater analysis. The laboratory should be contacted directly if parameter-specific certification information is required.

Severn Trent-Connecticut Certification Summary (as of March 1999)

State	Responsible Agency	Certification	Lab Number
Connecticut	Department of Health Services	Drinking Water, Wastewater	PH _497
Kansas Department of Health and Environment		Drinking Water, Wastewater/Solid, Hazardous Waste	E-10210
Maine	Department of Human Services	Wasiewaier	CT023
Massachusetts	Department of Environmental Protection	Potable/Non-Potable Water	CT023
New Hampshire	Department of Environmental Services	Drinking Water, Wastewater	2528
New Jersey	Department of Environmental Protection	Drinking Water, Wastewater	46410
New York	Department of Health	CLP, Drinking Water, Wastewater, Solid/ Hazardous Waste	10602
North Carolina	Division of Environmental Management	Wastewater Hazardous Waste	388
Oklahoma	Department of Environmental Quality	General Water Quality/ Sludge Testing	9614
Rhode Island	Department of Health	ChemistryNon- Potable Water and Wastewater	A43
Washington	Department of Ecology	Wastewater/ Hazardous Waste	C231
Wisconsin Department of Natural Resources		Wasiewater/ Hazarous Wasie	998355710

7099-2198A ARCADIS/GERAGHTY & MILLER SAMPLE SUMMARY

CLIENT ID	LAB ID	MATRIX	DATE COLLECTED	DATE RECEIVED
EW-3-04	992198A-01	SOIL	09/03/99	09/04/99
EW-3-05	992198A-02	SOIL	09/03/99	09/04/99
EW-2-01	992198A-03	SOIL	09/03/99	09/04/99
EB-2-01	992198A-04	SOIL	09/03/99	09/04/99
EB-2-01	992198A-04MS	SOIL	09/03/99	09/04/99
EB-2-01	992198A-04MSB	SOIL	09/03/99	09/04/99
EB-2-01	992198A-04MSD	SOIL	09/03/99	09/04/99
RINSE BLANK	992198A-07	WATER	09/03/99	09/04/99
BP-WC-3PILE#1	992198A-08	SOIL	09/03/99	09/04/99
BP-WC-3PILE#2	992198A-09	SOIL	09/03/99	09/04/99
BP-WC-2PILE#1	992198A-10	SOIL	09/03/99	09/04/99

Client ID: BP-WC-2PILE#1, BP-WC-3PILE#1, BP-WC-3PILE#2, EB-2-01, EW-2-01,

EW-3-04, EW-3-05, RINSE BLANK

Job Number: 7099-2198A

Date: 9/15/99

Qty Matrix	Analysis	Description	
10 SOIL	PCB-N8082	PCB's	
10 SOIL	VOA-N8260B-TCL	TCL Volatile Organic	

10 SOIL VOA-N8260B 1 WATER PCB-N8082 PCB's

TCL Volatile Organic 1 WATER VOA-N8260B-TCL

	ARCADIS GERAGHTY&MILLER	Labora	atory Task O	rder No./F	ζυιι !O. No	_	CI	HAIN-OI	-CUSTO	DDY REG	CORD	Page	<u>L</u> ,	of
	Project Number/Name	2026 s	യാ3.ത്ത	ILHC				ANAIVCIC	/ METHOD) / CI7E				
	Project Location Chico			1				AIVALISIS	/ WETHOL	/ 312.6				
	Laboratory 500	,	t		,		/10	/ ,	/ ,	/ ,	/			
	Project Manager						(6)							
	Sampler(s)/Affiliation		į	<u> </u>	ربائم/	8/4								
	Jumpici (3)/Attitudiots			<u></u>	\O'\ \O'\	10 TO	(A)							
	Sample ID/Location	Matrix	Date/T ime Sampled	Time Lab 10	/	0/4						Remarks		Total
/	EW-3-04	5	9/3/99	9'00A)	1								a
12	EW-3-05	5	9/3/99	Pao: P	l	I								2
クラ	EW-2-01	5	9/3/99	10:30A	i	1		PA	, ,	113 113 6	,			2
,4	EB-2-01	5	9399	10:30A	1	ļ ļ			1		W H H	EN		2
OR)	EB-2-01M5	3	9399	10:30A		γ			G°					2
	EB-2-01MSD	5	7/3/99	10.30/	ľ	W								2
97 27		1	9/3/29	10:30/	2	a								4
0È	BP-WC3-Pile#1	S	9/3/99	11:10										ス
09	BP-WC-3-116+2	2	9/3/99	11:20	1	Ì								2
10	B1-WL-2-P1/241	S.	9/3/99	11:30	ĺ	1								2
						`								
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														Cen
	Sample Matrix: L = Liquid;	; S =	Solid; A =	= Air							T	otal No. of B Cont	ottles/ ainers	1620
	Relinquished by:	nde		Organiza Organiza	ation: <u>7</u> 0 ation: _\$1	ROBITS T-CT	Gerant		~ · · · · · · · · · · · · · · · · · · ·		Time 12		Seal In Yes No	
	Relinquished by:Received by:			Organiza Organiza					ate/_ ate/_		Time Time		Seal In Yes No	3
	Special Instructions/Remarks: _	^			-4	· /		. 1		ſ	la + 1a			
	*************************************	0	24 44	F	71	-/B	ter	Mary	Em	ids ?				
	Delivery Method:	In Perso	on V	Commo	n Carri	er Fret	Ep	, , , , , , , , , , , , , , , , , , ,	□ Lab Co	urier	□Oth	er		

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Your Internal Billing Reference AY CLO 265, CCC 1	6 Special Handling	<u> </u>
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8347 7686 8263	10 ur liability is limited to \$100 unless you declare a higher value. See back for details. 8 Release Signature Sign to advance delivery without obtaining signature.	
	By signing you authorize us to definer this shipment without obtaining a signature and agree to indomn's and hold us harmless from any resulting claims. Questions? Call 1:800°Go 'FedEx' (800 483-3339) Visit our Web site at www.fedex.com Bey Due 11/94-Pur 1/9416-6409-36 figu.er/BRIED NU S A: 08/86" 7699	<u> </u>

Severn Trent - Connecticut Internal Chain-of-Custody

Client: 6tm	STL Job #: 7099 - 21984
Custody Scal: present / absent	Date Received: 9/4/99
	Sample #s: <u>Cl-10</u>
Airbill# [C. Field C-()-C: present / absent	Locations: 35C, 340, 82, 96

Laboratory Sample #	Relinquished by	Accepted by	Date	Time	Reason	Relinquished by	Accepted by	Date	Time
1-6,8-10	K	4m	9/7	9:05	Pest) AP -		9/8	00:46
1-10	NC	M. Crow	9/1/49	10:30	VoA	AP 0	M	97	2310
7	Re	No.	9/8/99	1600	Past	ased		,	
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		<u>'</u>							

Fraction: BNA / Pesticide-PCB / Herbicide / O/P Pesticide / DRO / Other (Circle one)

CLIENT: 69M

	SAMP	LE IN (Extra	ctions)		SAMPLE IN (Extractions)					
Sample(s)	Date	Time	Sign.	Location	Sample(s)	Date	Time	Sign.	Location	
1-4,8,9,10 4M5/M50	9/1/19	615 pm	SP	106.C. Analysis						
1.7	99	73.55	ΔP	50						
	V		Ī							

	S	AMPLE OU	T			SAMP	LE IN	
Sample(s)	Date	Time	Code	Sign.	Date	Time	Location	Sign.
1-489,10	19/1/19	615pm	AN	Mer	9/1/99	6 45pm	50	Khin
YMS/MIR	' છોં!	9, W	an	Bh	9/10	9:15	570	3/2
2,9,10	9/1/99	800 km	AN	Uller	9/8/99	g 15pm	50	Kler
		`						-

Codes:

SC = Screening

AN = Analysis

Verified By:	1 91	

Date: 9/8/95

Lab Form: SMF01201.CT

IEA / CT LABORATORY CHRONICLE

SAMPLE PREPARATION AND ANALYSIS SUMMARY VOLATILE (VOA) ANALYSIS

JOB #: 7099-2198A DATE DATE DATE DATE SAMPLE ID MATRIX COLLECTED RECEIVED EXTRACTED ANALYZED 09/04/99 EW-3-04 SOIL 09/03/99 09/03/99 09/04/99 EW-3-05 SOIL EW-2-01 SOIL 09/03/99 09/04/99 EB-2-01 SOIL 09/03/99 09/04/99 09/04/99 RINSE BLANK WATER 09/03/99 BP-WC-3PILE#1 SOIL 09/03/99 09/04/99 BP-WC-3PILE#2 SOIL 09/03/99 09/04/99 BP-WC-2PILE#1 SOIL 09/03/99 09/04/99

Section Supervisor (signature)	QC Supervisor	(signature)	
Review & Approval (printed name) Laurence Hite	Review & Approval	(printed name)	
(Date) 09/15/99		(Date)	//

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

SAMPLE PREPARATION AND ANALYSIS SUMMARY PESTICIDES/PCB ANALYSES

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Laboratory Sample ID	Matrix	Date Collected	Date Rec'd at Lab	Date Extracted	Date Analyzed
992198A-01	soir	09/03/99	09/04/99	9/7/99	9/7/99
992198A-02	SOIL	09/03/99	09/04/99		
992198A-03	SOIL	09/03/99	09/04/99		
992198A-04	SOIL	09/03/99	09/04/99	J J	1
992198A-07	WATER	09/03/99	09/04/99	9/8/49	9/10/99
992198A-08	SOIL	09/03/99	09/04/99	917199	917/99
992198A-09	SOIL	09/03/99	09/04/99		9/8/99
992198A-10	SOIL	09/03/99	09/04/99		
					T-F-1-State Control of the Control o
					-

Lab	Name:	STL/CT			Contr	act:			_	
Lab	Code:	IEACT	Case No.:	2198A	SAS 1	No.:		SDG	No.:	A2198
Matr	ix Spi	ike - EPA	Sample No.:	EB-2-	01	Ι	Level:(]	.ow/n	ned) I	LOW

	SPIKE	SAMPLE	SPIKE	SPIKE	QC.
	ADDED	CONCENTRATION		8	LIMITS
COMPOUND			(ug/Kg)	REC #	REC.
COMPOUND	(ug/Kg)	(ug/kg/	(ug/kg/	REC #	REC.
Chloromethane	54	0	56	104	32-191
Bromomethane	54	0	46	85	34-190
Vinyl Chloride	54	0	58	107	23-192
Chloroethane	54	0	55	102	49-222
Methylene Chloride	54	2	49	87	64-158
Acetone	54	6	12	11	0-398
Carbon Disulfide	54	0	57	106	55-133
Vinyl Acetate	54	0	73	135	0-163
1,1-Dichloroethene	54	0	53	98	79-152
1,1-Dichloroethane	54	0	58	107	83~134
1,2-Dichloroethene (total)	110	0	100	91	82-128
Chloroform	54	0	55	102	65-126
1,2-Dichloroethane	54	0	48	89	50-132
2-Butanone	54	0	18	33	0-393
1,1,1-Trichloroethane	54	0	52	96	44-139
Carbon Tetrachloride	54	0	32	59	34-137
Bromodichloromethane	54	0	46	85	59-130
1,2-Dichloropropane	54	0	52	96	84-161
cis-1,3-Dichloropropene	54	0	46	85	72-116
Trichloroethene	54	1	52	94	72-129
Dibromochloromethane	54	0	45	83	57-129
1,1,2-Trichloroethane	54	0	42	78	72-136
Benzene	54	0	57	106	83-130
trans-1,3-Dichloropropene	54	0	42	78	59-117
Bromoform	54	Ō	41	76	36-144
4-Methyl-2-Pentanone	54	0	31	57	39-214
2-Hexanone	54	0	27	50%	
Tetrachloroethene	54	4	51	87	41-143
Toluene	54	0	53	98	77-126
1,1,2,2-Tetrachloroethane	54	0	38	70	58-167

Column to be used to flag recovery with an asterisk

*	Values	outside	οf	QC	limits.

COMMEN	ITS:					<u> </u>			 	
phike	Recov	ery:		out	OL	08	outside	limits		
Contileo	Dagar	C 2022 - 150	l .	~ · · +	~ ~	C O	~~+ ~ i ~ ~	3 11		

75 FORM III VOA-2 09 09 99

8260

Lab	Name:	STL/CT		(Contract			
Lab	Code:	IEACT	Case No.:	2198A	SAS No.		SDG No.:	A2198
Matr	rix Sp:	ike - EPA	A Sample No.:	EB-2-01	L	Level: (low/med) I	LOW

	SPIKE ADDED	SAMPLE CONCENTRATION	SPIKE CONCENTRATION	SPIKE %	QC. LIMITS
COMPOUND	(ug/Kg)	(ug/Kg)	(ug/Kg)	REC #	REC.
Chlorobenzene	54	0	52	96	82-126
Ethylbenzene	54	0	56	104	79-131
Styrene	54	0	56	104	81-121
Xylene (total)	160	0	1.70	106	81-126
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Column to be used to flag recovery with an asterisk

* Values outside of QC limits.

Spike Recovery: 2 out of 68 outside limits

COMMENTS:

09/09/99

FORM III VOA-2

8260

Lab	Name:	STL/CT			Conti	ract:			
Lab	Code:	IEACT	Case No.:	2198A	SAS	No.:		SDG No.	A2198
Mati	ix Spi	ke - EPA	Sample No.	: EB-2-	01	1	Level:(1	Low/med)	LOW

	SPIKE	MSD	MSD			
	ADDED	CONCENTRATION	ું ૦	ે	QC L	IMITS
COMPOUND	(ug/Kg)		REC #	RPD #	ŔPD	REC.
	, 3, 3,	(1.5), 1.9,		,,		
Chloromethane	54	50	92	12	20	32-191
Bromomethane	54	48	89	5	20	34-190
Vinyl Chloride	54	52	96	11	20	23-192
Chloroethane	54	41	76	29*	20	49-222
Methylene Chloride	54	46	81	7	20	64-158
Acetone	54	30	44	120*	20	0-398
Carbon Disulfide	54	52	96	10	20	55-133
Vinyl Acetate	54	72	133	2	20	0-163
1,1-Dichloroethene	54	49	91	7	20	79-152
1,1-Dichloroethane	54	52	96	11	20	83-134
1,2-Dichloroethene (total)	110	95	86	6	20	82-128
Chloroform	54	48	89	14	20	65-126
1,2-Dichloroethane	54	49	91	2	20	50-132
2-Butanone	54	43	80	83*	20	0-393
1,1,1-Trichloroethane	54	48	89	8	20	44-139
Carbon Tetrachloride	54	49	91	43*	20	34-137
Bromodichloromethane	54	48	89	5	20	59-130
1,2-Dichloropropane	54	54	100	4	20	84-161
cis-1,3-Dichloropropene	54	49	91	7	20	72-116
Trichloroethene	54	51	92	2	20	72-129
Dibromochloromethane	54	51	94	12	20	57-129
1,1,2-Trichloroethane	54	49	91	15	20	72-136
Benzene	54	54	100	6	20	83-130
trans-1,3-Dichloropropene	54	47	87	11	20	59-117
Bromoform	54	57	106	33*	20	36-144
4-Methyl-2-Pentanone	54	68	126	75*	20	39-214
2-Hexanone	54	73	135	92*	20	83-256
Tetrachloroethene	54	59	102	16	20	41-143
Toluene	54	54	100	2	20	77-126
1,1,2,2-Tetrachloroethane	54	62	115	49*	20	58-167

Column to be used to flag recovery with an asterisk

* Values outside of QC limits.

RPD:8 Spike Recor COMMENTS:	out o	of 34 &	out out of	limits outside		

Lab	Name:	STL/C	CT				Cont	ract:			_		
Lab	Code:	IEACT	ŗ	Case	No.:	2198A	SAS	No.:		SDG	No.:	A2198	3
Matı	rix Spi	ike -	EPA	Sample	No.	: <u>EB-2-</u>	-01		Level: (low/n	ned)	LOW	

			1.00			
COMPOUND	SPIKE ADDED (ug/Kg)	MSD CONCENTRATION (ug/Kg)	MSD % REC #	% RPD #	QC L: RPD	IMITS REC.
Chlorobenzene	54	51	94	2	20	82-126
Ethylbenzene	54	53	98	6	20	79~131
Styrene	54	56	104	0	20	81-121
Xylene (total)	160	160	100	6	20	81-126
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Column to be used to flag recovery with an asterisk

* Values outside of QC limits.

RPD:8	out	of <u>34</u>		outs	side	limits		
Spike Re	covery:	8	out	οf	68	outside	limits	
COMMENTS	:		_					
	<u></u>							

3-ASP VOLATILE MATRIX SPIKE BLANK RECOVERY SUMMARY

Lab Name: S	TL/CT		C	Contract:			
Lab Code: I	EACT	Case No.:	2198A	SAS No.:		SDG No.:	A2198
Matrix Spike	e - EPA S	ample No.:	EB-2-01		Level: (1	.ow/med)	LOW

					
	SPIKE		SPIKE	SPIKE	QC.
	ADDED	CONCENTRATION			LIMITS
COMPOUND	(ug/Kg)	(ug/Kg)	(ug/Kg)	REC #	REC.
Chloromethane	50	0	46	92	32-191
Bromomethane	50	l o	40	80	34-190
Vinyl Chloride	50	0	50	100	$\frac{34-190}{23-192}$
Chloroethane	50	0	43	86	49-222
Methylene Chloride	50	0	46	92	64-158
			21	26	0-398
Acetone	50	8			
Carbon Disulfide	50	0	52	104	55-133
Vinyl Acetate	50	0	25	50	0-163
1,1-Dichloroethene	50	0	46	92	79-152
1,1-Dichloroethane	50	0	51	102	83-134
1,2-Dichloroethene (total)	100	0	95	95	82-128
Chloroform	50	0	46	92	65-126
1,2-Dichloroethane	50	0	44	88	50-132
2-Butanone	50	2	36	68	0-393
1,1,1-Trichloroethane	50	0	45	90	44-139
Carbon Tetrachloride	50	0	49	98	34-137
Bromodichloromethane	50	0	46	92	59-130
1,2-Dichloropropane	50	0	51	102	84-161
cis-1,3-Dichloropropene	50	0	48	96	72-116
Trichloroethene	50	0	49	98	72-129
Dibromochloromethane	50	0	47	94	57-129
1,1,2-Trichloroethane	50	0	45	90	72-136
Benzene	50	0	45	90	83-130
trans-1,3-Dichloropropene	50	Ö	47	94	59-117
Bromoform	50	0	50	100	36-144
4-Methyl-2-Pentanone	50	.8	46	90	39-214
2-Hexanone	50	0	45	90	83-256
Tetrachloroethene	50	Ŏ	46	92	41-143
Toluene	50	Ö	52	104	77-126
1,1,2,2-Tetrachloroethane	50	.2	49	98	58-167
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Column to be used to flag recovery with an asterisk

									_		
C	OMMEI	TS:									
S	pike	Rec	covery:0		_ out	of	34	 outside	limits		
*	Valı	ıes	outside	of	QC lir	nits	₿.				

3-ASP VOLATILE MATRIX SPIKE BLANK RECOVERY SUMMARY

Lab	Name:	STL/CT		Cont	ract:			
Lab	Code:	IEACT	Case No.:	2198A SAS	No.:	S:	DG No.:	A2198
Mati	rix Spi	ke - EPA	Sample No.:	: EB-2-01		Level: (lo	w/med)	LOW

	SPIKE		SPIKE	SPIKE	QC.
	ADDED	CONCENTRATION	CONCENTRATION	ે જ	LIMITS
COMPOUND	(ug/Kg)	(ug/Kg)	(ug/Kg)	REC #	REC.
Cl- l ol-	F.0		F 3	102	00 100
Chlorobenzene	50	0	51		82-126
Ethylbenzene	50	0	54	108	79-131
Styrene	50	0	54	108	81-121
Xylene (total)	150	0	160	107	81-126
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#	Column to be used to flag recovery with an asterisk
*	Values outside of QC limits.
Sp	oike Recovery: 0 out of 34 outside limits
CC	DMMENTS:

3F SOIL PCB MATRIX SPIKE/MATRIX SPIKE DUPLICATE RECOVERY

Lab Name:	STL-CT C	Contract:					
Lab Code:	<u>IEACT</u> Ca	ase No.: <u>2198A</u>	SDG No.	: <u>A2198</u>			
Matrix Spi	ke - Sampl	le No.: <u>EB-2-0</u>	1	C	onc.	Units :	UG/KG
						1	

1	SPIKE ADDED	SAMPLE CONC		MS %REC #	MSD CONC	MSD %REC #	%RPD #	QC RPD	LIMITS REC.
Aroclor-1260	80	0.0	79.	99	70.	88	12	50	36-151

Column to be used to flag recovery and RPD values with an asterisk
* Values outside of QC limits
RPD: <u>0</u> out of <u>1</u> outside limits Spike Recovery: <u>0</u> out of <u>2</u> outside limits
COMMENTS:

3G WATER PESTICIDE QC CHECK RECOVERY

Lab Name: STL-CT Contract:

Lab Code: IEACT Case No.: 2198A SDG No.: A2198

Sample No.: PBLK80

COMPOUND	SPIKE ADDED (UG/L)	SPIKE CONCENTRATION (UG/L)	* REC	QC. LIMITS # REC.
Aroclor-1242	5.0	3.1	62	21-121
Aroclor-1260	5.0	3.7	74	32-119

Column to be used to flag recovery values with an asterisk

COMMENTS:		

FORM III PEST-3 GC-8082:rev 1.0

3H SOIL PESTICIDE QC CHECK RECOVERY

Lab Name: <u>STL-CT</u> Contract: ____

Lab Code: <u>IEACT</u> Case No.: <u>2198A</u> SDG No.: <u>A2198</u>

Sample No.: PBLK77

1	1	1
140	82	36-134
150	88	56-121
-	140 150	140 82 150 88

Column to be used to flag recovery values with an asterisk

COMMENTS:	 	 	

FORM III PEST-4 GC-8082:rev 1.0



September 08, 1999

Severn Trent Laboratories 200 Monroe Turnpike Monroe, Connecticut 06468

Tel: (203) 261-4458 Fax: (203) 261-5346 www.stl-inc.com

Mr. Marc Sanford ARCADIS/GERAGHTY & MILLER 215 Washington Ave. Ext. Albany, NY 12205

Dear Mr. Sanford:

Please find enclosed the analytical results of 3 sample(s) received at our laboratory on September 3, 1999. This report contains sections addressing the following information at a minimum:

sample summary

definition of data qualifiers and terminology

analytical methodology

analytical results

state certifications . chain-of-custody

STL Report #7099-2186A	Purchase Order #AY000265.0003.00001
Project ID: UTICA, LKM	

Copies of this analytical report and supporting data are maintained in our files for a minimum of five years unless special arrangements have been made. Unless specifically indicated, all analytical testing was performed at this laboratory location and no portion of the testing was subcontracted.

We appreciate your selection of our services and welcome any questions or suggestions you may have relative to this report. Please contact your customer service representative at (203) 261-4458 for any additional information. Thank you for utilizing our services; we hope you will consider us for your future analytical needs.

I have reviewed and approved the enclosed data for final release.

Very truly yours,

Jeffrey C. Curran Laboratory Manager

Mauslat Cull for

JCC

Other Laboratory Locations:

- Mobile, ALAmherst, NY
- · Miramar, FL
- · Pensacola, fL · Tallahassee, FL
- · Tampa, FL
- Savannah, GA University Park, IL
- Billerica, MA
- · Westfield, MA
- · Sparks, MD
- Edison, NJ
- · Whippany, NJ · Newburgh, NY
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- · Schenectady, NY
- Cleveland, OH

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Severe Trem Services Inc.

7099-2186A ARCADIS/GERAGHTY & MILLER

Case Narrative

Polychlorinated Biphenyls (PCB's) - PCB samples were extracted and analyzed by GC/ECD using guidance provided in Methods 3550B/8082. The instrumentation used was a Hewlett-Packard Gas Chromatograph equipped with an Electron Capture Detector (Ni⁶³).

All samples were extracted, concentrated and analyzed without any apparent problems.

All samples required acid and sulfur cleanup prior to analysis.

Manual integrations were performed if required, and any affected peaks were designated with an "FF" on the area report in the column titled "Code". Manual integrations were initialed by the analyst that performed the integration.

Volatile Organics - Volatile organics were determined by purge and trap GC/MS using guidance provided in Method 5030B/8260B. The instrumentation used was a Tekmar Model 2000/2016 Concentrator interfaced with a Hewlett-Packard Model 5970A GC/MS/DS.

Sample EW-3-03 was analyzed at a 1:2 dilution due to high target compound concentrations.

No problems were encountered.

TABLE VO-1.0 7099-2186A ARCADIS/GERAGHTY & MILLER TCL VOLATILE ORGANICS

All values are ug/Kg dry weight basis.

Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	Method Blank VBLKKL VBLKKL 1.00	EW-3-02 992186A-01 VBLKKL 1.15	EW-3-01 992186A-02 VBLKKL 1.15	Quant. Limits with no Dilution
Chloromethane Bromomethane Vinyl Chloride Chloroethane Methylene Chloride Acetone Carbon Disulfide Vinyl Acetate 1,1-Dichloroethene 1,1-Dichloroethene cis-1,2-Dichloroethene trans-1,2-Dichloroethene Chloroform 1,2-Dichloroethane 2-Butanone 1,1,1-Trichloroethane Carbon Tetrachloride Bromodichloromethane 1,2-Dichloropropane cis-1,3-Dichloropropene Trichloroethene Dibromochloromethane 1,1,2-Trichloroethane Benzene trans-1,3-Dichloropropene Bromoform 4-Methyl-2-Pentanone 2-Hexanone Tetrachloroethene Toluene 1,1,2,2-Tetrachloroethane Chlorobenzene Ethylbenzene Styrene Xylene (total)	ט ט ט ט ט ט ט ט ט ט ט ט ט ט ט ט ט ט ט	U U U U U U U U U U U U U U U U U U U	00001098 1000000000000000000000000000000	10000000000000000000000000000000000000
Date Received Date Extracted Date Analyzed	N/A 09/03/99	09/03/99 N/A 09/03/99	09/03/99 N/A 09/03/99	

TABLE VO-1.1 7099-2186A ARCADIS/GERAGHTY & MILLER TCL VOLATILE ORGANICS

All values are ug/Kg dry weight basis.

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Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	EW-3-03 992186A-03 VBLKKL 2.32			Quant. Limits with no Dilution
Chloromethane Bromomethane Vinyl Chloride Chloroethane Methylene Chloride Acetone Carbon Disulfide Vinyl Acetate 1,1-Dichloroethene 1,1-Dichloroethene cis-1,2-Dichloroethene trans-1,2-Dichloroethene trans-1,2-Dichloroethene Chloroform 1,2-Dichloroethane 2-Butanone 1,1,1-Trichloroethane Carbon Tetrachloride Bromodichloromethane 1,2-Dichloropropane cis-1,3-Dichloropropene Trichloroethene Dibromochloromethane 1,1,2-Trichloroethane Benzene trans-1,3-Dichloropropene Bromoform 4-Methyl-2-Pentanone 2-Hexanone Tetrachloroethene Toluene 1,1,2,2-Tetrachloroethane Chlorobenzene Ethylbenzene Styrene Xylene (total)	0 0 2J 15JB 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			10 10 5.0 10 5.0 10 5.0
Date Received Date Extracted Date Analyzed	09/03/99 N/A 09/03/99			

TABLE GC-1.0 7099-2186A ARCADIS/GERAGHTY & MILLER 8082 POLYCHLORINATED BIPHENYLS (PCB's)

All values are ug/Kg dry weight basis.

Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	Method Blank 090399-B08 PBLK73 1.00	PBLK73 QC 090399-B08QC PBLK73 1.00	EW-3-02 992186A-01 PBLK73 1.14	Quant. Limits with no Dilution
Aroclor-1016 Aroclor-1221 Aroclor-1232 Aroclor-1242 Aroclor-1248 Aroclor-1254 Aroclor-1260	ָּט ער איני ער איני	U 140X U		33. 33. 33.
Date Received Date Extracted Date Analyzed	09/03/99 09/04/99	09/03/99 09/04/99	09/03/99 09/03/99 09/04/99	

TABLE GC-1.1 7099-2186A ARCADIS/GERAGHTY & MILLER 8082 POLYCHLORINATED BIPHENYLS (PCB's)

All values are ug/Kg dry weight basis.

Client Sample I.D. Lab Sample I.D. Method Blank I.D. Quant. Factor	EW-3-01 992186A-02 PBLK73 1.12	EW-3-03 992186A-03 PBLK73 1.18	Quant. Limits with no Dilution
Aroclor-1016 Aroclor-1221 Aroclor-1232 Aroclor-1242 Aroclor-1248 Aroclor-1254 Aroclor-1260	U Alia Lunaisa U		33. 33. 33.
Date Received Date Extracted Date Analyzed	09/03/99 09/03/99 09/04/99	09/03/99 09/03/99 09/04/99	

ORGANICS APPENDIX

- U Indicates that the compound was analyzed for but not detected.
- J Indicates that the compound was analyzed for and determined to be present in the sample. The mass spectrum of the compound meets the identification criteria of the method. The concentration listed is an estimated value, which is less than the specified minimum detection limit but is greater than zero.
- B This flag is used when the analyte is found in the blanks as well as the sample. It indicates possible sample contamination and warns the data user to use caution when applying the results of this analyte.
- N Indicates that the compound was analyzed for but not requested as an analyte. Value will not be listed on tabular result sheet.
- S Estimated due to surrogate outliers.
- X Matrix spike compound.
- (1) Cannot be separated.
- (2) Decomposes to azobenzene. Heasured and calibrated as azobenzene.
- A This flag indicates that a TIC is a suspected aldol condensation product.
 - E Indicates that it exceeds calibration curve range.
 - D This flag identifies all compounds identified in an analysis at a secondary dilution factor.
 - C Confirmed by GC/MS.
- T Compound present in TCLP brank
- P This flag is used for a pesticide/aroclor target analyte when there is a greater than 25 percent difference for detected concentrations between the two GC columns (see Form X).

STATE CERTIFICATIONS

In some instances it may be necessary for environmental data to be reported to a regulatory authority with reference to a certified laboratory. For your convenience, the laboratory identification numbers for Severn Trent Laboratories-Connecticut are provided in the following table. Many states certify laboratories for specific parameters or tests within a category (i.e. method 325.2 for wastewater). The information in the following table indicates the lab is certified in a general category of testing such as drinking water or wastewater analysis. The laboratory should be contacted directly if parameter-specific certification information is required.

Severn Trent-Connecticut Certification Summary (as of March 1999)

State	Responsible Agency	Certification	Lab Number
Connecticut	Department of Health Services	Drinking Water, Wastewater	PH _ 497
Kansas	Department of Health and Environment	Drinking Water, Wastewater/Solid, Hazardous Waste	E-10210
Maine -	Department of Human Services	Wastewater	CT023
Massachusetts	Department of Environmental Protection	Potable/Non-Potable Water	CT023
New Hampshire	Department of Environmental Services	Drinking Water, Wastewater	2528
New Jersey	Department of Environmental Protection	Drinking Water, Wastewater	46410
New York	Department of Health	CLP, Drinking Water, Wastewater, Solid/ Hazardous Waste	10602
North Carolina	Division of Environmental Management	Wastewater Hazardous Waste	388
Oklahoma	Department of Environmental Quality	General Water Quality/ Sludge Testing	9614
Rhode Island	Department of Health	ChemistryNon- Potable Water and Wastewater	A43
Washington	Department of Ecology	Wastewater/ Hazardous Waste	C231
Wisconsin	Department of Natural Resources	Wasiewater/ Hazarous Waste	998355710

7099-2186A ARCADIS/GERAGHTY & MILLER SAMPLE SUMMARY

CLIENT ID	LAB ID	MATRIX	DATE COLLECTED	DATE RECEIVED
EW-3-02	992186A-01	SOIL	09/02/99	09/03/99
EW-3-01	992186A-02	SOIL	09/02/99	09/03/99
EW-3-03	992186A-03	SOIL	09/02/99	09/03/99

ARCADIS GERAGHTY&MILLER							Cŀ	AIN-O	F-CUST(DDY RE	CORD	Page	o	>f
Project Number/Name AYO Project Location Life Control Laboratory 574	00245-0	003,000	0)/	LMC			·····	ANALYSIS	/ METHO	O / SIZE		7		
Project Location 1/20	a, N)	<u> </u>					/_		7		/	7		
					,	/ ,	(P) /	/ ,	/ ,	/ ,	/ /		Λ.	001
Project Manager	rc S.	Anti-	rd		y	\sim	$t_0 \delta_0$					7099-	- L(06/
Sampler(s)/Affiliation	C/A	96m			$\sqrt{0}$	16/10/1	46)	1/						
Sample ID/Location	Matrix	Date/F Sampl		Time Lab ID	1	0/10					Re	marks		Total
EW-3-02	5	9/2/	79	14:20	1	1	U(2
EW-3-01	2	9/2/		14:30	l	;	OZ							2
Ew-3-03	5	9/2	-	3:30		1	03							2
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Sample Matrix: L = Liquid	d; S =	Solid;	Α =	Air	.							al No. of Bot Contai	iners L	6
Relinquished by:	100	364		Organiz Organiz	ation: <u> </u>	STL-C	tradity 41	<i>4(</i> 14- D	ate <u>9</u> /	3,99	Time <u>6次</u> Time <u>10%</u>	3 0 (Seal In es) No	ntact?
Relinquished by:				Organiz	ation:				ate/_	7	Time		Seal In	tact?
Received by:		<u> </u>		Organiz	ation:			D	ate/_			\Y	es No	A/N c
Special Instructions/Remarks:	Z-	20	1	10	7	11	ACI	200	WA.	F. K. M	IDEC	1/X	<u> </u>	<u> </u>
		/-7	-/ ~	^	11	71	17) /		10((,		C. S. F. Cond	1		
Delivery Method:	In Porc	on	X	Comm	on Carri	or A	el V	/ 	□ Lab Co		Othar			

With a state of the state of th	~~~
FOREX (1.1.2) 4 170/1/ Tracking 814776868283	60.00 <u>1</u>
From	4a Express Package Service Packages up to 150 lbs - Delivery commitment may be later in some areas
Date Carte	FedEx Priority Overnight Next business morning FedEx Standard Overnight Next business afarmoon FedEx First Overnight General and business exerting General Control of the Control of the Control of the Control of General Control of General Control of General Control of Control
Senders JOHT BUSTRE Phone 518 152-7826	FedEx 2Day* Second turiness day Their business day FedEx Letter Rate not avail, ble
A-Branze 11's	Second business day Their business day Feetx Letter Rate not available Maximum charge. One pound nate 4b Express Freight Service Packages over 150 lbs.
Company	Desvery Contribution in some areas.
Address 215 Wildright Ave Est.	FedEx 1Day Freight FedEx 3Day Freight FedEx 3Day Freight FedEx 3Day Freight * Call for Confirmation:
Dept/Roor/Suite/Room	5 Packaging Declared value Gras \$500
City State ZIP 1 20	FodEx Letter* FedEx Pak* Other Pkg. Includes FodEx Box FodEx Tube, and outstomer Pkg.
four Internal Billing Reference ATCCOSS. CXXXI	6 Special Handling
Recipient's County Reterring Phone 203 261-4458	Saturday Delivery Available for Foods: Priority Overright and Fodds: 2DP to select ZIP codes Available for Fodds: Priority Overright to select ZIP codes North Staturday North Staturday Available for Fodds: Priority Overright to select ZIP codes North Staturday Available for Fodds: Priority Fodds: First Overright to Fodds:
and the state of t	Doos this shipment contain dangurous goods? One box must be checked.
Company CONT - 1 CONT	As per attached Shipper's Declaration Parcerous Goods cannot be shaped in Fortiz opeckagen. Sangar Superior
Address 200 Monrae Tumpike	7 Payment Bill to: Enter FodEx Acct. No. or Credit Card No. below. Obtain Recup.
Ve cannot deliver to P.O. boxes or PD-21P codes. Dept/Floor/Soute/Room	Sender Recipion Third Party Credit Card Cast/Check
70 fR/LO at Facility location, print finder address have	
in Morroe State T ZIP 06468	Total Packages Total Weight Total Declared Value! Total Charges
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*	7 / Tour liability is familied to \$100 unless you'life'the's higher value. See back for details. 8 Release Signature Sign total benire debroy without obtaining signature.
	(XB + 9/3/a,
	Let's riginity frou auditorite us to defice this shipment without obtaining a signature and agree to indemnity and hold us harmless from any resulting claims. Questions? Call 1:800-Go-FedEx. (800-463-3339)
	Visit our Web site at www.fedex.com Rev Out 11:78-Per (1588)5-(01994-98 Fe(s)-PRINTED IN U.S.A. GBFE 7/99

Severn Trent - Connecticut Internal Chain-of-Custody

Client: 64m	STL Job#: 7099 -21861
Custody Scal: present / absent intact / not intact	Date Received: 9/3/99
	Sample #s: 0 (-to3
Airbill# FE Field C-()-C: present/absent	Locations: B334L

Laboratory Sample #	Relinquished by	Accepted by	Date	Time	Reason	Relinquished by	Accepted by	Date	Time
1-3	~	EM	9.3.9	14:30	PEB EXTRACT	Ell	1	9.3.9	18:11
1-3	~	MC_	9/3	11:30	Va	12/	<i></i>	9/3	2300
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BNA / Pesticide-PCB) Herbicide / O/P Pesticide / DRO / Other Fraction: (Circle one)_

CLIENT: _

	SAMP	LE IN (Extr	actions)			SAMP	LE IN (Extra	actions)	
Sample(s)	Date	Time	Sign.	Location	Sample(s)	Date	Time	Sign.	Location
1-3	9/3/99	quèn T	o be loa	did	immedic	æg			
		7 ''				1			

	S	AMPLE OU	T			SAMF	PLE IN		
Sample(s)	Date	Time	Code	Sign.	Date	Time	Location	Sign.	
1-3	9/3/99	8:00pm	AN	KNE BO	13/99 Way	815m	50	Marfel	Buron
		i			/ /				
		<u> </u>							
				<i>\\</i>		<u> </u>			
		<u> </u>]					
]

Codes:

SC = Screening

AN = Analysis

Verified By:

Lab Form: SMF01201.CT

IEA / CT LABORATORY CHRONICLE

SAMPLE PREPARATION AND ANALYSIS SUMMARY VOLATILE (VOA) ANALYSIS

JOB #: 7099-2186A DATE DATE DATE DATE ANALYZED SAMPLE ID MATRIX COLLECTED RECEIVED EXTRACTED WATER 09/02/99 09/03/99 EW-3-02 WATER 09/02/99 09/03/99 EW-3-01 EW-3-03 WATER 09/02/99 09/03/99 Section Supervisor (signature) QC Supervisor (signature) Laurence Hitech Review & Approval (printed name) Review & Approval (printed name)

(Date) ___/__/__

(Date) 09/08 99

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

SAMPLE PREPARATION AND ANALYSIS SUMMARY PESTICIDES/PCB ANALYSES

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,			
Laboratory Sample ID	Matrix	Date Collected	Date Rec'd at Lab	Date Extracted	Date Analyzed
992186A-01	SOIL	09/02/99	09/03/99	9/3/99	9/4/99
992186A-02	SOIL	09/02/99	09/03/99		
992186A-03	SOIL	09/02/99	09/03/99	ų.	<u> </u>
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3-ASP SOIL VOLATILE SPIKE/SPIKE DUPLICATE RECOVERY SUMMARY

Lab 1	Name:	STL/CT	<u>~</u>	2182AC	Contr	act:			O2 19	270
Lab (Code:	IEACT	Case No.:	2040A	SAS :	No.:		SDG No.	: A2040	34
Matr:	ix Spi	ke - EPA	Sample No.:	B(4-6)		I	Level:(]	Low/med)	LOW	
										•

09/07/99

	SPIKE	SAMPLE	SPIKE	SPIKE	QC.
		CONCENTRATION		ક	LIMITS
COMPOUND	(ug/Kg)	(ug/Kg)	(ug/Kg)	REC #	REC.
Chloromethane	290	0	240	83	32-191
Bromomethane	290	0	340	117	34-190
Vinyl Chloride	290	0	260	90	23-192
Chloroethane	290	0	310	107	49-222
Methylene Chloride	290	20	270	86	64-158
Acetone	290	69	140	24	0-398
Carbon Disulfide	290	0	270	93	55-133
Vinyl Acetate	290	0	480	166	0-163
1,1-Dichloroethene	290	0	270	93	79-152
1,1-Dichloroethane	290	O	300	103	83-134
1,2-Dichloroethene (total)	570	0	570	100	82-128
Chloroform	290	0	290	100	65-126
1,2-Dichloroethane	290	0	280	96	50-132
2-Butanone	290	14	120	36	0-393
1,1,1-Trichloroethane	290	0	280	96	44-139
Carbon Tetrachloride	290	0	170	59	34-137
Bromodichloromethane	290	Ó	270	93	59-130
1,2-Dichloropropane	290	0	250	86	84-161
cis-1,3-Dichloropropene	290	0	270	93	72-116
Trichloroethene	290	0	290	100	72-129
Dibromochloromethane	290	0	250	86	57-129
1,1,2-Trichloroethane	290	0	240	83	72-136
Benzene	290	0	240	83	83-130
trans-1,3-Dichloropropene	290	0	270	93	59-117
Bromoform	290	0	210	72	36-144
4-Methyl-2-Pentanone	290	0	140	4.8	39-214
2-Hexanone	290	0	130	45%	83-256
Tetrachloroethene	290	740	500	0 A x	41-143
Toluene	290	1	270	93	77-126
1,1,2,2-Tetrachloroethane	290	Ō	170	59	58-167

Column to be used to flag recovery with an asterisk

* Values outside of QC limi	108	٠.
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Spike	Recovery: 25	out o	f <u>68</u>	outside	limits	
COMMEN	TS:					

3-ASD

SOIL VOLATILE SE		IKE DUPLICATE I	RECOVERY SUMMAI	RY	
Lab Name: STL/CT Lab Code: IEACT					36
			PS 09	107/59	;
COMPOUND	SPIKE ADDED (ug/Kg)	CONCENTRATION	SPIKE CONCENTRATION (ug/Kg)	SPIKE % REC #	QC. LIMITS REC.
Chlorobenzene Ethylbenzene Styrene Xylene (total)	290 290 290 860	0	280 270 280 820	96 93 96 95	82-126 79-131 81-121 81-126
					-
					-

Column to be used to flag recovery with an asterisk * Values outside of QC limits. Spike Recovery: out of 68 outside limits COMMENTS:

3-ASP SOIL VOLATILE SPIKE/SPIKE DUPLICATE RECOVERY SUMMARY

Lab	Name:	STL/	CT		,		Conti				_	A2186	_
Lab	Code:	IEAC	Г	Case	No.:	2186A 2040A	SAS	No.:		SDG	No.:	A2040	_
Matr	cix Spi	ike -	EPA	Sample	No.:	B(4-6)			Level:	(low/n	ned)	LOW	

F8 0 199

II I	SPIKE	MSD	MSD			
	ADDED	CONCENTRATION	ૄ	%		IMITS
COMPOUND	(ug/Kg)	(ug/Kg)	REC #	RPD #	RPD	REC.
Chloromethane	290	290	100	18	20	32-191
Bromomethane	290	340	117	0	20	34-190
Vinyl Chloride	290	280	96	6	20	23-192
Chloroethane	290	340	117	9	20	49-222
Methylene Chloride	290	280	90	4	20	64-158
Acetone	290	180	38	45*	20	0-398
Carbon Disulfide	290	290	100	7	20	55-133
Vinyl Acetate	290	74	26	140*	20	0-163
1,1-Dichloroethene	290	290	100	7	20	79-152
1,1-Dichloroethane	290	310	107	4	20	83-134
1,2-Dichloroethene (total)	570	600	105	5	20	82-128
Chloroform	290	290	100	0	20	65-126
1,2-Dichloroethane	290	290	100	4	20	50-132
2-Butanone	290	130	4.0	10	20	0-393
1,1,1-Trichloroethane	290	260	90	6	20	44-139
Carbon Tetrachloride	290	300	1.03	54*	20	34-137
Bromodichloromethane	290	260	90	3	20	59-130
1,2-Dichloropropane	290	240	83	4	20	84-161
cis-1,3-Dichloropropene	290	250	86	8	20	72-116
Trichloroethene	290	280	96	4	20	72-129
Dibromochloromethane	290	250	86	0	20	57-129
1,1,2-Trichloroethane	290	240	83	0	20	72-136
Benzene '	290	230	79 %	5	20	83-130
trans-1,3-Dichloropropene	290	250	86	8	20	59-117
Bromoform	290	220	76	5	20	36-144
4-Methyl-2-Pentanone	290	160	55	14	20	39-214
2-Hexanone	290	150	52 g	14	20	83-256
Tetrachloroethene	290	540	04	0	20	41-143
Toluene	290	300	103	10	20	77-126
1,1,2,2-Tetrachloroethane	290	200	69	16	20	58-167

- # Column to be used to flag recovery with an asterisk
- * Values outside of QC limits.

RPD: 3 out of 34	outside limits	
Spike Recovery: 25	out of 68 outside	limits
COMMENTS:		

3-ASP SOIL VOLATILE SPIKE/SPIKE DUPLICATE RECOVERY SUMMARY

Lab Name:	STL/CT	Cont	ract:		0018%
Lab Code:	IEACT	Case No.: 2040A SAS	No.:	SDG	No.: A2040
Matrix Sp	ike - EPA	Sample No.: <u>B(4-6)</u>	I	Level:(low/m	ed) <u>LOW</u>

09/01/99

				٠ ١		
COMPOUND	SPIKE ADDED (ug/Kg)	MSD CONCENTRATION (ug/Kg)	MSD % REC #	% RPD #	QC LI RPD	IMITS REC.
Chlorobenzene Ethylbenzene Styrene Xylene (total)	290 290 290 860	280 280 280 280 840	96 96 96 98	0 3 0 3	20 20 20 20	82-126 79-131 81-121 81-126
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						-
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						-

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*	Values	outside	οĒ	QC	limits.
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RPD:3	out of 34	outside l:	imits			
Spike Recov	very:\0\	out of 68	outside	limits		
COMMENTS:	* →		_			
			·······		· · · · · · · · · · · · · · · · · · ·	
			*			_

3H SOIL PESTICIDE QC CHECK RECOVERY

Lab Name: <u>STL-CT</u> Contract: ____

Lab Code: <u>IEACT</u> Case No.: <u>2186A</u> SDG No.: <u>A2186</u>

Sample No.: PBLK73

COMPOUND	SPIKE ADDED (UG/KG)	SPIKE CONCENTRATION (UG/KG)	% REC	QC. LIMITS # REC.
Aroclor-1242	170	140	82	36-134
Aroclor-1260	170	150	88	56-121

 $\mbox{\#}$ Column to be used to flag recovery values with an asterisk

COMMENTS:		

FORM III PEST-4 GC-8082:rev 1.0

Appendix - B -

Former Burn Pit Waste Characteristic Laboratory Analytical Data



RECEIVED

SEP 13 1999

ARCADIS Geraghty & Miller

Severn Trent Laboratories 55 South Park Drive Colchester VT 05446

Tel: (802) 655-1203 Fax: (802) 655-1248

Analytical Report

Geraghty & Miller, Inc. 215 Washington Av Extension Albany, NY 12205

: 09/09/99 Date ETR Number: 75075 Project No.: 99000 No. Samples: Arrived : 14 : 09/04/99

Attention: Marc Sanford

Page 1

Standard analyses were performed in accordance with Methods for Analysis of Water and Wastes, EPA-600/4/79-020, Test Methods for Evaluating Solid Waste, SW-846, or Standard Methods for the Examination of Water and Wastewater.

All results are in mg/l unless otherwise noted.

Lab No./ Met	Sample Des	scription/ Parameter		Result
395484	BP-WC-3-D1:09/03/9 SAMPLE_PREP	9 @0945(Soil) Composite Before	TCLP	С
395485	BP-WC-7-D1:09/03/9 SAMPLE_PREP	9 @1005(Soil) Composite Before	TCLP	С
395486	BP-WC-8-D1:09/03/9 SAMPLE_PREP	9 @0950(Soil) Composite Before	TCLP	С
395487	BP-WC-9-D1:09/03/9 SAMPLE_PREP	9 @0955(Soil) Composite Before	TCLP	С
395488	BP-WC-10-D1:09/03/ SAMPLE_PREP	99 @1000(Soil) Composite Before	TCLP	C
395489	BP-WC-11-D1:09/03/ SAMPLE_PREP	99 @1010(Soil) Composite Before	TCLP	С
395490	BP-WC-D1:09/03/99 1311	(Soil) TCLP Volatile Ex	traction	С
395491	BP-WC-D1:09/03/99 8260_TCLP	(TCLPZHE) Analysis, TCLP,	VOA	С

Comments/Notes

C = Procedure/analysis completed

< Cont. Next Page >

a part of



Severn Trent Laboratories 55 South Park Drive Colchester VT 05446

Tel: (802) 655-1203 Fax: (802) 655-1248

Analytical Report

Geraghty & Miller, Inc. 215 Washington Av Extension Albany, NY 12205

: 09/09/99 Date ETR Number: 75075 Project No.: 99000 No. Samples: 14 : 09/04/99 Arrived

Attention : Marc Sanford

2 Page

Standard analyses were performed in accordance with Methods for Analysis of Water and Wastes, EPA-600/4/79-020, Test Methods for Evaluating Solid Waste, SW-846, or Standard Methods for the Examination of Water and Wastewater.

All results are in mg/l unless otherwise noted.

•	Sample Description/ Thod No. Parameter	Result
395492	BP-WC-3-D1(DUP):09/03/99 @0945(Soil) SAMP-HOLD Hold for Later Analysis	С
395493	BP-WC-7-D1(DUP):09/03/99 @1005(Soil) SAMP-HOLD Hold for Later Analysis	С
395494	BP-WC-8-D1(DUP):09/03/99 @0950(Soil) SAMP-HOLD Hold for Later Analysis	С
395495	BP-WC-9-D1(DUP):09/03/99 @0955(Soil) SAMP-HOLD Hold for Later Analysis	С
395496	BP-WC-10-D1(DUP):09/03/99 @1000(Soil) SAMP-HOLD Hold for Later Analysis	С
395497	BP-WC-11-D1(DUP):09/03/99 @1010(Soil) SAMP-HOLD Hold for Later Analysis	C

Comments/Notes

C = Procedure/analysis completed

< Last Page >

submitted By: Kristine Durablen



The following Qualifiers may be used when reporting any Organic parameters analyzed by Gas Chromatography/mass Spectometry (GCMS). Any additional qualifiers used in the reports will be described in the case narrative. These flags are based on the EPA Contract Laboratory Program statement of work.

GC/MS Qualifiers

- A- The reported Tentatively Identified Compound (TIC) is a suspected Aldol-condensation product.
- B- The reported analyte was detected in the associated method blank as well as the sample.
- D This flag identifies all compounds identified in an analysis at a secondary dilution factor. This flag alerts data users that any discrepancies between the concentrations reported for the dilutions may be due to dilution of the sample or extract. It additionally indicates that spike recoveries may have been diluted below quantifiable levels.
- E- Compound quantitation is above the instrument's calibration range for this analysis.
- J Indicates an estimated value.
- U- Indicates compound was analyzed for but not detected above the reporting limit.
- X,Y,Z Laboratory defined flags. These flags must be fully described, and such description attached to the Sample Data Summary Package and the case Narrative. Begin by using "X" and go on to "Y" as necessary. These flags may also be used to combine several flags, as needed.

GERMI1 SAMPLE NO.

BP-WC-D1

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75075

Matrix: (soil/water) WATER Lab Sample ID: 395491

Sample wt/vol: 5.000 (g/mL) ML Lab File ID: M395491V

Level: (low/med) LOW Date Received: 09/04/99

% Moisture: not dec.
Date Analyzed: 09/09/99

GC Column: DB-624 ID: 0.53 (mm) Dilution Factor: 1.0

Soil Extract Volume: ____(uL) Soil Aliquot Volume: ____(uL)

CONCENTRATION UNITS:

CAS NO. COMPOUND (ug/L or ug/Kg) UG/L Q

5.0 U 75-01-4-----Vinyl Chloride 75-35-4-----1,1-Dichloroethene 5.0 U 78-93-3----2-Butanone 24 X 67-66-3-----Chloroform 5.0 U 56-23-5-----Carbon Tetrachloride 5.0 U 71-43-2----Benzene 5.0 U 107-06-2----1, 2-Dichloroethane 5.0 U 79-01-6-----Trichloroethene 6.6 127-18-4----Tetrachloroethene 18 108-90-7-----Chlorobenzene 5.0 U

CLIENT SAMPLE NO.

VBLKU8

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000 Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75075 Matrix: (soil/water) WATER Lab Sample ID: VBLKU8 Sample wt/vol: 5.000 (g/mL) ML Lab File ID: MRUB001UV Level: (low/med) LOW Date Received: _____ % Moisture: not dec. Date Analyzed: 09/09/99 GC Column: DB-624 ID: 0.53 (mm) Dilution Factor: 1.0 Soil Extract Volume: (uL) Soil Aliquot Volume: (uL)

CONCENTRATION UNITS:

(ug/L or ug/Kg) UG/L CAS NO. COMPOUND Q 75-01-4-----Vinyl Chloride 5.0 U 75-35-4----1,1-Dichloroethene 5.0 U 5.0 U 78-93-3----2-Butanone 67-66-3-----Chloroform 5.0 U 5.0 U 56-23-5-----Carbon Tetrachloride 71-43-2-----Benzene 5.0 U 5.0 U 107-06-2----1,2-Dichloroethane 79-01-6-----Trichloroethene 5.0 U 5.0 U 127-18-4----Tetrachloroethene 5.0 U 108-90-7----Chlorobenzene

CLIENT SAMPLE NO.

ZBLKF4

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Case No.: 99000 SAS No.:

SDG No.: 75075

Matrix: (soil/water) WATER

Lab Sample ID: ZBLKF4

Sample wt/vol: 5.000 (g/mL) ML

Lab File ID: MRUB002UV

Level: (low/med) LOW

Date Received:

% Moisture: not dec.

Date Analyzed: 09/09/99

GC Column: DB-624 ID: 0.53 (mm)

Dilution Factor: 1.0

Soil Extract Volume: (uL)

Soil Aliquot Volume: ____(uL)

CONCENTRATION UNITS:

CAS NO. COMPOUND (ug/L or ug/Kg) UG/L

Q

75-01-4Vinyl Chloride 75-35-41,1-Dichloroethene 78-93-32-Butanone 67-66-3Chloroform 56-23-5Carbon Tetrachloride 71-43-2Benzene 107-06-21,2-Dichloroethane 79-01-6Trichloroethene 127-18-4Tetrachloroethene 108-90-7Chlorobenzene	5.0 5.0 5.0 5.0 5.0 5.0 5.0	บ บ บ บ บ บ บ
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COMPOUND

CAS NO.

CLIENT SAMPLE NO.

MRUU LCS

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000 Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75075 Matrix: (soil/water) WATER Lab Sample ID: MRUU LCS Sample wt/vol: 5.000 (g/mL) MLLab File ID: MRU050UQV Date Received: _____ Level: (low/med) LOW % Moisture: not dec. Date Analyzed: 09/09/99 Dilution Factor: 1.0 GC Column: DB-624 ID: 0.53 (mm) Soil Aliquot Volume: ____(uL) Soil Extract Volume: (uL)

CONCENTRATION UNITS: (ug/L or ug/Kg) UG/L

Q

67-66-3	50 46 61 47 49 50 48 52 51 51	
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FORM 2 WATER VOLATILE SYSTEM MONITORING COMPOUND RECOVERY

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75075

	1					L mam
	CLIENT	SMC1	SMC2	SMC3	OTHER	TOT
	SAMPLE NO.	(TOL)#	(DCE)#	(BFB)#	(DCB)#	OUT
			=====	=====		===
01	MRUU LCS	104	100	96	102	0
02	VBLKU8	100	108	94	102	0
03	ZBLKF4	104	110	94	102	0
04	BP-WC-D1	102	108	94	102	0
05		2.02	200			Ť
06						
07						
08						
09						
10					·	
11					-	
12						
13						
14						
15						
16						
17						
1.8						
19	-					
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26						
27						
28						
29						
30						
30						

QC LIMITS
SMC1 (TOL) = Toluene-d8 (88-110)
SMC2 (DCE) = 1,2-Dichloroethane-d4 (72-141)
SMC3 (BFB) = Bromofluorobenzene (72-122)
OTHER(DCB) = 1,2-Dichlorobenzene-d4 (69-124)

- # Column to be used to flag recovery values
- * Values outside of contract required QC limits
- D System Monitoring Compound diluted out

FORM 3 WATER VOLATILE LAB CONTROL SAMPLE

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75075

Matrix Spike - Sample No.: MRUU LCS

	SPIKE ADDED	SAMPLE CONCENTRATION	LCS CONCENTRATION	LCS %	QC. LIMITS
COMPOUND	(ug/L)	(ug/L)	(ug/L)	REC #	REC.
Vinyl Chloride	50		50	100	78-118
1,1-Dichloroethene	50		46	92	75-113
2-Butanone	50		61	122	60-140
Chloroform	50		47	94	74-106
Carbon Tetrachloride	50		49	98	62-106
Benzene	50		50	100	78-116
1,2-Dichloroethane	50		48	96	80-110
Trichloroethene	50		52	1.04	70-109
Tetrachloroethene	50		51	102	71-107
Chlorobenzene	50		51	102	81-115

Column to be used to flag recovery and RPD values with an asterisk

* Values outside of QC limits

RPD: 0 out of 0 outside limits

Spike Recovery: 0 out of 10 outside limits

COMMENTS:		
	 	 U_0.TTT

VBLKU8

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Case No.: 99000 SAS No.:

SDG No.: 75075

Lab File ID: MRUB001UV

Lab Sample ID: VBLKU8

Date Analyzed: 09/09/99

Time Analyzed: 1001

GC Column: DB-624 ID: 0.53 (mm)

Heated Purge: (Y/N) N

Instrument ID: M

THIS METHOD BLANK APPLIES TO THE FOLLOWING SAMPLES, MS and MSD:

	SAMPLE NO.	LAB SAMPLE ID	LAB FILE ID	TIME ANALYZED
	SAMPLE NO.	SAMPLE ID	ETTE ID	ANALIZED
01	MRUU LCS	MRUU LCS	MRU050UQV	0856
02	ZBLKF4	ZBLKF4	MRUB002UV	1046
03	BP-WC-D1	395491	M395491V	1125
04				
05				
06				
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COMPRANTS:			
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	 ······································		

COMMENTED .

ARCADIS GERAGHTY&MILLER	Labor	atory Task O	rder No./	P.O. No			CHAIN-OF	-custo	DDY REC	ORD	Page .	***************************************	. of
Project Number/Name			<u> </u>				ANALYSIS	/ METHOD) / SIZE	····			
Project Location			<i>.</i>		1	_				$\overline{}$	7		, s
Laboratory 53		<u>wt</u>		/		/		/ /	/ /				, -
Project Manager	or S	Mod			$\eta_{D_{i}} \setminus ^{\circ}$	V Z				,			3
Sampler(s)/Affiliation	CC/t	hayas	}		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		/ /						
Sample ID/Location	/ Matrix	Date/Time Sampled	Lab ID		May of						Remarks		Total
BP-WC-3-DI	5	9/3/19	9:45		[\{ \}						THE THOMAS	<u></u>	
89-WC-T-DI	5	1	10:25	l'age		***						<u>, , , , , , , , , , , , , , , , , , , </u>	
89-LUC-8-DI	5		9:50	1	\$ (0)								
87-WC-9-01	5		9:55	1									
BR-MC-10-01	S		10:06)	Á								
BP-WC-3-DI (BNP)	5		9:45	3)								
BF- WC - 7 - DI (BUP)	5		10105	\$(0)	l l					,			1 5
39-100-8-M(Dup)	5		9:50	2	1								
BB-MC-7-DI (ONF)			9:50	1									
28- MC - 10-D) (B48)	<u> </u>	<u> </u>	10:00	Ego-]								
Ef-w(-1∮-01			10:10)	e							
BP-12(- 11-01(00P)			10 4,10		7.0		1 25						12
				<u> </u>	/ [Li	fler.	hold	Tota	1100		<u>Cana</u>	My-	
	*****	<u> </u>			<u> </u>		44/10	77-17	1				
Sample Matrix: L = Liquid	d; S =	Solid; A =	: Air				1407000				Total No. o	of Bottles/	
Relinquished by:				ation: 🛝	37C	<u> </u>	Da	ate <u> </u>	3199	Time _	1/00	2 Seal	Intact? No N/A
Relinquished by:Received by:		~/	Organiz Organiz	ation: ation:				ate/_ ate/		Time _ Time _			Intact? No N/A
Special Instructions/Remarks:	X	HR TA	7.米	Theor	(mpo)	ะนั่ง	BF- WC-3 -	DI, E Pak	-7-D),	19-WC-8	-01, BP-W	<u> </u>	=- [1620] 147

Other

Tab Courier

MCommon Carrier Fold /- W

Delivery Method: | In Person



Severn Trent Laboratories 55 South Park Drive Colchester, Vermont 05446

Tel: (802) 655-1203 Fax: (802) 655-1248

Facsimile Cover Sheet

Bill Rabbia

Fax #:

518-452-4398

From: Chris Anderson

Phone #:

802-655-1203 (ext. 139)

E-mail: canderson@stl-inc.com

Fax #:

802-655-1248

Date:

September 9, 1999

of Pages: 9

Here are the TCLP VOA results for the sample designated BP-WC-D1, received on September 4, 1999.

If you have any questions please call.

Thank you,

Chris J. Anderson Project Manager

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September 9, 1999

Mr. Marc Sanford Geraghty & Miller 215 Washington Ave. Extension

Re: Laboratory Project No. 99000

Dear Mr. Sanford:

Albany, NY 12205

Enclosed are the analytical results for the sample received by Severn Trent Laboratories on September 4, 1999. Laboratory numbers have been assigned and designated as follows:

Client Sample Sample Lab ID Sample ID Date Matrix

Received: 08/20/99 ETR No: 74847

395491 BP-WC-D1 09/03/99 TCLP ZHE

2-Butanone was detected in the zero headspace method blank and sample BP-WC-D1 above the reporting limit, during the TCLP volatile organic analysis. The concentrations detected in these samples are well below the action limit for 2-butanone (methyl ethyl ketone), which is 200.0 mg/L. The volatile method blank did not exhibit the presence of 2-butanone. The presence of 2-butanone is due to contamination from the methanol used in the TCLP zero headspace extraction procedure.

If there are any questions regarding this submittal, please contact me.

Sincerely,

Christopher Anderson

Project Manager

Enclosure

Other Laboratory Locations:

- Mosson, CT Pentacola, Ft.
- University Park, It.
 Reference, MA
 Woodnote, MA

- * Sparks, MD
- Edison, NJ
- · Whippary, NJ
- Arnharst, NY • Newburgh, NY
- · Houston, TX

- Service Center Locations:
- Mt. Laurel, NJ Glen Covo, NY
- Sales Office Locations:
- Cantonment, FL
 New Orleans, LA
- Waterford, MI
 Blairstown, NJ
- Schöndstädy, NY
- Cleveland, OH.

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Severn Trent Laboratories

55 South Park Drive Colchester, Vermont 05446

Tel: (802) 655-1203 Fax: (802) 655-1248 www.stl-inc.com

Severa Iron Services Inc.

79-01-6----Trichloroethene

108-90-7-----Chlorobenzene

127-18-4-----Tetrachloroethene

GERMII SAMPLE NO.

6.6

18

5.0 T

BP-WC-D1

Lab Name: SEVERN TRENT LABORATORIES Contract; 99000 Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75075 Matrix: (soil/water) WATER Lab Sample ID: 395491 Sample wt/vol: 5.000 (g/mL) ML Lab File ID: M395491V Level: (low/med) LOW Date Received: 09/04/99 Date Analyzed: 09/09/99 % Moisture: not dec. GC Column: DB-624 ID: 0.53 (mm) Dilution Factor: 1.0 Soil Extract Volume: (uL) Soil Aliquot Volume: (uL) CONCENTRATION UNITS: CAS NO. COMPOUND (ug/L or ug/Kg) UG/L Q 75-01-4-----Vinyl Chloride 5.0 U 75-35-4----1,1-Dichloroethene 5.0 U 78-93-3----2-Butanone 24 X 67-66-3-----Chloroform 5.0 U 56-23-5-----Carbon Tetrachloride 5.0 U 71-43-2----Benzene 5.0 U 107-06-2----1,2-Dichloroethane 5.0 U

CLIENT SAMPLE NO.

Lab Name: SEVERN TRENT LABORATORIES Contra	velku8
Lab Code: INCHVT Case No.: 99000 SAS N	O.; SDG No.: 75075
Matrix: (soil/water) WATER	Lab Sample ID: VBLKU8
Sample wt/vol: 5.000 (g/mL) ML	Lab File ID: MRUB001UV
Level: (low/med) LOW	Date Received:
% Moisture: not dec.	Date Analyzed: 09/09/99
GC Column: DB-624 ID: 0.53 (mm)	Dilution Factor: 1.0
Soil Extract Volume:(uL)	Soil Aliquot Volume:(uL)
	CENTRATION UNITS: 1/L or ug/Kg) UG/L Q
75-01-4Vinyl Chloride 75-35-41,1-Dichloroethene 78-93-32-Butanone 67-66-3Chloroform 56-23-5Carbon Tetrachloride 71-43-2Benzene 107-06-21,2-Dichloroethane 79-01-6Trichloroethene 127-18-4Tetrachloroethene 108-90-7Chlorobenzene	5.0 U 5.0 U 5.0 U 5.0 U

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CLIENT SAMPLE NO.

ZBLKF4 Lab Name: SEVERN TRENT LABORATORIES Contract: 99000 Lab Code: INCHVT Case No.: 99000 SAS No.; SDG No.: 75075 Matrix: (soil/water) WATER Lab Sample ID: ZBLKF4 Sample wt/vol: 5.000 (g/mL) ML Lab File ID: MRUB002UV Level: (low/med) LOW Date Received: % Moisture: not dec. Date Analyzed: 09/09/99 GC Column: DB-624 ID: 0.53 (mm) Dilution Factor: 1.0

Soil Extract Volume: (uL) Soil Aliquot Volume: ____(uL)

CONCENTRATION UNITS:

CAS NO.	COMPOUND	(ug/L or	ug/Kg) UG/L		Q
75-01-4	Vinyl Chlorid	le		5.0	
78-93-3	2-Butanone Chloroform	:cifetie	_	5.0 22 5.0	ļ <u>.</u>
56-23-5 71-43-2	Carbon Tetrac			5.0 5.0	บ บ
79-01-6	1,2-Dichloroethe	ne		5.0	ប៊
	Tetrachloroet Chlorobenzene			5.0 5.0	

127-18-4----Tetrachloroethene

108-90-7-----Chlorobenzene

CLIENT SAMPLE NO.

51

MRUU LCS

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000 Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75075 Matrix: (soil/water) WATER Lab Sample ID: MRUU LCS Sample wt/vol: 5.000 (g/mL) ML Lab File ID: MRU050UQV Level: (low/med) LOW Date Received: % Moisture: not dec. Date Analyzed: 09/09/99 GC Column: DB-624 ID: 0.53 (nm) Dilution Factor: 1.0 Soil Aliquot Volume: (uL) Soil Extract Volume: (uL) CONCENTRATION UNITS: (ug/L or ug/Kg) UG/L Q CAS NO. COMPOUND 75-01-4-----Vinyl Chloride 50 75-35-4----1,1-Dichloroethene 46 78-93-3----2-Butanone 61 67-66-3-----Chloroform 47 56-23-5-----Carbon Tetrachloride 49 71-43-2-----Benzene 50 107-06-2-----1,2-Dichloroethane 48 79-01-6----Trichloroethene 52

FORM 2 WATER VOLATILE SYSTEM MONITORING COMPOUND RECOVERY

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75075

1	CLIENT	SMCl	SMC2	SMC3	OTHER	TOT
	SAMPLE NO.	(TOL)#	(DCE)#	(BFB)#	(DCB)#	OUT
			,, ,,		======	
01	MRUU LCS	104	100	96	102	0
						i "[
02	VBLKU8	100	108	94	102	0
03	ZBLKF4	104	110	94	102	0
04	BP-WC-D1	102	108	94	102	0
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06						
07			· · · · · · · · · · · · · · · · · · ·			
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	WHIPPY					
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SMC1 (TOL) = Toluene-d8 (88-110) SMC2 (DCE) = 1,2-Dichloroethane-d4 (72-141) SMC3 (BFB) = Bromofluorobenzene (72-122) OTHER (DCB) = 1,2-Dichlorobenzene-d4 (69-124)

- # Column to be used to flag recovery values
- * Values outside of contract required QC limits
- D System Monitoring Compound diluted out

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FORM 3 WATER VOLATILE LAB CONTROL SAMPLE

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Cas

Case No.: 99000

SAS No.:

SDG No.: 75075

Matrix Spike - Sample No.: MRUU LCS

COMPOUND	SPIKE	SAMPLE	LCS	LCS	QC.
	ADDED	CONCENTRATION	CONCENTRATION	%	Limits
	(ug/L)	(ug/L)	(ug/L)	REC #	REC.
Vinyl Chloride 1,1-Dichloroethene 2-Butanone Chloroform Carbon Tetrachloride Benzene 1,2-Dichloroethane Trichloroethene Tetrachloroethene Chlorobenzene	50 50 50 50 50 50 50 50 50		50 46 61 47 49 50 48 52 51	100 92 122 94 98 100 96 104 102	78-118 75-113 60-140 74-106 62-106 78-116 80-110 70-109 71-107 81-115

RPD: 0 out of 0 outside limits

Spike Recovery: 0 out of 10 outside limits

COMMENTS:	

[#] Column to be used to flag recovery and RPD values with an asterisk

^{*} Values outside of QC limits

VBLKU8

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75075

Lab File ID: MRUB001UV

Lab Sample ID: VBLKU8

Date Analyzed: 09/09/99

Time Analyzed: 1001

GC Column: DB-624 ID: 0.53 (mm)

Heated Purge: (Y/N) N

Instrument ID: M

THIS METHOD BLANK APPLIES TO THE FOLLOWING SAMPLES, MS and MSD:

		LAB	LAB	TIME
	SAMPLE NO.	SAMPLE ID	FILE ID	ANALYZED
		=======================================		=======================================
01	MRUU LCS	MRUU LCS	MRU050UQV	0856
02	ZBLKF4	ZBLKF4	MRUB002UV	1046
03	BP-WC-D1	395491	M395491V	1125
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COMMENTS:

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ARCADIS Geraghty & Miller

Severn Trent Laboratories

55 South Park Drive Colchester, Vermont 05446

Tel: (802) 655-1203 Fax: (802) 655-1248 www.stl-inc.com



September 9, 1999

Mr. Marc Sanford Geraghty & Miller 215 Washington Ave. Extension Albany, NY 12205

Laboratory Project No. 99000 Re:

Dear Mr. Sanford:

Enclosed are the analytical results for the sample received by Severn Trent Laboratories on September 2, 1999. Laboratory numbers have been assigned and designated as follows:

<u>Lab ID</u>	Client Sample ID	Sample <u>Date</u>	Sample <u>Matrix</u>
	Received: 09/02/99	ETR No: 75035	
395241	BP-WC-DI	09/01/99	TCLP ZHE

2-Butanone was detected in the zero headspace method blank and sample BP-WC-D1 above the reporting limit, during the TCLP volatile organic analysis. The concentrations detected in these samples are well below the action limit for 2-butanone (methyl ethyl ketone), which is 200.0 mg/L. The volatile method blank did not exhibit the presence of 2-butanone. The presence of 2-butanone is due to contamination from the methanol used in the TCLP zero headspace extraction procedure. Please note that the qualifier "X" is used to denote contamination from the TCLP zero headspace extraction.

If there are any questions regarding this submittal, please contact me.

Sincerely,

Christopher Anderson Project Manager

Enclosure

Other Laboratory Locations:

- . Monroe, CT
- · Pensacola, FL
- · University Park, IL
- Billerica, MA
 Westfield, MA
- · Sparks, MD
- Edison, NJ
- Whippany, NJ
 Amherst, NY
- · Newburgh, NY . Houston, TX

- Service Center Locations:
- Mt. Laurel, NJ
- · Glen Cove, NY

Sales Office Locations:

- · Cantonment, FL
- · New Orleans, LA
- · Waterford, MI
- Blairstown, NJ
- · Schenectady, NY
- . Cleveland, OH

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Colchester VT 05446 Tel: (802) 655-1203

Fax: (802) 655-1248

: 09/07/99

Analytical Report

Geraghty & Miller, Inc. 215 Washington Av Extension

ETR Number: 75035 Project No.: 99000 No. Samples:

Albany, NY 12205

: 09/02/99 Arrived

Attention: Marc Sanford

Page 1

Standard analyses were performed in accordance with Methods for Analysis of Water and Wastes, EPA-600/4/79-020, Test Methods for Evaluating Solid Waste, SW-846, or Standard Methods for the Examination of Water and Wastewater. All results are in mg/l unless otherwise noted.

	Sample Description/ hod No. Parameter	Result
395235	BP-WC-02-D1:09/01/99 @1700(Soil) SSP-OQ Composite Before TCLP	С
395236	BP-WC-01-D1:09/01/99 @1700(Soil) SSP-OQ Composite Before TCLP	С
395237	BP-WC-04-D1:09/01/99 @1700(Soil) SSP-OQ Composite Before TCLP	С
395238	BP-WC-05-D1:09/01/99 @1700(Soil) SSP-OQ Composite Before TCLP	С
395239	BP-WC-06-D1:09/01/99 @1700(Soil) SSP-OQ Composite Before TCLP	С
395240	BP-WC-D1:09/01/99 @1700(Soil) 1311 TCLP Volatile Extraction	С
395241	BP-WC-D1:09/01/99 @1700(TCLPZHE) 8260_TCLP Analysis, TCLP, VOA	С
395242	BP-WC-02-D1(DUP):09/01/99 @1700(Soil) SAMP-HOLD Hold for Later Analysis	С

Comments/Notes

C = Procedure/analysis completed

< Cont. Next Page >



Severn Trent Laboratories 55 South Park Drive Colchester VT 05446

Tel: (802) 655-1203 Fax: (802) 655-1248

Analytical Report

Geraghty & Miller, Inc. 215 Washington Av Extension Albany, NY 12205

: 09/07/99 ETR Number: 75035 Project No.: 99000 No. Samples: 12

Arrived : 09/02/99

Attention : Marc Sanford

2 Page

Standard analyses were performed in accordance with Methods for Analysis of Water and Wastes, EPA-600/4/79-020, Test Methods for Evaluating Solid Waste, SW-846, or Standard Methods for the Examination of Water and Wastewater.

All results are in mg/l unless otherwise noted.

Lab No./ Met	Sample I hod No.	Description/ Parameter	Result
395243	BP-WC-01-D1(DUP) SAMP-HOLD	:09/01/99 @1700(Soil) Hold for Later Analysis	С
395244	BP-WC-04-D1(DUP) SAMP-HOLD	:09/01/99 @1700(Soil) Hold for Later Analysis	С
395245	BP-WC-05-D1 (DUP) SAMP-HOLD	:09/01/99 @1700(Soil) Hold for Later Analysis	С
395246	BP-WC-06-D1(DUP) SAMP-HOLD	:09/01/99 @1700(Soil) Hold for Later Analysis	С

Comments/Notes

C = Procedure/analysis completed

< Last Page >

Submitted By

STL VT



The following Qualifiers may be used when reporting any Organic parameters analyzed by Gas Chromatography/mass Spectometry (GCMS). Any additional qualifiers used in the reports will be described in the case narrative. These flags are based on the EPA Contract Laboratory Program statement of work.

GC/MS Qualifiers

- A- The reported Tentatively Identified Compound (TIC) is a suspected Aldol-condensation product.
- B- The reported analyte was detected in the associated method blank as well as the sample.
- D This flag identifies all compounds identified in an analysis at a secondary dilution factor. This flag alerts data users that any discrepancies between the concentrations reported for the dilutions may be due to dilution of the sample or extract. It additionally indicates that spike recoveries may have been diluted below quantifiable levels.
- E- Compound quantitation is above the instrument's calibration range for this analysis.
- J Indicates an estimated value
- U- Indicates compound was analyzed for but not detected above the reporting limit.
- X,Y,Z Laboratory defined flags. These flags must be fully described, and such description attached to the Sample Data Summary Package and the case Narrative. Begin by using "X" and go on to "Y" as necessary. These flags may also be used to combine several flags, as needed.

GERMI1 SAMPLE NO.

BP-WC-D1

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75035

Matrix: (soil/water) WATER Lab Sample ID: 395241

Sample wt/vol: 5.000 (g/mL) ML Lab File ID: M395241I2V

Level: (low/med) LOW Date Received: 09/02/99

% Moisture: not dec. ____ Date Analyzed: 09/03/99

GC Column: DB-624 ID: 0.53 (mm) Dilution Factor: 1.0

Soil Extract Volume: (uL) Soil Aliquot Volume: (uL)

CONCENTRATION UNITS:

CAS NO. COMPOUND (ug/L or ug/Kg) UG/L Q 75-01-4-----Vinyl Chloride 5.0 U 75-35-4-----1,1-Dichloroethene 5.0 U 78-93-3----2-Butanone 12 X 67-66-3-----Chloroform 5.0 U 56-23-5-----Carbon Tetrachloride 5.0 U 71-43-2-----Benzene 5.0 U 107-06-2----1,2-Dichloroethane 5.0 U 79-01-6-----Trichloroethene 2.1 J 127-18-4-----Tetrachloroethene 5.0 U 108-90-7-----Chlorobenzene 5.0 U

CLIENT SAMPLE NO.

VBLKT6

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000 Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75035 Matrix: (soil/water) WATER Lab Sample ID: VBLKT6 Sample wt/vol: 5.000 (q/mL) ML Lab File ID: MRUB001TV Level: (low/med) LOW Date Received: % Moisture: not dec. Date Analyzed: 09/03/99

GC Column: DB-624 ID: 0.53 (mm) Dilution Factor: 1.0

COMPOUND

Soil Extract Volume: (uL)

CAS NO.

Soil Aliquot Volume: (uL)

Q

CONCENTRATION UNITS:

(ug/L or ug/Kg) UG/L 75-01-4-----Vinyl Chloride 5.0 U 75-35-4----1,1-Dichloroethene 5.0 U 78-93-3-----2-Butanone_ 5.0 U 67-66-3-----Chloroform 5.0 U 56-23-5-----Carbon Tetrachloride 5.0 U 5.0 U 71-43-2-----Benzene 107-06-2----1,2-Dichloroethane 5.0 U 79-01-6-----Trichloroethene 5.0 U 127-18-4-----Tetrachloroethene 5.0 U 108-90-7-----Chlorobenzene 5.0 U

FORM 1 VOLATILE ORGANICS ANALYSIS DATA SHEET

CLIENT SAMPLE NO.

ZBLKF3

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75035

Matrix: (soil/water) WATER Lab Sample ID: ZBLKF3

Sample wt/vol: 5.000 (q/mL) ML Lab File ID: MRUB002TV

Level: (low/med) LOW Date Received: _____

% Moisture: not dec. ____ Date Analyzed: 09/03/99

GC Column: DB-624 ID: 0.53 (mm) Dilution Factor: 1.0

Soil Extract Volume: ____(uL) Soil Aliquot Volume: ____(uL)

CONCENTRATION UNITS:

CAS NO. COMPOUND (ug/L or ug/Kg) UG/L Q

75-01-4-----Vinyl Chloride 5.0 U 75-35-4----1,1-Dichloroethene 5.0 U 78-93-3----2-Butanone 16 67-66-3------Chloroform 5.0 T 56-23-5-----Carbon Tetrachloride 5.0 U 71-43-2-----Benzene 5.0 U 107-06-2----1,2-Dichloroethane 5.0 U 5.0 U 79-01-6-----Trichloroethene 127-18-4-----Tetrachloroethene 5.0 U 108-90-7-----Chlorobenzene____ 5.0 U

FORM 1 VOLATILE ORGANICS ANALYSIS DATA SHEET

CLIENT SAMPLE NO.

MRUT LCS Lab Sample ID: MRUT LCS

Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75035

Matrix: (soil/water) WATER

Sample wt/vol: 5.000 (g/mL) ML

Lab File ID: MRU050TQV

Level: (low/med) LOW

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Date Received: _____

% Moisture: not dec. _____

Date Analyzed: 09/03/99

GC Column: DB-624 ID: 0.53 (mm)

Dilution Factor: 1.0

Soil Extract Volume: (uL)

Soil Aliquot Volume: ____(uL)

CONCENTRATION UNITS:

CAS NO. COMPOUND (ug/L or ug/Kg) UG/L Q

75-01-4Vinyl Chloride 75-35-41,1-Dichloroethene 78-93-32-Butanone 67-66-3Chloroform 56-23-5Carbon Tetrachloride 71-43-2Benzene 107-06-21,2-Dichloroethane 79-01-6Trichloroethene 127-18-4Tetrachloroethene	52 48 56 51 50 51 51 41	
108-90-7Chlorobenzene	51	

FORM 2 WATER VOLATILE SYSTEM MONITORING COMPOUND RECOVERY

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75035

	CLIENT SAMPLE NO.	SMC1 (TOL)#	SMC2 (DCE)#	SMC3 (BFB)#	OTHER (DCB)#	TOT
01	======== MRUT LCS	102	108	98	104	===
02 03	VBLKT6 ZBLKF3	102 104	108 112	98 100	104 106	0
04 05	BP-WC-D1	106	108	100	102	0
06 07						
08 09						
10 11						
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29 30		;				

SMC1 (TOL) = Toluene-d8 (88-110) SMC2 (DCE) = 1,2-Dichloroethane-d4 (72-141) SMC3 (BFB) = Bromofluorobenzene (72-122) OTHER(DCB) = 1,2-Dichlorobenzene-d4 (69-124)

- # Column to be used to flag recovery values
- * Values outside of contract required QC limits
- D System Monitoring Compound diluted out

FORM 3 WATER VOLATILE LAB CONTROL SAMPLE

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Case No.: 99000 SAS No.: SDG No.: 75035

Matrix Spike - Sample No.: MRUT LCS

	SPIKE ADDED	SAMPLE CONCENTRATION	LCS CONCENTRATION	LCS	QC. LIMITS
COMPOUND	(ug/L)	(ug/L)	(ug/L)	REC #	REC.
Vinyl Chloride	50		52	104	78-118
1,1-Dichloroethene	50 50		48	96	75-113
2-Butanone	50		56	112	60-140
Chloroform	50		51	102	74-106
Carbon Tetrachloride	50		50	100	62-106
Benzene	50		50	100	78-116
1,2-Dichloroethane	50		51	102	80-110
Trichloroethene	50		51	102	70-109
Tetrachloroethene	50		46	92	71-107
Chlorobenzene	50		51	102	81-115

Column to be used to flag recovery and RPD values with an asterisk

* Values outside of QC limits

RPD: 0 out of 0 outside limits Spike Recovery: 0 out of 10 outside limits

COMMENTS:			

VBLKT6

Lab Name: SEVERN TRENT LABORATORIES Contract: 99000

Lab Code: INCHVT Case No.: 99000 SAS No.:

SDG No.: 75035

Lab File ID: MRUB001TV

Lab Sample ID: VBLKT6

Date Analyzed: 09/03/99

Time Analyzed: 1016

GC Column: DB-624 ID: 0.53 (mm)

Heated Purge: (Y/N) N

Instrument ID: M

THIS METHOD BLANK APPLIES TO THE FOLLOWING SAMPLES, MS and MSD:

		LAB	LAB	TIME
	SAMPLE NO.	SAMPLE ID	FILE ID	ANALYZED
i				=========
01	MRUT LCS	MRUT LCS	MRU050TQV	0906
02	ZBLKF3	ZBLKF3	MRUB002TV	1112
03	BP-WC-D1			1431
	BB-MC-DI	395241	M395241I2V	1431
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Sample ID/Location	Matrix		/fime pled	Lab ID			/ ·				F	Remarks	·	Total
BE-WG-03-DI	5	9/1	199	5.007	•									
39-WC-03-DI(DUP)	5			5007		, contraction							-	
BY- W-01-D91	ς			500F										1
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			i2	01		1 /	I_{Λ}	9.1	7\ /	1				
				Pyc	isc	hol	中多	以	WUPI	att	SAT	N//(@)	}	
	بمر	- 1	7 %				Δ			/		1	· _	
	7	/"	7	17	t/NL		AN	1 KDY	7/24/1	04	外方			
Sample Matrix: L = Liquid	S =	Solid/	/ A =	= Air		ţ	-	<u></u>			Ťo	tal No. of Bo Conta	ttles/ liners	0
Relinquished by:	4	2		Organiz Organiz		ARCHUR BIT		y Priller	Date 4 /	2,90	Time 6		Seal In	ntact? o N/A
Relinquished by:				Organiz	ation:				Date/_		Time		Seal In	ntact?
Received by:				Organiz	ation:			7,000	Date/_		Time	Y	'es No	o N/A
Special Instructions/Remarks: _	*	48	Hol	ME TA	17 04	TU	7:10C'		Ger 1910	44 E1	miches X	*		
X-X - Ficus Comp.	osi te				: ? -ы€- 0%	\$1 RP -1	UK -04-15.	1 28-186 -	05-D1 & 85-	W1-N-N	***			
	In Pers					er Factor		<u>, €4</u>	☐ Lab Co		-/\-\- □Othe	·r		

Appendix - C -

Health & Safety Logs

Project name	LMC	_ Site le	ocation	Utia, MY	
Project number	Aroxxx.oxoa	Well/	Paring I D.	POB CALIBROA	ation
G&M Personnel		_ Da	ite	8/7/9	
Instrument	Background	Time	Reading	Comments	
WIF Octobarn	0.015	50	0-015	Ex backgrown	
OVA	4.00	8:50	0.000	Bachgrow	
MIEPOR	gran	9415	0.027	Excavation	
OFA	420	9:0-	6,000	ſ	
MIF		9:70	0,00		
ざンみ		9:30	0.000		
MIK		9.145	0.008		
GVA		91.45	0.00	Ψ	
MIE		10115	0,002	Soil Peli	
OVA		10:15	0.00	Soul Pil	
MIE		10:30	0.031	Excarating	
0017		10:30	0.00	Excavition	
MIE		15	0,042	Sort rel	
OVA		10:45	0,00	Soul prob	
MIE		11:00	0,040		
OVA		<u> </u>	0,00	V	•
MIE		1115	0.075	Execution	
OVA			0.00	1	
ME		11:30	0,000		
OVA		1,13	0.00	J	
MIE		11:45	12.60	Sil Pil	
OVA			0-00	L	
MIE		12:40	10,00	Excavatory	
OVA			0.00		
MIE		13:00	0.021	Soul like	
OVA			0.00	T. L.	
1-E		12:15	0.00%	Exceraty	
UVP			0.00	J	
MIE		13:30	0.045	Soil file	
OVA		 	0.000		
		<u> </u>			
		<u> </u>			
		 	<u> </u>		
<u> </u>	<u> </u>	J	<u> </u>	L	

Project name	LMC	Site lo	ocation	chique
Project number	A600015.0003	₩ elИ	Boring-I D.	PCBCAL Except
G&M Personnel	03 CC	Da	te	8/18/99
Instrument	Background	Time	Reading	Comments
Mise	0,002	B:OOA	0,007	
AA	00-30		0,0	
MIZ		8:15/1	0.014	Soil Pile
an			0.0	
ME		81350	0,013	H5#2
an			0,0	
MITE		9:15	೦.ಯ3	HS #3
CNA			0,0	
CUA MILE		9:25	0.013	
OVA			0.0	
OVA MIE		9:50	0,005	175 F7
OM		· · · · · · · · · · · · · · · · · · ·	0.0	3
MIE		1015	600.0	H544
OVA			0.0	
MIE		10.45		NHS#1
OVA			0.0	
MIE		11:00	0.041	NHS#1
OVA			0.0	
MIK		10:15	0.023	
OVA			0.0	
MIE		71:30	0,040	
Q Y D			0.0	
MIK		11:45	0.032	
OYR			6.0.	
MSE		12:00	0.021	
OTA			0.0	
MIF		12:15	0.032	
			000	
MIE		13:00	0.041	
OVA			0.0	
MIK		13:15	1.009	
OVI		(6	0.0	
MIR		13:30	0.027	
OVA MIK OVI- MIK OVA			0.2	
NAL		13:45	0.009	
υVΔ			0.0	
MIE		14:00	0.02-7	
ONA			0.0	

Project name	LINC-Upica	. Site lo	ocation	Utica, NY IRM Treature	
Project number	LWC-Ufres A4000265.0003	. Well/E	Boring ID	IRM Treatme	d Cello
G&M Personnel	CC/JB	. Da		8/18/54	
Instrument	Background	Time	Reading	Comments	
MIE		14:15	0.018	Frankfin	
OVA			010		
MIE		14:30	0.027	Soil Staying	
OVA			0.0		
MIE		14:45	0.00)	Excavation	
01/19			0.0		
· · · · · · · · · · · · · · · · · · ·					
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			***************************************		٠
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Project name	Line-lihus	Site location	Utica, NY
Project number	A4000265,0003,0000)	Well/Boring ID	IAM Treatment Cell
G&M Personnel	CC/JB/ms	Date	8/19/99

Instrument	Background	Time	Reading	Comments
MIE	0.001	7:45	0.004	
OVA MIK OVI MIK	0,0	7:45	020	
MIK	0.0 Del	8.00	0.	Staging Arm Excavation Home
0V14	Benez	8:15	Ø	
MIK		8:15	0.049	Excaintron Home
(2) V (1)		8:15	0.0	L
MZE		8:30	0.057	
OVA			0	
MIZE		1.45	0.073	
19VA			100	
MIE		9:00	0,000	
OW)				
OVA MIE OVA MIE		9130	1.009	
OVA		1	N/	
MEK		9.45	6,041	
OVA			Ø	
MENZ		18:00	0,067	
OVP			9	
OVA MIF		10015	0.032	
OVA				
MCE		10:30	0.465 B	
6VA			15	
MIE		10:45	0.036	
OVA MEK GVA MIE OVA			1 15	
M16 010 M18		11:00	0-083	
010			N	
MIB		11:15	0.041	
exa MA			0.0	
MIE OVA		11:30	0.045	
6VA			Ø	
			7	
				
			1	

Project name	LMC	•	ocation	_ Otionur
Project number	AY(1000X65,000)		Boring ID	TRY CAL Excavation
G&M Personnel	J. Bustel/c.	Car Da	te	8/20/99
Instrument	Background	Time	Reading	Comments
MEE		7:20A	0.000	
OVA-			0.0	
mi;		770	Ø	
0/17			γ	
MIE		745	D.032	
OVA			<u>ال</u>	
MIR		8:15	0.047	
OVA			g/	
MIR		8,45	0,004	
OUA			Ø	
MIE		9:00	0.027	
			Ø	
DVH MIH		90	0.099	
OVA			B B	
MJK		10:00	6.065	
AVO				
MIE		10:50	0.038	
OVA		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	d	
MIE		11:00	0,120	
OVK		7.1.00	0	
			(V)	
				<u> </u>
		<u> </u>		
		<u> </u>	}	
		<u> </u>		
		 		

Project name	LMC-Utrea	Site lo	ocation	Utico, NY
Project number	A4000265.0003.	නුව හෝ Well/	Boring ID	Utico, NY IRM Treatment
G&M Personnel	JB/CC	_ Da		8/23/99.
Instrument	Background	Time	Reading	Comments
MIE	0.0	7:30	0.0	
OVA	0.0		0.0	
MEK		8:15	0.041	
orp			0	
MVIG	·	8:30	0.088	
OVA			Ø	
mie		8:45	0.075	
0119			F	
MIE		9:00	0.099	·
ovn			0	
MIE		9215	0,080	
OVA			9	
MIE		7:30	0-027	
MIK		9145	0.00%	
MZK		10000	12.027	
MIE		10:15	0.038	
Mil		10:30	17,098	
MIE		10:45	0.095	
MIF		11:00	0.055	
MIR		11:15	0,072	
MIK		11:30	0.048	
MIR		14145	0.027	
Mel		12:00	0.098	
MIK		1230	0.11)	
M EG		1200	0.081	
MIE		13:30	0.00%	
MZE		14:00	0.047	
MIE		14:30		
MIE	·	15:00	0.009	
MEG		15:30	0.015	
MIE		16:00	0.017	
MITE		16:30	0.029	
OVA			0.0	

Project name	LMC	. Site k	ocation	Majux	
Project number	A(000266,003.00	⊅l Well /	Boring ID	Chicajoux PCB50il Georgation	27
G&M Personnel	J. Bonsteel	. Da	ite	8/24/19	
Instrument	Background	Time	Reading	Comments	İ
Mire	0,003	7:301	0.017	Non-Martswartier	
OVA	0.00 %		0.00		
ME		81.00A	0,000		
OVA			0.0		
MIE		8:30A	0.026		
OVA			0.0		j
Miri		GOOA	0.000		
OVA			0.0	<u> </u>	
OFF		9:45	0015		
MFE		10:45	0.003		
ME		11:45	0.012		
OVA			0.0		
Mir	<u> </u>	ISP	0.000		
MIE			0.0		
MITTE		3:30	0.122	Bak reding as	<u> </u>
OVA			0.0	Pak reding, go to 0,000 aft	1050
UTE	<u> </u>	4:15	0.027		
HTE NE		5:15	0.003		
OVA		<i>y</i> - <u> </u>	6.0		
					
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		(<u> </u>	<u> </u>		
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Project name	LMC	Site I	ocation	Utra, N.Y.
Project number	A4000245.0003.0	ooo) Well	Boring ID	Utra, N.Y. IRM Treatment (8/25/59
G&M Personnel	lc/177	Da	ate	8/25/59
Instrument	Background	Time	Reading	Comments
MIE	з O	7:15	0.00	Out 0.0 Bdgand
MIR		7:45	0.0	
MIE		8.70	12.0	
MIA		8:41	0.027	
MLE		9:30	0.098	
MIE		10.00	0.044	
MIE		10:30	0.020	
MIE		11:00	0.017	
MUE		11:15	0.03	
OVA MIE			0.0	
MIE		3.′∞	0.009	
MITE		5:15	ල.ගත	
		1		
	<u> </u>			
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		<u> </u>		

Project name	LMC-uta	Site location	Utra, NY	
Project number	A4000165,0003,21001	Well/Boring ID	Bum Pet	_
G&M Personnel	<u></u>	Date	9/1/94	_

Instrument	Background	Time	Reading	Comments
MILE	0,0	7:45	0.0	Califration
PIN	0,0		ひこ	
		P:30	0.08	Birmonet
MIÉ PLO			0.0	Area 41
MIE		8:45	0.099	
Y.C.O.			0.0	
MIE		9:00	0.056	
120			jizr	
ME		5.30	0,100	
PID			0.0	
MIR		9:45	0.051	
PID			0	
mik		10:15	0,088	
nsy			Ø	
MIK		10:30	0.120	
PIN			Ø	
mth		18:00	0-111	
			Ø	
mré		11:30	0.109	
<u> </u>			Ø	
MDR		12:00	0.064	
151)			b	
MIR		13:00	0,081	But Pet Area#
VID			Ø	
m ek		13:76	0.100	
Pro			ø	
mte		14:00	0.085	
PID			0	
MZC		14:30	0.131	
pio			0,0	
ME		15,00	0,095	
PEO			010	
NEE VEO WEE		15:70	0,099	
PIN			0.0	
Me		16700	0.100	
PIO ME PEO		-	6.0	
NC .		16:30	01131	
	I.		6.4	L

ARCADIS GERAGHTY & MILLER

DAILY LOG

Well(s)	Project/No		Page	eof
Site Location				
Prepared By _				
Date/Time	9/HSH Buchwow	Caliba Description of Activities	Ready	Com
MIE PED	7:48	X	Ready	
an E E	g.30		0.066	Soil
m76	8:42		0.099	
MEE	9:00		0.010	
Mer	9:15 5:13		0.111	$-\Psi$
MIE PI)	9:45		0.050 810	EXEMPLON
MIK 120	10:00		0.100	
mze 120	11:40		0.056	
	11. 70	······································	UP	
MIG Ptg	1:00		9 0 हर ठ	
MCÊ PLO	14:30	·	0,080	
7 I E 120	15:00		0.061	
				<u></u>
				······································
			· · · · · · · · · · · · · · · · · · ·	
			····	
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<u></u>		and the second s		

ARCADIS GERAGHTY & MILLER

DAILY LOG

Well(s)	Project/No		Pageof
Site Location_	8/3	31/99	
Prepared By	Health & Saf	ity Month	only for
Date/Time		,	ription of Activities Comments
6:30	0.0	0, 5	Soil Pile Stage
7:00		0.111	
7:30		0.109	
7:45		8.081	
8.00		0.004	
8:30		0.051	
9:00		0.00	- Soil load ~
9.15		0.032	Poil Loady
9:30		0.063	Soil loading
9:45		6,000	Fort loading
10:15		0.011	Irm Cell
10:45		0.086	
11:15		0.075	<u> </u>
[1:30		0.096	<u> </u>
11:45		0.052	<u> </u>
13:00	MIE	0.066	Burn P. (Afrea 41
7'.51	PID	0.000	
13:15	MIÉ	0.027	
	PIO	0,0	
17:30	MIE	0.112	
	PIO	0. ა	
13:45	MIR	0.100	
	PIO	0.0	

ARCADIS GERAGHTY & MILLER

DAILY LOG

Well(s)	Project/No		Pageof
Site Location_	····		
Prepared By	Health (S	safety logs	
Date/Time _	8/31/98	Description of Activities	5
Hill	MER	0,100	
	PIO	0.0	
14:45	max	0.111	
	PED	0.0	
15:15	MIK	0.092	
	PIO	0.0	
15:45	MIE	0.088	
	PIO	0.0	
i i			

Project name	LMC-West Lot Site	Site location	Utica, NY	
Project number	AY000265.0003,00001	Well/Boring ID		
G&M Personnel	CC	Date	9/1/84	

Instrument	Background	Time	Reading	Comments
PCO PCO	O O	8,30	o,	Soil transmit
PLE	0.0	8730	1	2011 1103/00
		8:45	<u>e</u>	
NED.		0. 75	6.041	
pr)		9:00	0	Sol Coodans
11.727		17200	0.056	Fax Warren
MER		5:15	0	
MER		17.73	0.082	
PLA		4.70	0	
MIE		3,70	0.88	
		10:00	0.0	
PID			0.04	
PLO		10.70	0.0	
Mié			000	
		11:00	0	
PLD MEG		77.00	001	
CEO		11.30	0.0	
		1" 2		
mek		13:00	0.055	
n la		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		13:36	0.092	
PIS		17-10	0.04	·
M262		14.00	0	
MER		77101	0.08	
		14:15	0	
PIN		/ 1./2	 	
MEB		14:45	0.022	
P20		7 7.73	<u> </u>	
m32.	W. A.W.	15:00	0.36	
100		17.00		
m J F		11.5	0.41	
Pro		15.70	0.025	
nes				
Per -		16.000	8	
MER			0.044	
121)		16.30	0	
inté			0.053	
120		17100	6	

INKK

0.011

Project name	LMC-West Lot Site	Site location	Utica, NY	
Project number	AY000265.0003.00001	Well/Boring ID	Thefore	
G&M Personnel	CC	Date	C	

Instrument	Background	Time	Reading	Comments
PID		8:00	Ø	
MLE	Ø		Ø	
120		8:30	d	Sol Goodo
MIE			0.019	
070		8:45	10	
MITT			1045	
IPID		9:15	Ø	
PID MIR PID PID			0,022	
PLD		11:00	Ø	
MIF			0.001	
PED		11:34	Ø	
MIC			0-03)	
pto		12:00	Ø	
m F G			0,004	
PIO		13:00	9	
MIK PTB			0.083	
Pth		13:45	Ø	
MIR			0.08	
PRO		14:30	ø	
ME			0.033	
PRO		15:15	ø	ford Condat
MIG			0,063	
peb		15.31	Ø	
MIE			9,071	
[to]		157.45	0,0	
MIE		<u> </u>	0.084	
PRA	·	16:00	0.0	
MER			0.092	
120		16:15	D.O	
MER			0.055	
p20		16.30		
ME			5.078	
AED .		10.45	0	
MEA			0.099	
wer pep		17:00		
men			0-42	
		<u> </u>		

Project name	LMC-West Lot Site	Site	location	Utica, NY	
Project number	AY000265,0003,00001	Well/Boring ID			
G&M Personnel	CC	D:	ate	9/3/49	
Instrument	Background	Time	Reading	Comments	
PID	()	8100	D		
MIE	0.011		0.011	Soil boulous	
(PI)	0	8130	0.011		
MIR			0046		
y					
PID	_0	8 45	0		
MIK			0.086		
PIN	8	9.00	0.0		
mple			D.OKI		
P19	5-70	9.30	0.0	Exervation	
NIE			०.०य		
PLD		10.00	0,0		
MIR			0.034		
PIN		14:00	0.0	Finishallexuavato	
me			0.042		
Pth		12:el	0.0	;	
			10.080		
PID		13:00	٥.		
NEB			6.090		
PID		, 4:00	0	:	
MIK			0,100		
PIN		15,00	Ö	:	
MIG		- V	0.101		
P工D		16:00	0		
MIE			0.108		
PIV		17.03	6		
NIK		1	0.000		
			1/200		
		 			
		-			
	1	1			

Project name	LMC-West Lot Site	Site	location	Utica, NY
Project number	AY000265.0003.00001	Well	/Boring ID	
G&M Personnel	CC	Da	ate	9/7/99
Instrument	Background	Time	Reading	Comments
PIO	Ø	7:06	0	
MIE	· ·	, ,	0	
PLD		7:30	Ø	Sort Contout
MPC			0.061	
PIO		7.45	0	
MIE			0.044	
PID		8:00	0	
MIR			0.014	
PED		8.15	0	Fush bodart
na4			0,150	
PED		10:00	\mathcal{O}	
mic			0,00	
PIN		12.00	0	
mie			0.013	
Pro		12:11	ء ت ر ر	Start localor
MIA			0.088	
pro		12:30	۵	
mix			0074	
· PLD		14:45	<i>v</i>	Finish low
MKE		/	0.026	
PIO		15,00	\mathcal{D}	gradus,
mie			6,004	activities
PEO		16:06	Û	
mx			0.052	
			· · · · · · · · · · · · · · · · · · ·	
				<u></u>
				·
		<u> </u>		

Project name	LMC-West Lot Site	Site	location	Utica, NY
Project number	AY000265.0003.00001	Well/Boring ID		
G&M Personnel	CC	Da	ate	9/8/55
Instrument	Background	Time	Reading	Comments
PID	0	7:00	0	good book
mie	0		IJ.	4 - 1 - 1
PED		7:15	0.0	
mec			0.042	
PXD		7145	0.0	
MIÉ			0.056	
Ato.		10100	0.0	
MIB			0.077	
PEO		11:00	0.0	
mis-		,	0.008	
PIS		12100	ত	
MIR			0.029	
AID		13:00	0.0	
MIK			0.057	
PIO		14:00	0.0	
MIE			0.092	
pen		15:00	0.0	
MIE			0.026	
PLO		14100	D	
msi			0.008	
pen		17:00	0	
me				
				· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·				

Project name	LMC-West Lot Site	Site	location	Utica, NY	_
Project number	AY000265.0003.00001	Well/Boring ID			····
G&M Personnel	CC	D	ate	9/9/99	_
Instrument	Background	Time	Reading	Comments]
PLD	0	7:00	0		
MIC	- Ep		0,60		
PTD		81.00	Ø	Gradu	
MIR			01062		
NIO		9:00	0		
MIE			6,00		
ATO		10:00	0		
MIKE			0,002		
P20		11:00	ь		
mts			0.007		
P2D		12:00	V		_
MEG			0.005		_
PID		13.00	0		
MIG			0.019	·	
PRO		15.00	0	Soul wood at -	comple loves
MIE			0.021		」 `
PED		17:00	0		_
					_
					_
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Project name	LMC-West Lot Site	Site	location	Utica, NY	
Project number	AY000265.0003.00001	Well/Boring ID			_
G&M Personnel	CC	Da	ate	9/10/95	
Instrument	Background	Time	Reading	Comments	٦
PIN	0	7:00	0	HAZSEL LOOK	ال
MER	0		ω		7
PID		7:15	0.0		7
MIG			0.042		7
PZP		7:70	0.6		
NEE			0.036		7
PEOIMIE		7:45	0/0.021	(gr	
RED/MEE		8:00	0/6.014		
pIDIMIC		8:15	0/0,100]
PIDINTE		8.70	0/0.084	Godin / hackla	<u>U</u> m
PZP/MZE		8:45	1/0.076	<i>11</i> U	
PTO /MIE		9.00	0/0.025		
PIO/MIG		10100	0/0.066		
PZO/MIE		10:30	0/0.021		
DIDINZE		1/200	0/0,011		
PIO/MIE		11:30	0/01076		
PID/MIE		12300	0/0.042		
PIOIMIE		12/230	6/0.009		
P20/mzx		14:45	6/0,002		
PIO/MIR		15,00	0/0.044		
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Appendix - D -

Non-Hazardous Waste Tracking Documents

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LO	
18 A 18	Lother Much Corp	9/7/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	Chr Can	Still to
SITTE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
S	The same was the same of the s	man de ma
Ō.	525 French Rd., Uhra NY 1	ISO CIF-152-7126 Estimate Yards Container Type Container #
A .	WASTE TYPE / PROFILE #	Estimate laids Container Type Container
R	A. Lanton Corl Medico - Charlish	Almithi. HAALL A. D-570
GENERATION	A: Low for Gold Maries - Charles	
ان	B: 150 DWW MY 7	B. B.
السيا		
	Certification - I hereby declare that the contents of this co	onsignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolitio	
	NYCRR Part 364 for which disposal has been approved o	
	disposal of material has been approved and the tracking i	s requested by the Oneida – Herkimer Solid
	Waste Authority. I certify that the above information is t	
	not as I have stated, I will accept the return of the load at	my (generator's) expense.
	The house of the second	1712 7/7/95
	Generatory Signature	Title Date
	The state of the s	
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Burrens Tund	wone
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
X	BUB SERLAMIN	
AULER	DRIVERS SIGNATURE 12	TRAILER NUMBER:
¥	INTERS SIGNATURE!	
	LO DPCUM	B-510
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL: 9/2/60	
	DISPOSAL FACILITY NAME: DISI	POSAL SITE REPRESENTATIVE NAME:
- 	declot do	lyn Olcan
È	WASTE TYPE REQUIVED:	DATE RECEIVED:
	WASTE THE REVEIVED.	1 0/2/20
¥	$\mathcal{M}_{\mathcal{M}}$) 1/9/99
	SCALE FULL / EMI	
SA		GHT: WEIGHT:
DISPOSAL FACILII	NUMBER:	
Sig	DISPOSAL FACILITY CERTIFICATION:	la a salata
	- Milkeau	1000001 9/1/99
	SIGNATURE	TITLE DATE
	The second secon	
	COMMENTS:	

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ONEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

:			
	FACILITY NAME OR ORIGIN OF MATERIAL/ST	REET LOCATION:	DATE:
, i.e.	Locked Martn Con	,	8/30/99
f 1	CONTACT PERSON OR SITE REPRESENTATIVE		TITLE:
	Chris Car		(hall bee
	FACILITY LOCATION/MAILING ADDRESS:		TELEPHONE NUMBER:
18	525 French Rodel When, WASTE TYPE / PROFILE #	NY	
) H	WASTE TYPE / PROFILE #	Estimate Y	ards Container Type Container #
GENERATION SITE	A: Containing ted for the cover - CLO	143) A. 16-1	8 1. Duny 1. B-440
CEN	B: NON HAZ		,
		B	B B
	Contification I havely dealors that the contents	-f this consists and	
	<u>Certification</u> - I hereby declare that the contents and are in fact sewage sludge, construction and d		
	NYCRR Part 364 for which disposal has been ap	proved or which trac	king has been requested. The
	disposal of material has been approved and the tr	racking is requested	by the Oneida – Herkimer Solid
	Waste Authority. I certify that the above inform not as I have stated, I will accept the return of the	ation is true and cori	rect and that it waste shipment is
alslalati (a	1 Majort	IN Sa	0/70/99
	I habled Mah.	July 12	
	Generator Signature Con	Title	/ Date
(TRANSPORTING COMPANY NAME:		AUTHORITY PERMIT NUMBER:
	Burrow Truckers		18/03
	DRIVER'S NAME (PRINT):	· · · · · · · · · · · · · · · · · · ·	TICKET NUMBER:
HAULER	Robert SABDIEMINE		· ·
AU	DRIVERS SIGNATURE:		TRAILER NUMBER:
	Bolyt 3 orbillopin		13-446
	DATE OF SHIPMENT OF COMMENTS:		CONTAINER SIZE / TYPE:
	MATERIAL: 6/20 /56		
	7/30///		Dump dovol.
	DISPOSAL/FACILITY NAME:	DISPOSAL SITE	REPRESENTATIVE NAME:
7	Hak (OCLE)	LUM	2 OCAFel
LII	WASTE TYPE RECEIVED:	- 10	DATE RECEIVED:
ACI		5011	<i>8170199</i>
E I	SCALE FULL	EMPTY	NET
DISPOSAL FACILITY	TICKET WEIGHT: NUMBER:	WEIGHT:	WEIGHT:
SPO	DISPOSAL FACILITY GERAPICATION:		
ă		In las	72/00
[SIGNATURE	1 Callet	
	/ SIGNALURE /	1111	E DATE
	COMMENTS:	<u> </u>	
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(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCAT	ION: DATE: 8/1/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	Chm Can	XX/162
	FACILITY LOCATION/MAILING ADDRESS:	TEVEPHONE NUMBER:
GENERATION SITE	525 French Ree, Utrue, NY	518-425-1856
N. T.	WASTE TVPE / PROFILE #	timate Yards Container Type Container #
NER	A: Contaminated for for Lover A.	17 A tracky A.B-117
8	B: NON-MAZ B.	B . B .
	Certification - I hereby declare that the contents of this consign and are in fact sewage sludge, construction and demolition deb	
	NYCRR Part 364 for which disposal has been approved or whi	ch tracking has been requested. The
	disposal of material has been approved and the tracking is requivered waste Authority. Legitly that the above information is true a	nd correct and that if waste shipment is
	not as Thave stated, will accept the return of the load at my (g	enerator's) expense. 8/70/49
	Mandel with Sty 12	e Date
	Generators Signature Cop. Titl	
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	Brian Lan Ormer	
HAU	DRIVERS SIGNATURE:	TRAILER NUMBER:
	DATE OF SHIPMENT OF COMMENTS:	LCONTAINED SIZE / TVDE:
	MATERIAL:	CONTAINER SIZE / TITE.
	8/30/99	trailer/294
	DISPOSAL FACILITY NAME: DISPOSAI	SITE REPRESENTATIVE NAME:
Ě	WASTE TYPE RECEIVED:	OCCUY DATE RECEIVED:
DISPOSAL FACILITY	50 / ATS/-)	Startes
EA.	SCALE FULL EMPTY	NET
)SA)	TICKET WEIGHT: WEIGHT:	WEIGHT:
ISP(DISPOSAL FACILITY CERTIFICATION:	0/2
	Syn Klay Scale	00 X1099
	SIGNATURE /	TITLE DATE
	COMMENTS:	
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1600 Genesee Street, Utica, NY 13502

(315) 733-1224

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		OR ORIGIN OF MATERI		TION: DAT	E: /_	1
•	Lockhece	Martin Corp	9 ,		8 130/	99
18.		N OR SITE REPRESENTA		TITL	E:	<u> </u>
(m)	1 Chm	Carr	*	سے را	17M/1	(L
in in		ION/MAILING ADDRESS			TELEPHONI	E NUMBER:
NO	5.25 Fre	rch RO, Mus,	NY		518-45	2-1824
) III	WASTE TYPE / PR	OFILE#		Estimate Yards	Container Type	Container #
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E G	B: /	NON-HAZ			*	
	B.	77.0	B	·	B.	В
	Cartification I ha		-44- of this canala			
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	NYCRR Part 364 f	for which disposal has be	een approved or wh	hich tracking h	as been reques	ted. The
•	disposal of materia	al has been approved and	I the tracking is rec	quested by the	Oneida – Herk	imer Solid
	not as I have stated	I certify that the above in d, I will accept, the return	ntormation is true a of the load at my,	and correct au (oénerator's) e	d that it wasie vnense.	shipment is
	11/1/	a agent of	(211)		**/	70/45
	Generators Signatu	re landered Martin	TI TI	tla:		Date
			<i>V</i> · · · ·	de .	. %	Date
	TRANSPORTING C			AUTI	IORITY PERM	IT NUMBER:
	Burrows DRIVER'S NAME (F	Trucking			1811	7
X.				TICK	ET NUMBER	•
HAULER	DRIVERS SIGNATU	HALL		700 47		· .
M H				TRAL	LER NUMBER:	
	DATE OF SHIPMEN	Hall TOF COMMENTS		100	ONTAINER SIZ	
· · · · · · · · · · · · · · · · · · ·	MATERIAL:	OF COMMENTS	•		Jn i ainer bil	E/IYFE:
	8/30	199			1) cmp	25 14
	DISPOSAL FACILIT	TY NAME:	DISPOSA	AL SITE REPRI	ESENTATIVE N	IAME:
54 .	dia	K (ICUA	Le	inn No	211	•
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Sig	Ach ()	KARLER	1/10	-land M	- 1	20190
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DIS	- Agrilo	DARQUE CONTRACTOR		TITLE	_ \$	JY99 DATE
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•				
	FACILITY NAME OR ORIGIN OF MATERIAL/STREE	ET LOCATION:	DATE:	
	Lockheed Martin Corp.	ļ	8/30/7	9
	CONTACT PERSON OR SITE REPRESENTATIVE:		TITLE:	
F-1	Chris Can		SATA S	Ci
I I	FACILITY LOCATION/MAILING ADDRESS:	· · · · · · · · · · · · · · · · · · ·	TÉLÉPHON	E NUMBER:
GENERATION SITE	525 French Rd, Uhra, Ny	/ .		
	WASTE TYPE / PROFILE #	Estimate Ya	ords Container Type	Container #
VER	A: Contemenated soil for cover-CL043	A. 16-18	A. Dump	A. 15-510
E	B: NON-HAZ	19	n a	, ·
<u></u>			1 ·	D
	Certification - I hereby declare that the contents of the	his consignment a	re classified as non-l	hazardous
	and are in fact sewage sludge, construction and demo	olition debris or sp	pecial handling wast	e as defined in
,	NYCRR Part 364 for which disposal has been appro-			
	disposal of material has been approved and the track Waste Apthority. I certify that the above informatio			
	not as Phave stated. I will accept the return of the los	ad at my (generato	r's) expense.	, ,
an and the second	I as agent B	The state of the s	min with the conference of	20/94
	Congress Street martin	Title	The property	Date
	Generators Signature Comp.	/ Time	· -	Date
	TRANSPORTING COMPANY NAME:		AUTHORITY PERM	IT NUMBER:
	Burrows Trucking		No Stick	er
	DRIVER'S NAME (PRINT):		TICKET NUMBER:	
HAULER	BOB SPELLMAN		• •	
TAE	DRIVERS SIGNATURE:		TRAILER NUMBER	:
	Sob Dellan		13-510	
	DATE OF SHIPMENT OF COMMENTS:		CONTAINER SIZ	ZE / TYPE:
	8/20/99		1) hours	a .
	DISPOSAL FACILITY NAME:	DISPOSAL ȘITE I	REPRESENTATIVE I	NAME:
>-	Heat Orman	Lein	Medical	
	WASTE TYPE RECEIVED:		DATE RECEIVED:	
ACI	DIC #73		8/309	9
<u>ب</u>	SCALE FULL	EMPTY	NET	
DISPOSAL FACILIT	TICKET WEIGHT: NUMBER:	WEIGHT:	WEIGHT:	
ISP	DISPOSAL FACILITY CERTIFICATION:	<i>f c</i>		1-1
Ω	Tyre O'Keau	Scaller	Q >	3/99
	SIGNATURE	TITLE	3	DATE
	COMMENTS:			· · · · · · · · · · · · · · · · · · ·
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1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STR	REET LOCATION: DATE	0/2/90
	Lockheed Martin Corp.		1/50/11
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITL	E
压	Christan		11/1/1
SITE	FACILITY LOCATION/MAILING ADDRESS:	2. The second of	PELEPHONE NUMBER:
Ö	525 French RD, Ufren	NY	518-452-7126
Ţ	WINDIE LILE / I ROPINS#	Dalling C 1 at 00.	Container Type Container #
GENERATION	A: Contaminated for for Cra -C	LO43/ A. 16-19	1. lup 1.15 7.70
JEN.			
	B: ////////////////////////////////////	B.	В
	Certification - I hereby declare that the contents o and are in fact sewage sludge, construction and de		
	NYCRR Part 364 for which disposal has been app	roved or which tracking h	as been requested. The
	disposal of material has been approved and the tra	icking is requested by the	Oneida – Herkimer Solid
	Waste Authority. I certify that the above informa not as I have stated, I will accept the return of the	tion is true and correct an	d that it waste snipment is
	a agent	10 01.	2/30/96
	Generators Signature Martin	Title	Date
•	() and		· · · · · · · · · · · · · · · · · · ·
	TRANSPORTING COMPANY NAME:	AUTI	HORITY PERMIT NUMBER:
	Burrows Trucking		18109
· 🕰	DRIVER'S NAME (PRINT):	TICK	ET NUMBÉR:
AULER	William Baxter DRIVERS SIGNATURE:		
HAT			LER NUMBER:
	William Ball		13-490
• • •	DATE OF SHIPMENT OF COMMENTS:	Co	ONTAINER SIZE / TYPE:
	C/2,/99		Dung/16-18:04
	DISPOSAL FACILITY NAME:	DISPOSAL SITE REPR	
			$\sim 2 L_{\odot}$
114	WASTE TYPE RECEIVED:	1 MAG	E RECEIVED:
	WASIE TYPE RECEIVED:	2 7	Clanian
FAC		X_{i}	8100199
T.	SCALE FULL TICKET WEIGHT:	EMPTY' WEIGHT:	NET / WEIGHT:
DISPOSAL FACILIT	NUMBER.		
ISP	DISPOSAL FACILITY CERTIFICATION:		-1.
	ACKEDALLY	Nali DO	- 81.30/99
	SIGNATURE	TITLE	DATE
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	COMMENTS:		

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	LEACH THE ALL OF CHICALOF AND THE COLUMN	N. COR
	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATIO	N: DATE:
•	Lockheed Martin Corp.	83499
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	Chin Can	G01 6
TE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
S		75 75 75 76 7 1
Ó	525 French Rd., Utia, NY	578-456-7826
AT	1	ate Yards Container Type Container #
ER	A: contaminated soul for corn - CLO431 A. 1	418 A. Den 12 A. B-485
GENERATION SITE	1/4/- // 2	
9	B: B B	B B
<u> </u>		
	Certification - I hereby declare that the contents of this consignm	ent are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris	
	NYCRR Part 364 for which disposal has been approved or which	
	disposal of material has been approved and the tracking is request. Waste Authority, I certify that the above information is true and	
4.5	not as Phave stated, I will accept the return of the load at my (ger	nerator's) expense.
•	11 de la sagent de la 1-31	8/20/46
	Loubland Martin Sty 12	* 6/JU/1/
	Generators Signature Corp. Title	Date
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
· · · · · · · · · · · · · · · · · · ·	Burrows Trucking	18110
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
ER		, terms , (entable
HAULER	DRIVERS SIGNATURE:	TRAILER NUMBER:
HA	DRIVERS SIGNATURE:	TRAILER NOWIBER:
	Matt in Court	13 - 483
	DATE OF SHIPMENT OF COMMENTS: MATERIAL:	CONTAINER SIZE / TYPE:
_	Cholas	1) lm p/16-1140
•	X/3V///	- P/-
<u>.</u>	DISPOSAL FACILITY NAME: DISPOSAL S	ITE REPRESENTATIVE NAME:
>	HYGK UCIW MI	n Olean !
Ė	WASTE TYPE RECEIVED:	DATE RECEIVED:
5 1	1.*	8/10/99
FA	SCALE FULL EMPTY	INET
ΑĽ	TICKET WEIGHT: WEIGHT:	WEIGHT:
DISPOSAL FACILIT	NUMBER:	
SSI	DISPOSAL, FACILITY CERTIFICATION:	1 1 1/21
	Deby NAIGUS 100	(1000 8 13)199
	SIGNATURE	TITLE DATE
		<u> </u>
	COMMENTS:	

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		agin of Material/stri Nurtur Corp.	EET LOCATION: E	PATE: 8/30/99
: 1	J / T	SITE REPRESENTATIVE:	Т	TITLE:
[m	Chris Ca			Still fri
SIT	FACILITY LOCATION/M			TELEPHONE NUMBER:
ð.	525 French	Rel, Utur, NY		518-452-7526
ATI	WASTE TYPE / PROFILE	a g	Estimate Yard	
GENERATION SITE		Golfnear CLO	431 129 hm	1. truster 1. 15-514
5	B: <i>NON-</i>	MAZ	В	В В
ļ ;				1
Certification - I hereby declare that the contents of this consignment are classified as non-ha and are in fact sewage sludge, construction and demolition debris or special handling waste NYCRR Part 364 for which disposal has been approved or which tracking has been requested disposal of material has been approved and the tracking is requested by the Oneida - Herking Waste Anthority - T certify that the above information is true and correct and that if waste should be a supported by the content of the load at my (generator's) expense. Generators Signature Composition of the load at my (generator's) expense.				
<u> </u>	TRANSPORTING COMPA	NY NAME:	I A	UTHORITY PERMIT NUMBER:
	Burrows -	Trucking		18108
į,	DRIVER'S NAME (PRINT)); / / · · ·	Т	TCKET NUMBER:
HAULER	JAMES	A. MAJORE	R	
HA	DRIVERS SIGNATURE:	a make	λ	RAILER NUMBER: 13-514
	DATE OF SHIPMENT OF	COMMENTS:	<i>5</i>	CONTAINER SIZE / TYPE:
	MATERIAL! 8/30/99			Trailin/29 km
	DISPOSAL FACILITY NA	ME	DISPOSAL SITE RI	EPRESENTATIVE NAME:
2	Trgk	Cous	Lyn	a Olean
ACILI	WASTE TYPE RECEIVED	Soi		SI 30179
DISPOSAL FACILITY	SCALE TICKET NUMBER:	FULL WEIGHT:	EMPTY WEIGHT:	NET 'WEIGHT:
ISP	DISPOSAL FACILITY CEI	STIFICATION:	,	CI.
	AGXLC	Keauj_	Scalegy	V 430/19
	' / SIGNATU	IRE /	TITLE	DATE
ļ	COMMENTS:			
1		•		



1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:				
	Lochheed Martin Corp. 8/3099				
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:				
F-3	Chus can				
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:				
S	525 French Rel, Utila, NY 518-452-7826				
GENERATION SITE	323 1 conce 10 11100 10 1				
🖟	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #				
1 23	A: Contaminated soul for cover -CLOY31 A. 29 km A. Franca A. B-413				
2					
5	B. NON HAZ				
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous				
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in				
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The				
	disposal of material has been approved and the tracking is requested by the Oneida - Herkimer Solid				
	Waste Authority. I certify that the above information is true and correct and that if waste shipment is				
	not as I have stated I will accept the return of the load at my (generator's) expense.				
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والمعارب والمعارب والمعارب	Generator Signature Corp. Date				
	O Thic				
• • • •	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:				
	Briver's NAME (PRINT): TICKET NUMBER:				
2	DRIVER'S NAME (PRINT): TICKET NUMBER:				
3	Primer Spans				
HAULER	Drivers signature: TRAILER NUMBER:				
H					
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:				
	MATERIAL:				
	875999 Trave				
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:				
>	Lyn Ocair				
CIJ	WASTE TYPE RECEIVED: DATE RECEIVED:				
5	Kn (A) 8/25/99				
FA	100				
-	SCALE FULL EMPTY NET TICKET WEIGHT: WEIGHT:				
SA	3 m / m / m / (20197)				
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OIS					
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	SIGNATURE DATE DATE				
	COMMENTS:				

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		and a section of the	
	FACILITY NAME OR ORIGIN OF MATERIAL		oh loo
	borkheed Martin Co		8/50/77
	CONTACT PERSON OR SITE REPRESENTATI	VE: TITLE:	7/10
i pa	Chus Can		M/h Sen
SITE	FACILITY LOCATION/MAILING ADDRESS:		TELEPHONE NUMBER:
ON	525 French Rel, Whe	a, N.7.	518.452-7826
¥	WASTE TYPE / PROFILE #		ontainer Type Container #
GENERATION	A: Contaminated sort for w	x-CL0431 A. 16-1944 A.	1) unf 1 100
	B: 5 NOW-HAZ	В. В.	n la
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	Certification - I hereby declare that the conter	its of this consignment are classi	fied as non-hazardous
	and are in fact sewage sludge, construction an	d demolition debris or special ha	ndling waste as defined in
	NYCRR Part 364 for which disposal has been disposal of material has been approved and the		
	Waste Authority. I certify that the above info	rmation is true and correct and	hat if waste shipment is
	not as I have stated, I will accept the return of	the load at my (generator's) exp	ense.
	I tockrew	1/1/2	8/10/97
	Generators Signature Murfin	Title	/ Date
	TRANSPORTING COMPANY NAME:	OHTUA	RITY PERMIT NUMBER:
			112 12 1
F	Kunny Janehan	/n.	18/09
~	DRIVER'SNAME (PRINT):	Lo. TICKET	NUMBER:
LER		Lo. TICKET	NUMBER:
HAULER	DRIVER'SNAME (PRINT):		R NUMBER:
HAULER	DRIVER'S NAME (PRINT): DRIVER'S SIGNATURE:	TRAILE	RNUMBER: B-470
HAULER	DRIVER'S NAME (PRINT): DRIVER'S SIGNATURE: DATE OF SHIPMENT OF COMMENTS:	TRAILE	R NUMBER: D-4/0 TAINER SIZE/TYPE:
HAULER	DRIVER'S NAME (PRINT): DRIVER'S SIGNATURE:	TRAILE	R NUMBER: D-4/0 TAINER SIZE/TYPE:
HAULER	DRIVER'S SIGNATURE: DATE OF SHIPMENT OF COMMENTS: MATERIAL: 8/3/99	TRAILE	RNUMBER: B-470 TAINER SIZE/TYPE:)WYP/16-1840
HAULER	DRIVER'S NAME (PRINT): DRIVER'S SIGNATURE: DATE OF SHIPMENT OF COMMENTS:	DISPOSAL SITE REPRES	TAINER SIZE / TYPE: OUTP / 16 / Fyre ENTATIVE NAME:
	DRIVERS SIGNATURE: DATE OF SHIPMENT OF COMMENTS: MATERIAL: DISPOSAL FACILITY NAME:	DISPOSAL SITE REPRES	ER NUMBER: B-470 TAINER SIZE/TYPE:)WYP/16-1840 ENTATIVE NAME:
	DRIVER'S SIGNATURE: DATE OF SHIPMENT OF COMMENTS: MATERIAL: 8/3/99	DISPOSAL SITE REPRES	TAINER SIZE / TYPE: OUTP / 16 / Fyre ENTATIVE NAME:
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	DRIVER'S NAME (PRINT): DRIVER'S SIGNATURE: DATE OF SHIPMENT OF COMMENTS: MATERIAL: DISPOSAL FACILITY NAME: WASTE TYPE RECEIVED: SCALE TICKET FULL WEIGHT:	DISPOSAL SITE REPRES	ER NUMBER: B-470 TAINER SIZE/TYPE:)WYP/16-1840 ENTATIVE NAME:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lockheed Martin Corp.	8/ /99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
<u> </u>	Chris Carr	Spl su
SIT	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
NO	525 French Rel., Uhea, NY	518-452-7824
LT.	WASTE TYPE / PROFILE # Estimate	Yards Container Type Container #
GENERATION SITE	A: Contaminated Soil for Guer-CL0431 A. 241	1x Atriba AB-12
SE SE	B: Non-Haz B.	
		8
	Certification - I hereby declare that the contents of this consignment	are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or	
	NYCRR Part 364 for which disposal has been approved or which tradisposal of material has been approved and the tracking is requested	
	Waste Authority. I certify that the above information is true and cor	rect and that if waste shipment is
	not as Thave stated. I will accept the return of the load at my (genera	
	(I mayert B) (An) la	8/30/49
	Generators Signature Corp.	Date
	Same Alexander and the second of the second of the second	
4	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	BURROWS Trucking DRIVER'S NAME (PRINT):	18/13
×	DRIVER'S NAME (PRINT):	TICKET NUMBER:
II.	DRIVERS SIGNATURE:	
HAULER	DRIVERS SIGNATURE:	TRAILER NUMBER:
	Team Alle	t-521
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	DATE OF SHIPMENT OF COMMENTS:	
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	MATERIAL 9/39/99	
	MATERIAL. 9/30/99 DISPOSAL FACILITY NAME: DISPOSAL SITE	TYULL - 25 for REPRESENTATIVE NAME:
	MATERIAL. 130/99 DISPOSAL FACILITY NAME: DISPOSAL SITE	TYULL - 25 for REPRESENTATIVE NAME:
CILITY	MATERIAL. 9/30/99 DISPOSAL FACILITY NAME: DISPOSAL SITE	trails - 25 for REPRESENTATIVE NAME:
FACILITY	MATERIAL. 1/30/99 DISPOSAL FACILITY NAME: DISPOSAL SITE HIGH LOW LENGTH WASTE TYPE RECEIVED:	trails - 25 for REPRESENTATIVE NAME:
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DISPOSAL FACILITY	DISPOSAL FACILITY NAME: DISPOSAL SITE CHANGE WASTE TYPE RECEIVED: SCALE FULL WEIGHT: NUMBER: DISPOSAL FACILITY CERTIFICATION: CHANGE CHANGE SCALE FULL WEIGHT: W	TYULL 25 for REPRESENTATIVE NAME: OCACL DATE RECEIVED: SIGNED I NET

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ONEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

		FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
		bother Mati Corp. 8/30/91
	,	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
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æ.	SITE	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
	NO	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
	ATT	
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	•••	Configuration V house videologic that the configuration of this configuration along God on non-horsed and
		<u>Certification</u> - I hereby declare that the contents of this consignment are classified as non-hazardous and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	• •	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
		disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid Wayte Authority. I certify that the above information is true and correct and that if waste shipment is
		not as I have stated. I will accept the return of the load at my (generator's) expense.
	مسومميون والمستراد	1 1 Gaginto (1)
		Generators Signature Marky UTitle Date
		Corp
		TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
		DRIVER'S NAME (PRINT): TICKET NUMBER:
.	ER	
	HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
	H /	
l		DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
		MATERIAL:
	!	8/30/99 Dup/14-114-5
	•	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
ſ	>	Tryk Cous Lynn Olean
	1	WASTE TYPE RECEIVED: DATE RECEIVED:
	DISPOSAL FACILIT	500 8130199
	L E.	SCALE FULL EMPTY NET
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	SPC	DISPOSAL FACILITY CERTIFICATION:
	ă	Ster 1) Long Malen No X30/90
_		SIGNATURE TITLE DATE
		COMMENTS:
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	FACILITY NAME OR ORIGIN OF MATERIAL/ST		
	CONTACT PERSON OR SITE REPRESENTATIVE	1 TITLE:	
	Christia	" Soll Soll Soll Soll Soll Soll Soll Sol	E.
TTE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE	NUMBER:
NO	Set French Rd, Utra	NY 1302 518-452	-7824
ATI	WASTE TYPE / PROFILE # A: Conta, Soul Cor Cora-C	Estimate Yards Container Type	Container #
GENERATION SITE		672131 ALG=11 A. Ump	(1) (A)
3	B: NON-HAZ	В. В.	
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	Certification - I hereby declare that the contents and are in fact sewage sludge, construction and declare that the contents are in fact sewage sludge, construction and declare that the contents are in fact sewage sludge, construction and declare that the contents are in fact sewage sludge, construction and declare that the contents are in fact sewage sludge, construction and declare that the contents are in fact sewage sludge, construction and declare that the contents are in fact sewage sludge, construction and declare that the contents are in fact sewage sludge, construction and declare that the contents are in fact sewage sludge, construction and declare that the contents are in fact sewage sludge, construction and declare that the contents are in fact sewage sludge, construction and declare the contents are in fact sewage sludge, construction and declare the contents are in fact sewage sludge, construction and declare the contents are in fact sewage sludge, construction are in fact sewage sludge.		
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	disposal of material has been approved and the t Waste Authority. I certify that the above inform		
	not as I have stated, I will accept the return of th		1
	In white	(11/1/ SI	199
	Generators Signature Mentin	Mille B	ate
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT	NUMBER:
	DRIVER'S NAME (PRINT):	TICKET NUMBER:	
AULER	WALTER J. CAREY		
HAU	DRIVERS SIGNATURE	TRAILER NUMBER:	
	Matter & Carry	R- YFT	A POX POPPS
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE	TYPE:
	8/20/55	1 harp 16	· /
	The state of the s		† <i>V</i>
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¥]	High acres	Lynn deaux	ME:
CILITY		DISPOSAL SITE REPRESENTATIVE NA AUDITORIO DATE RECEIVED:	ME:
FACILITY	High acres	Lynn deaux	ME:
SAL FACILITY	WASTE TYPE RECEIVED: SCALE TICKET FULL WEIGHT:	150 DATE RECEIVED:	ME:
ISPOSAL FACILITY	WASTE TYPE RECEIVED: SCALE FULL	150 B/30/99 EMPTY NET	ME:
DISPOSAL FACILITY	SCALE TICKET NUMBER:	150 B/30/99 EMPTY NET	ME:
DISPOSAL FACILITY	SCALE TICKET NUMBER:	Ayn dauf DATE RECEIVED: 750 8/30/99 EMPTY WEIGHT: NET WEIGHT:	ME: 3/27 ATE
DISPOSAL FACILITY	WASTE TYPE RECEIVED: SCALE TICKET NUMBER: DISPOSAL FACILITY CERTIFICATION: HULL WEIGHT: NUMBER: DISPOSAL FACILITY CERTIFICATION:	Ayn dauf DATE RECEIVED: 750 8/30/99 EMPTY WEIGHT: Ralioper St	30/99

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	Lochheul M	GIN OF MATERIAL/STR	EET LOCATION:	DATE: F/30/	100
	CONTACT PERSON OR SIT			TITLE:	1/
•	Ch Car			1/1/11	ei
SITE	FACILITY LOCATION/MA	ILING ADDRESS:		TELEPHONI	E NUMBER:
NO	525 French	Re, When, 1	uy 13502	115-45	2-7526
GENERATION	I WASLE LILE / I ROTHE #		. Batimate sai	rds Container Type	Container#
NEF	A: Continuated		0431 A. 15	A. frala	ABTIL
5	B: NON -	MAZ	B	B	В
	Certification - I hereby dec				
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	disposal of material has be Waste Authority. I certify				
	not as I have stated, I will a				1 1
	Hendi	- geother S	MISE	8/	30/11
	Generators Signature	Martie Corp.	Title		Date
	TRANSPORTING COMPAN			AUTHORITY PERM	IT NUMBER:
	DRIVER'S NAME (PRINT):	When		TICKET NUMBER:	
LER	Drias.	M_{∞}		Helias Hollas	
HAULER	DRIVERS SIGNATURE:/	Li		TRAILER NUMBER:	
	Mr yu	Vu _		13-115	
	DATE OF SHIPMENT OF MATERIAL;	COMMENTS:		CONTAINER SIZ	E/TYPE:
	P/30/95			Trank	27
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2	WASTE TYPE RECEIVED:	O	Lynn	DICOLLY DATE RECEIVED	<i>)</i>
	WASTE TYPE RECEIVED:		20	DATE RECEIVEDY	
FAC	SCALE	FULL	EMPTY	93)/99 I NET	
DISPOSAL FACILITY	TICKET	WEIGHT:	WEIGHT:	WEIGHT:	
SPO	NUMBER: DISPOSAL FACILITY CERT	TESCATION:	$1 - \rho$		
Ä	Land Da	eaus	1000	Der ;	77/9
	SIGNATUR		TITLE		DATE
	COMMENTS:				
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ONEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT

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•		,
	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE: 20/25
	Loraheed Mayon lorp	8/30/79
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
<u>u</u>	Chris Carr	(HI) M.
SIT	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
NO N	525 French Rd, Mra, NY 13502	818-452-7024
ATT	WASTE TYPE/PROFILE# A: Lonfan worted Silfo Gova - CLO431 A. 16-18	rds Container Type Container #
IER.	A: Contam morted Sol for Cova. CLO431 A. 16-11	1. Duy 1. 15450
GENERATION SITE		
	B: NON-HAZ. B.	B B
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	Certification - I hereby declare that the contents of this consignment a and are in fact sewage sludge, construction and demolition debris or sp	
	NYCRR Part 364 for which disposal has been approved or which track	king has been requested. The
	disposal of material has been approved and the tracking is requested h	
٠.	Waste Authority. I certify that the above information is true and corr not as I have stated, I will accept the return of the load at my (generate	
	1 de l'escayent 8 12/16	2/30/95
	Generators Signature	Date
	1 (mys o losp.	
1.	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	BUTTONS TMICKINS DRIVER'S NAME (PRINT):	1011/
es l	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	DRIVERS SIGNATURE:	TRAILER NUMBER:
H	DRIVERS SIGNATURE:	R-1/CO
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL;	
	8/30/99	1 Dump /16-18
	DISPOSAL FAGILITY NAME: DISPOSAL SITE I	REPRESENTATIVE NAME:
	High Long Lyn	1 Okacy
Ę	WASTE TYPE RECEIVED:	DATE RECEIVED
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FA	SCALE FULL EMPTY	NET /
DISPOSAL FACILIT	TICKET WEIGHT: WEIGHT:	WEIGHT:
PO	NUMBER!	
S	DISPOSAL FACILITY CERTIFICATION:	
A		
Α	Deputation Sale of	D 8/30/99
Δ .	SIGNATURE SCALE OF TITLE	9.3)99 DATE
<u> </u>	COMMENTS:	SANGO DATE

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	ORIGIN OF MATERIAL	66 B. J. B. B. D. T. T. T. T. T. B. B.	DATE:
CONTACT PERSON	Martin large OR SITE REPRESENTATI	VE:	TITLE
1 -1 -		VE.	Challe
Chron Ca	N/MAILING ADDRESS:		TELEPHONE NUM
525 Frei	ch RD Utri	a NY 13502	Yards Container Type Co
WASTE TYPE/PROF	ILE#	Estimate	Yards Container Type Co
A: Contamin	the Red, Utre. Jed Soil for Cox	4-(104) 1	E A Dung A.C
	NON-HAZ		
		B.	
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			special handling waste as d
			cking has been requested. I
			by the Oneida – Herkimer
			rect and that if waste ships
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Generators Signature	wanter loss	Title	Date
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DRIVER'S NAME (PR	1 Trucking INT): CLIMPN E: Significan		TICKET NUMBER:
DRIVER'S NAME (PR	1 Trucking INT): ELMAN E:		TICKET NUMBER: TRAILER NUMBER: 17-510
DRIVER'S NAME (PR	I Trucking INT): ELLIN AN E: OF COMMENTS:	/ DISPOSAZ SITE	TICKET NUMBER: TRAILER NUMBER: 17-510
DATE OF SHIPMENT MATERIAL: DISPOSAL FACILITY.	I Trucking INT): ELL IN DN E: Displana OF COMMENTS: NAME:	DISPOSAL SITE	TICKET NUMBER: TRAILER NUMBER: 1-5/0 CONTAINER SIZE/TY REPRESENTATIVE NAME
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E ...

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(315) 733-1224

			L/STREET LOCAT	ION: DATE		10-
Lock	reed N	Aurhi Co EREPRESENTAT	Zp.		8/30	/77
CONTACTE	RSON OR SIT	E REPRESENTAT	IVE:	TITL		
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		LING ADDRESS:		· · · · · · · · · · · · · · · · · · ·	TELEPHON	E NUMBER:
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TRANSPORTI		<i>•</i>			1811) 1	III NUMBER
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1 Wi	lleam	bello		13	190	
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MATERIAL:					Λ	11.16
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Myr	SIGNATUR	E	<u> Ka</u>	TITLE	<u> </u>	DATE
COMMENTS:	SIGNATUR	E	<u>JCa</u>	TITLE	<u>Or</u>	DATE

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FACILITY NAME OF	ORIGIN OF MATERIAL	STREET LOCATION:	DATE:	
	marko los		8/30/	99
CONTACT PERSON	OR SITE REPRESENTATI	VE:	TITLE:	
FACILITY LOCATIO	N/MAILING ADDRESS:	114 1750		NE NUMBER:
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disposal of material l Waste Authority, Tc	which disposal has been las been approved and the entity that the above info will accept the return of as a gentle the coefficients.	e tracking is requested rmation is true and co	by the Oneida – Her rect and that if wast ntor's) expense.	rkimer Solid
TRANSPORTING CON	ons Truckers		AUTHORITY PERI	MIT NUMBER:
DRIVER'S NAME (PR	INT):		TICKET NUMBER	
DRIVERS SIGNATUR	5 H WADO	<u>12 = 5 2</u>	TRAILER NUMBE	R:
Sem	of Wordn	l		
DATE OF SHIPMENT MATERIAL:	OF COMMENTS:		CONTAINER SI	
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DISPOSAL FACILITY	CERTIFICATION:	Scal	8 90	13/99
SIGN	ATURE	1111	Lit.	DATE

1600 Genesee Street, Utica, NY 13502

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lochheid Martin loss	8/30/39
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
·	Chair Can	and be
SITE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
S NO	525 Franch Hel, Ut/La, Ny 1750 WASTE TYPE/PROFILE# Estimate	2 511-452-7124
Ţ,		
GENERATION	A: leptemented Soil G- cover-CLO431 A. 21th	1 A July 1 0-521
E	B: N62 -MAZ B.	B B
	Certification - I hereby declare that the contents of this consignmen	t are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or	
	NYCRR Part 364 for which disposal has been approved or which tr disposal of material has been approved and the tracking is requested	
	Waste Authority. Leertify that the above information is true and co	rrect and that if waste shipment is
	not as I have stated, I will accept the return of the load at my (gener	ator's) expense.
	11 18 1 1 10 10 10 1 1 1 1 1 1 1	- 8/10/59
	Generators Signature Warting With	Date
	Same Cub.	
-	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Burraus Trucking	18115
.	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	Francis KITEHEN	
DY]	DRIVERS SIGNATURE:	TRAILER NUMBER:
	Francis Killians	B-52/
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE;
	MATERIAL:	261 -1
	8/30/59	67 ph Water
	DISPOSAL FACILITY NAME: DISPOSAL SIT	É REPRESENTATIVE NAME:
2	High acres Lyr	in Olcary
	WASTE TYPE RECEIVED:	DATE RECEIVED: /
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SIG	DISPOSAL FACILITY CERTIFICATION:	5/21/02
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	COMMENTS:	
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE: / /
	Lochhed Marke Corp.	P/30/95
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
E	Chris Can	JAM Ja
SIT	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
ŏ	525 Franch Rd, Uhra, NY 13502	518-452-7824
GENERATION SITE	WASTE TYPE / PROFILE #	Yards Container Type Container #
NE	A: Continuented soul for cover-CL0431 A. 15	A. TYME A.D. 413
5	B: NUN-HAZ	В.
	Certification - I hereby declare that the contents of this consignment	are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or NYCRR Part 364 for which disposal has been approved or which tra	
	disposal of material has been approved and the tracking is requested	by the Oneida - Herkimer Solid
	Waste Authority. I certify that the above information is true and cornor as I have stated, I will accept the return of the load at my (general	
	1 le l'arust 9	2/21/ar
	Generators Signature / Kifle	Dage
ب	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
3		I I I CRET NUMBER:
CE	Rann Sanal	TICKET NUMBER:
AULER	DRIVERS SIGNATURE:	TRAILER NUMBER:
HAULEI	Being Sequer Drivers signature:	
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W	MATERIAL: DISPOSAL FACILITY NAME: WASTE TYPE RECEIVED: DISPOSAL SITE OLD EMPTY O	TRAILER NUMBER: CONTAINER SIZE / TYPE: REPRESENTATIVE NAME: DATE RECEIVED: NET
W	MATERIAL: DISPOSAL FACILITY NAME: WASTE TYPE RECEIVED: DISPOSAL SITE	TRAILER NUMBER: CONTAINER SIZE / TYPE: REPRESENTATIVE NAME: DATE RECEIVED: 8/30/49
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION	: DATE:
	Lockroed Marken lasp.	8/30/95
į	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
<u> </u>	CONTACT PERSON OR SITE REPRESENTATIVE:	THE CLAD C
	Mrscar	1000 30
	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
S	525 Franch Rd, Uhra, N1 13502	1 518-452 7826
9		te Yards Container Type Container #
3		10 1 3-470
ENERATION SITE	A: contaminated solfer cova - CLO431 A. 16	A. Maria A. To
	strand din o	
i i	B: 10010 - 1411 E B	B
1	Certification - I hereby declare that the contents of this consignment	nt are classified as non-hazardous
व ्	and are in fact sewage sludge, construction and demolition debris of	
1	NYCRR Part 364 for which disposal has been approved or which to	
	disposal of material has been approved and the tracking is requeste	
	Waste Authority. I certify that the above information is true and c	
	not as I have stated, I will accept the return of the load at my (gene	rator's) expense.
, 1	Localied Wark- Stiff Sa	8/10/99
	Generators Signature 1000. Title	Date
· ·	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Burrows Trucking	18104
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	Kick Recons	
5	DRIVERS SIGNATURE:	TRAILER NUMBER:
72	DAG DAG DEGINE OLD	
		COMMITTEE OF THE PROPERTY OF T
	DATE OF SHIPMENT OF COMMENTS: MATERIAL:	CONTAINER SIZE / TYPE:
	8/30/65	16-17-96 has
	DISPOSAL FACILITY NAME: DISPOSAL SIT	TE REPRESENTATIVE NAME:
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E	WASTE/TYPE RECEIVED:	DATE RECEIVED:
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, AC	Le la companya de la companya della companya de la companya della	0/2/99
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1	My Drawy Roles	2DV 2130199
	SIGNATURE	TLE DATE
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	COMMENTS:	

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-	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	
2 - 1 4	Lockheed Martin Corp.	8/24/59
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
63	Com Can	(lash fer
111	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
GENERATION SITE	525 French Red, Utica, NY 13502	
	WASTE TYPE / PROFILE # Estimate	Yards Container Type Container #
ERA	A: Contaminated soil for cosa. CL0431 A. M.	44 A Die as 4 A B-440
EN		1/1 / A 7 1 / a 1 1 1
9	B: #10N - HAZ B.	В. В.
	Certification - I hereby declare that the contents of this consignmen	
	and are in fact sewage sludge, construction and demolition debris of NYCRR Part 364 for which disposal has been approved or which tr	
	disposal of material has been approved and the tracking is requested	
	Waste Authority. I certify that the above information is true and co	rrect and that if waste shipment is
·	not as I have stated, will accept the return of the load at my (gener	ator's) expense.
	1 Sent on Selling	8/24/97
\$e ² , ←	Generators Signature Lasifield Martin Title	Date
	PRANSPORTING-COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Frank Brownie Toucking	1X 10H
~	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	Roy Kill a rabellaria	
IAU	DRIVERS SIGNATURE:	TRAILER NUMBER:
"		13.440
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL:	h hard
	DISPOSAL FACILITY NAME: 7 DISPOSAL SIT	E REPRESENTATIVE NAME:
-	DISPOSAL SIT	/ / /
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II.	WASTE TYPE RECEIVED:	DATE RECEIVED:
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1	SCALE FULL EMPTY TICKET WEIGHT: WEIGHT:	WEIGHT:
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ISPOSA	NUMBER:/ DISPOSAL FACILITY CERTIFICATION:	
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DISPOSA		DE 8/20/99 TE DATE
DISPOSA	DISPOSAL FACILITY CERTIFICATION:	De 8/21/99 DATE

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	FACILITY NAME OR O		STREET LOCATIO		1. 1. 1.	
	Loubherd Ma				8/26/9	7
	CONTACT PERSON OR	SITE REPRESENTATIV	/E:	TITLE:		
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E	FACILITY LOCATION/M				TELEPHON	T
SZ	525 French	Rdy Utica, A	N 13502		1 1 T.	
92	I Waste tode / Domett x	. #	Cotion	ate Yards C	ontainer Type	Container #
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GENERATION SITE	ASCONTUNINATO	Sour for cover	A. I/	A.	punp	A 1) 1 2
8	B: NON	- HAZ				iù.
التحا						
	Certification - I hereby of	Indiana that the conten	to of this consignment	ent are classi	God as non-l	azardone
,	and are in fact sewage sl					
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	disposal of material has					
	Waste Authority. I certi not as I have stated, I wi					shipment is
	Hot as I have stated, I	u accept inc return of	Me wat at my (gen	Claws of Cal		12/162
		A. T. Carlotte	Title	<u> </u>	<u> </u>	24/9°
	Genérators Signature		/ Title			Date
	TRANSPORTING COMPA	NY NAME:		AUTHO	RITY PERM	IT NUMBER:
	Burrous	Trucking			Y104	
	DRIVER SNAME (PRINT	<u>)</u>		TICKE	T NUMBER:	
HAULER	Ticker !	3-0				
[AU	DRIVERS SIGNATURE:	<u> </u>		TRAIL	ER NUMBER	
					11273	ノ
	DATE OF SHIPMENT OF	COMMENTS:		CON	TAINER SIZ	E/TYPE:
	MATERIAL:			7.		CIF
	of tuly				Comp. /2	
	DISPOSAL FACILITY NA	ME:	DISPOSALS	ITE REPRES	ENTATIVE I	NAME:
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NAT.	TICKET	WEIGHT:	WEIGHT:		WEIGHT:	
O ₀	NUMBER:					
DIS	DISPOSAL FACILITY CE	RTIFICATION:	0			,
	BUKE Y	acus	Cal	(DI	5/4	U199_
	SIGNATI	JRE /	T	ITE		DATE
	COMMENTS:				<u> </u>	

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ONEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT

1600 Genesee Street, Utica, NY 13502

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•	
	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockheed Martin Corp. 8/26/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
F-3	Chris Can State REPRESENTATIVE: TITLE:
T	FACILITY LOCATION/MAILING ADDRESS: PELEPHONE NUMBER:
GENERATION SITE	S25 French Rd, Utica, WY 13502 S18-482-7820 WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
YER	A: contuminated softwood CLO431 A.16-18 ADNAP AD-190
56	B: NON-HNZ B. B. B.
	B. B. B.
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
1	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
1	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
·	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid Waste Authority. I certify that the above information is true and correct and that if waste shipment is
	not as I have stated, I will accept the return of the load at my (generator's) expense.
	1 Mayor (100 Shelps
	Generators Signature / reliqued / Title Date
	murky ar
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	DUNGUNS Frucky 6A-108 DRIVER'S NAME (PRINT): TICKET NUMBER:
×	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
HAT	
	Bill 15 aut 13-490
<u> </u>	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL: 26-99 Du. W/25401
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
· · · · · · · · · · · · · · · · · · ·	$ \mathcal{A} / \mathcal{A} = \mathcal{A} / \mathcal{A} $
Ĭ.	WASTE TYPE RECEIVED: LYNN (CALLY) WASTE TYPE RECEIVED:
	WASTE THE RECEIVED:
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1	SCALE FULL EMPTY NET VEIGHT: WEIGHT:
DISPOSAL FACILIT	NUMBER:
ISP /	DISPOSAL FACILITY CERTIFICATION:
Α	Party Okious Acoleone 8/2/0/99
 -	SIGNATURE DATE
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	TO THE THORNE STREET AND THE RESIDENCE AND THE PROPERTY OF THE

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lorder Marki Corp	8/30/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	The Can	Stoll Ser
SITE	FACILITY LOCATION/MAILING ADDRESS:	PELEPHONE NUMBER:
NS	525 Freich ad, Utun, NY 13502	515-112-7116
# OL	WASTE TYPE / PROFILE # Estimate	
GENERATION	A: Contaminated soil for cover - CLO43/ 129t	1 trails 1 B/13
EN		
<u> </u>	B: NON-HO	B. B.
	Certification - I hereby declare that the contents of this consignment	are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or	special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tradisposal of material has been approved and the tracking is requested	
	Waste Authority. Veertify that the above information is true and con	
	not as I have stated, I will accept the return of the load at my (genera	
	Le for Contract mak Staller	8/50/95
,	Generators Signature Corp.	Date
	The state of the s	
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Isomows fruiting	18/01
2	DRIVER'S NAME (PRINT):	TICKET NUMBER:
IAULER	Dryan Van Ormer	
I I	DRIVERS SIGNATURE	TRAILER NUMBER:
	Juan Ju Vind	10-113
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL:	아마산 하시 마음을 받았다. 이
	DISPOSAL FACILITY NAME:	
	litation of the second of the	E REPRESENTATIVE NAME:
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LITY	litation of the second of the	
ACILITY	Will Darley	Sal
FACILITY	Wigh Acres Landfill Paula WASTETYPE RECEIVED:	DATE RECEIVED: NET PAGE PAGE
SAL FACILITY	Waste Type RECEIVED: SCALE TICKET WEIGHT: WEIGHT:	DATE RECEIVED:
POSAL FACILITY	Wash fores hardfill fau a waste type received: SCALE TICKET NUMBER: WEIGHT: WEIGHT:	DATE RECEIVED: NET PAGE PAGE
DISPOSAL FACILITY	Waste Type RECEIVED: SCALE TICKET WEIGHT: WEIGHT:	DATE RECEIVED: NET PAGE PAGE
DISPOSAL FACILITY	Waste Type Received: SCALE TICKET NUMBER: DISPOSAL FACILITY OF RIFICATION: WASTE TYPE RECEIVED: FULL WEIGHT:	DATE RECEIVED: 8/31/99 NET/WEIGHT: 8/31/99
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		RIGIN OF MATERIAL/STREET I	LOCATION: DAT	TE:
<u>ቅ</u>	CONTACT PERSON OR	Many Corp. SITE REPRESENTATIVE:	10 Vac	1/30/79
) 1	CONTACT PERSON OR	SHE REPRESENTATIVE:	TIT	
	FACILITY LOCATION/N	MAILING ADDRESS:		TEACHONE NUMBER:
N SI			817	TEBEL HOME HOMBER.
	WASTE TYPE / PROFILE	Ad, When NY 13	Estimate Yards	Container Type Container #
GENERATION SITE	In the house tol	100 for cover CL043	1 x 16-18	A. d. 1 A. B. 440
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9	B: No	n-Hay	– B	ВВ
The state of the s				
		declare that the contents of this outge, construction and demoliti		
	NYCRR Part 364 for wh	ich disposal has been approved	or which tracking	has been requested. The
	disposal of material has	been approved and the tracking ify that the above information is	is requested by the	e Oneida – Herkimer Solid
		Paccept the return of the load a		
See		Lord Mutin (h	11/21	8/30/99
	Generators Signature	Comes.	Title	Date
	TRANSPORTING COMP	ANV NAME	LATIT	HORITY PERMIT NUMBER:
	Burrens	anginami.		18103
	DRIVER'S NAME (PRINT):	TIC	KET NUMBER:
HAULER	Report	nimaldo		
HAU	DRIVERS SIGNATURE:			ILER NUMBER:
	Polled 30d	Went	<u> </u>	B-440
	DATE OF SHIPMENT OF MATERIAL:	COMMENTS:	C	ONTAINER SIZE / TYPE:
	6/30/91			dup 16.1141
	DISPOSAL FACILITY NA	ME: DIS	SPOSAL SITE REPI	ESENTATIVE NAME:
	High Hay	i throps	10.1/2	Mhisison
11:3	WASTE TAPE RECEIVED); (A12)(1)	DAT	ERECEIVED:
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DSAL F.	TICKET	FULL EM WEIGHT: WE	PTY CIGHT	NET WEIGHT:
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	FACILITY NAME OR O		FREET LOCATION:	DATE:
	hotherd !	Mah Cro		8/30/99
	CONTACT PERSON OR			TITLE:
ы	Chu Car			Jagg Ja
SIT		MAILING ADDRESS:	and the second s	TELEPHONE NUMBER:
<u>ō</u>	525 French	Rol, Utua, N)	13502	S/8-452-7626 ards Container # Container #
1	WASTE TYPE / PROFIL	E#	Estimate Y	
GENERATION SITE	A: Contamonates	substant Cl	047) A.16-17	1. Darry 1. 17.496
5	B: NO	V-plas		
			B.	B. B.
	Cartification - I hereby	lociare that the contents	of this consignment a	re classified as non-hazardous
	and are in fact sewage s	udge, construction and	demolition debris or sp	pecial handling waste as defined in
				king has been requested. The
				y the Oneida – Herkimer Solid ect and that if waste shipment is
	not as have stated, I wi	ll accept the return of th		
		cheed make	Chill Cir	8/70/99
	Generator Signature	Con Con	Title	Date
	TRANSPORTING COMP	<u>al alleria de la companie de la com</u>		AUTHORITY PERMIT NUMBER:
<u> </u>	1 ~			1010 3
	DRIVER'S NAME (PRINT	Muchy-		TICKET NUMBER:
ER	1	7 L		
AULER	DRIVERS SIGNATURE:	>d XTV		TRAILER NUMBER:
=	William	Tall		B-490
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(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lochheed Martin Corp. 8/30/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
- C	Chris Can Still Sui
₹ E	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
ž	525 French Rd, Uhu, NY 13502 SIE-452-7526
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	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal-of-material has been approved and the tracking is requested by the Oneida - Herkimer Solid
	Waste Authority. I certify that the above information is true and correct and that if waste shipment is
ف استق ام دورو این	not as thave stated I will accept the return of the load at my (generator's) expense.
	Lockhard Alartin Stoff for 8/10/99
	Generator Signature Corp. W Title Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
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HAI	DRIVERS SIGNATURE: TRAILER NUMBER:
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	CONTACT PERSON OR SITE REPRESENTATIVE:	8/30/99 TITLE: (Jall Ge)
	Jam Can	Staff Sei
SITE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
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TAULER	DRIVERS SIGNATURE:	TRAILER NUMBER:
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/1600 Genesee Street, Utica, NY 13502

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,	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
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· · ·	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
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	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
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	Waste Authority. A certify that the above information is true and correct and that if waste shipment is
	not as I have stated, I will accept the return of the load at my (generator's) expense.
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ا يم ا	DRIVER'S NAME (PRINT): TICKET NUMBER:
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HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
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ION	525 French Rd., Utra, Ny 135 WASTE TYPE/PROFILE#	62 518 452 - 7876 Estimate Yards Container Type Container #
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GE C	B: NOW-May	в. В. В.
•	Certification - I hereby declare that the contents of this consi	ignment are classified as non-hazardous
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	Lochhed murtin 10/13	Ju: 0/30/17
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	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Burrow Trucking DRIVER'S NAME (PRINT):	18/04
æ	DRIVER'S NAME (PRINT):	TICKET NUMBER:
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HA		TRAILER NUMBER:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE: 0/2 /66
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	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE: (1 10 C
(a)	Chi Can	Shill In
	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
GENERATION SITE	525 French Rd ahn, NY NO	218-425 X1C
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ag	B. 111N-1442	В. В.
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AUI	DRIVERS SIGNATURE:	TRAILER NUMBER:
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•	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE: 0/2 /c.
•	Lockherel Manda corp.	1 8/30/39
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டி	Chris Can	Stoff lei
SIT	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
NO	525 French Red Marin, NY 13502	518: 452-7826
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GENERATION SITE	SJ5 French Red Mtran, NY 13502 WASTETYPE/PROFILE# Estimate A: Confammaded Soul for Cover-CL0431 A.	_ A. frond A. B-913
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n norm of gar	Generators Signature Generators Signature	7/30/99
, and the second	Generators Signature Comp.	/ Date
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	Burrows Trucker	18/14
, 25	DRIVER'S NAME (PRINT):	TICKET NUMBER:
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ONEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT

1600 Genesee Street, Utica, NY 13502 (315) 733-1224 FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE: TITLE: GENERATION SITE 518-412-826 A: LANGEMENTE SOIL For cover - CLOY Certification - I hereby declare that the contents of this consignment are classified as non-hazardous and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The disposal of material has been approved and the tracking is requested by the Oneida - Herkimer Solid Waste Authority. I certify that the above information is true and correct and that if waste shipment is not as I have stated, I will accept the return of the load at my (generator's) expense. Generators Signature AUTHORITY PERMIT NUMBER: HAULER TRAILER NUMBER: COMMENTS: **CONTAINER SIZE / TYPE:** DATE OF SHIP MATERIAL: DISPOSAL SITE REPRESENTATIVE NAME: DISPOSAL FACILITY NAME DISPOSAL FACILITY WASTE TYPE RÉCEIVED: SCALE FULL EMPTY WEIGHT: TICKET WEIGHT: WEIGHT: NUMBER: **COMMENTS:**

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		FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
}	•	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
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SITE		FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
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KEN		110.1.107
		B: B B
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		Generators Signature Date
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	7	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
		Burrows Trucken 1811
X 3		DRÎVER'S NAME (PRINT): TICKET NUMBER:
HAULER		DRIVERS SIGNATURE: TRAILER NUMBER:
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	FACILITY NAME OR ORIGIN OF MA	TERIAL/STREET LOCATION:	DATE:
	botherd Montin	Corp	8/71/99
	CONTACT PERSON OR SITE REPRESE	ENTATÍVE:	TITLE:
	1/2//		Stall
E	FACILITY LOCATION/MAILING ADDI	RESS:	TELEPHONE NUMBER:
GENERATION SITE	525 Fred Rel, Ute		511.452-7826
Ē	WASTE TYPE / PROFILE #	Estimate Y	ards Container Type Container #
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	and are in fact sewage sludge, construc		
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. <u> </u>	M. Same		17 Incl
	Glenow Muchy		18104
×	DRIVER'S NAME (PRINT):		TICKET NUMBER:
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الساا	DATE OF SHIPMENT OF COMME	NTS:	CONTAINER SIZE / TYPE:
	MATERIAL: CL		
	8/3//99		
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ONEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
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国	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
S		
GENERATION SITE	S-25 French Has, Uhra, NY 13507 WASTE TYPE / PROFILE # Estimate Yan	214-465-2826
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	Certification - I hereby declare that the contents of this consignment ar	e classified as non-hazardous
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HAULER	William Baxter	
HAI	DRIVERS SIGNATURE:	TRAILER NUMBER:
	William Bath	B-490
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ONEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

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	FACILITY NAME O	R ORIGIN OF MATERIAL	STREET LOCATION:	DATE:
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	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
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	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
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	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
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pe l	DRIVER'S NAME (PRINT): TICKET NUMBER:
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	Lookhed Martin Corp. 8/11/59	
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:	
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SIT	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER	:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
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	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
		(Letter)
B	FACILITY LOCATION/MAILING ADDRESS:	11/1/54
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	FACILITY, NAME OR ORIGIN OF MATERIAL/STREET LOC	ATION: DATE:
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	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
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	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
ź	SUS Frank Not , liter, NY 131	102 518-457-7121
2	WASTE TYPE / PROFILE #	Estimate Yards Container Type Container #
.≨⊹⊹	A: Confirmated End for Cover CLOY31	2 1 1 - R-112
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5	B: NON-HAZ	R R
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	and are in fact sewage sludge, construction and demolition of	
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Jan Parker	Generator Signature	Title Date
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	DRIVER'S NAME (PRINT): (1)	TICKET NUMBER:
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	SIGNATURE	TITLE
	COMMENTS:	

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockheed Martin Corp. 1/31/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
` .	CONTACT TERSON OR SITE RETRESENTATIVE.
Н	Chur Can
113	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
GENERATION SÎTE	S25 French Red Utres, NY 13502 WASTE TYPE / PROFILE # Estimate Yards Container Type Container # A: Contaminated Sort for Gover CL0431 A. 25-22 A. trailer A. B-TIT
1 2	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
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国	B: NON-1-1AZ
	B B
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid Waste Authority – Certify that the above information is true and correct and that if waste shipment is
	not as I have stated, I will accept the return of the load at my (generator's) expense.
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	Generators Signature Compt. M Title Date
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	DIMOW THICKLY DRIVER'S NAME (PRINT): TICKET NUMBER:
E E	
HAULER	JAMES A-MADORIE SR
HA	DRIVERS SIGNATURE: TRAILER NUMBER:
	Canesa Model 15017
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
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	13/11 - hallen
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	bothed marta Com 8/31/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
TE	Chris Can
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
S	525 French Rd, Utra, Ny 13502 515-152-7166
0	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
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8	B: NON-HAZ
ř	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
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•	not as I have stated, I will accept the return of the load at my (generator's) expense.
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í	Generalors Signature Was 70 Esqs. V Title Date
(TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Burros Trucky 18/04
~	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	Richard Pacas
IAU	DRIVERS SIGNATURE: TRAILER NUMBER:
"	17-430
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	9/21/91
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YELLOW COPY - ONEIDA HERKIMER SOLID WASTE AUTHORITY COPY
PINK COPY - DISPOSAL FACILITY COPY

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE: C/21/ca
	Louchleed Martin Cars	8/2/19%
	CONTACT, PERSON OR SITE REPRESENTATIVE:	TITLE:
	1 (6 - 1)	Chall la
图	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
SI		
No I	S25 French Rd, Upca, NY 1350Z WASTE TYPE / PROFILE # Estimate \	511-452-7521
	WASTE TYPE / PROFILE # Estimate Y	
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5	B: NON HAZ	в. в.
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	and are in-fact sewage sludge, construction and demolition debris or	
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,44 ,4	disposal of material has been approved and the tracking is requested	by the Oneida - Herkimer Solid
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\	Generators Signature College Marks Title	Date
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	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
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1 4	DRIVER'S NAME (PRINT):	TICKET NUMBER:
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	DRIVERS SIGNATURE:	TRAILER NUMBER:
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L FACILITY	DISPOSAL FACILITY NAME: WASTE TYPE RECEIVED: SCALE DISPOSAL SITE DISPOSAL SIT	REPRESENTATIVE NAME: DATE RECEIVED: 9/1/99 NET
SAL FACILITY	MATERIAL: DISPOSAL FACILITY NAME: WASTE TYPE RECEIVED: SCALE TICKET DISPOSAL SITE WEIGHT:	REPRESENTATIVE NAME: DATE RECEIVED: 9/1/99
SPOSAL FACILITY	MATERIAL: DISPOSAL FACILITY NAME: WASTE TYPE RECEIVED: SCALE TICKET NUMBER: DISPOSAL SITE DISPOSAL SITE DISPOSAL SITE WEIGHT: DISPOSAL SITE DISPOSAL SITE DISPOSAL SITE WEIGHT:	REPRESENTATIVE NAME: DATE RECEIVED: 9/1/99 NET
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DISPOSAL FACILITY	DISPOSAL FACILITY NAME: DISPOSAL SITE WASTE TYPE RECEIVED: SCALE TICKET NUMBER: DISPOSAL FACILITY CERTHFICATION:	REPRESENTATIVE NAME: DATE RECEIVED: 9/1/99 NET WEIGHT:
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DISPOSAL FACILITY	DISPOSAL FACILITY NAME: DISPOSAL SITE WASTE TYPE RECEIVED: SCALE TICKET NUMBER: DISPOSAL FACILITY CERTHFICATION: CONTROL OF THE CALL	DATE RECEIVED: ONE TO THE WEIGHT:

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B113

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lorsheed Markon Corps 8/31/99
· a	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
1/1	Chris Can
性	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
S Z	525 French Kd, Utres, NY 13502 518-452-7824
110	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
SENERATION SITE	A: Contamueled soil for love - CLOYII A 20-22 Atriul A B-113
EN	nial edit
	B: B B B
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
•	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
	Waste Authority. I cortify that the above information is true and correct and that if waste shipment is
	not as I have stated, I will accept the return of the load at my (generator's) expense.
*	1 Loubled Stiff Sta 1/3/19
/	Generators Signature Man 1990. Title Date
(TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Rhapiro Tand
	DRIVER'S NAME (PRINT): \ TICKET NUMBER:
ER.	Dara laha.
HAULER	DRIVERS SIGNATURE: A A TRAILER NUMBER:
H	B.113
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL:
	8/3/19
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
١ 😼	Wigh Loves I and Il Lash Whoseises
LIT	WASTETYPE RECEIVED: DATE RECEIVED:
DISPOSAL FACILITY	9/1/99
E.	SCALE FULL EMPTY NET
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L	SIGNATURE TITLE DATE
	SIGNATURE TITLE / DATE /
	COMMENTS:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
•	Lockheed Markin Corp. 8/3/199
;	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
E)	1 fo/// Va
LIS	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
NO.	525 French Road, Utica, NY 13502 511-452 7526
₹	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
GENERATION SITE	A: Contaminated Soil For cover. CLO431 A/L-18 A. Dump A. B-453
8	B: NON-142 B. B. B.
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida - Herkimer Solid
. :-	Waste Authority. Leertify that the above information is true and correct and that if waste shipment is not as Thave stated, I will accept the return of the load at my (generator's) expense.
	1 1 Grager 17 (1)//
Å	Generators Signature Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	DRIVER'S NAME (PRINT): TICKET NUMBER:
TAULER	WALTER J. CAREY
BEAU	DRIVERS SIGNATURE: TRAILER NUMBER:
	Matry (and 15-48)
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE: MATERIAL:
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
7	High Hores antill trava Churciner
	WASTE TYPE RECEIVED:
FAC	9/1/99
DISPOSAL FACILI	SCALE FULL EMPTY NET '' TICKET WEIGHT: WEIGHT:
POS,	NUMBER:
DISI	DISPOSAL FACILITY CERTIFICATION:
	The there I call of 1/199
	SIGNATURE TITLE DATE
	COMMENTS:
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· · · · · · · · · · · · · · · · · · ·	CONTACT PERSON OR SITE REPRES	ENTATIVE:	TITLE:	7/	
	Chan Chin		101/1	Sec	
SITE	FACILITY LOCATION/MAILING ADD	RESS:		E NUMBER:	
	1520 Truck le, Us	ma, NY 1350	2 518-45	2-7576	
4 5	WASTE TYPE / PROFILE #		imate Yards Container Type	Container #	
¥ \	A: Cartaninates for for	I'm MANIA	16-18 1 Dans	A. B-510	
SENERATION					
[5	B: NOW +/1	72 B	B .	В.	
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	Certification - I hereby declare that the				
	and are in fact sewage sludge, constru				
	NYCRR Part 364 for which disposal h disposal of material has been approve				
	Waste Authority. X certify that the ab	ove information is true an	d correct and that if waste	shipment is	
	not as I have stated, I will accept the r	eturn of the load at my (g	enerator's) expense.		
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ar e	Generators Signature	Oritle		Date	
100	TRANSPORTING COMPANY NAME:		A VOTE ODETTY DEDAY	YM SILISADED.	
	TRANSPORTING COMPANY NAME:		AUTHORITY PERM	III NUMBER: 7	
	DRIVER'S NAME (PRINT):	iery	TICKET NUMBER	h	
ER	BUB SPELLMA		I RCALLS & I TOTTAL GATE		
AULER	DRIVERS SIGNATURE:	The second second	TRAILER NUMBER	<u> </u>	
HV	Bu Dreding		13-6-10		
	DATE OF SHIPMENT OF COMMI	FNTS	CONTAINER SIZ	7F / TVPF.	
	MATERIAL:		CONTAINDADA	QID / R R R AD-	
	1/8//91				
	DISPOSAL FACILITY NAME:	OII DISPOSAL	SITE REPRESENTATIVE	NAME:	
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É	WASTE TYPE RECEIVED:	Till	DATE RECEIVED:	7	
FACILIT			ali	00	
	SCALE FULL	I EMPTY	NET /	77	
AL	TICKET WEIGHT:	WEIGHT:	WEIGHT:		
DISPOSAL	NUMBER:				
DIS	DISPOSAL FACILITY CERTIFICATION	4: -		1. In	
	auth Acheve	Soule NUC	all Wy	11199	
	SIGNATURE		TITLE	DATE '	
	COMMENTS:	- () 			
		The second s			

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
•	Lochheed Martin Corp. 8/31/99
,	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
E	Char Can Stoffen
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
GENERATION SITE	
<u> </u>	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
 	Set French Rel Utara Ny 13502 ST8. 452-7826 WASTE TYPE/PROFILE# A: Contaminated 501 for over. Clay31 A. 16-18 A. Jung A. 8-450
SNE	A: Contamination sol for con. Celly 31 A. 10 " A. My
5	B: NBN-HAZ B. B. B.
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
	Waste Authority, I certify that the above information is true and correct and that if waste shipment is
	not as I have stated, I will accept the return of the load at my (generator's) expense.
•	1 1 Later war (14/6/20 8/31/99
	Generator Signature Date
	/TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	DRIVER'S NAME (PRINT): TICKET NUMBER:
ER	O 1 1 O 1 I
HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
Н/	0.011 00 R-450
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL
s:	7/1/97 Juno
:	disposal facility name: disposal site representative name:
×	Nighters land: I taula Churis of
CIT	WASTE TYPE RECEIVED: DATE RECEIVED:
DISPOSAL FACILI	9/1/99
, E4	SCALE j FULL EMPTY NET
SAL	TICKET WEIGHT: WEIGHT: WEIGHT:
og /	NUMBER: DISPOSAL FACILITY CERTIFICATION:
- Si (DISPOSAL PACILITY CERTIFICATION:
——————————————————————————————————————	SIGNATURE TITLE DATE
	SIGNATURE
	COMMENTS:

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(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Loubled Marke Corp 8/31/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The Pan
HEE	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
S	525 Front Rd, Uhra, NJ 17102 518 952 7826
13	SES Frank Pel, Uhrs NJ 17502 SN 957 7826 WASTE TYPE / PROFILE# Estimate Yards Container Type Container #
3RA	A. Continuated soil for ever CLOY31 A 16 18 A) hop AB-490
GENERATION SITE	
9	B: NON-11112 B. B.
	<u>Certification</u> - I hereby declare that the contents of this consignment are classified as non-hazardous and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida - Herkimer Solid
	Waste Authority. I certify that the above information is true and correct and that if waste shipment is not as I have stated, I will accept the return of the load at my (generator's) expense.
	The state of the s
	Generators Signature Date
	Note that the state of the stat
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	DRIVER'S NAME (PRINT): TICKET NUMBER:
ER ER	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
HA	
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
>	Anh Hores and I have been
	WASTETYPE RECEIVED: DATE RECEIVED:
DISPOSAL FACILIT	01/199
	SCALE FULL EMPTY/ NET
SA	TICKET WEIGHT: WEIGHT: WEIGHT:
SPC	DISPOSAL FACILITY CERTIFICATION:
<u> </u>	(- X01,0) () X11 Ve (10 9/1/9)
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockheed Montantorp 8/31/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	Chan Can
SITE	FACILITY LOCATION/MAILING ADDRESS: TELÉPHONE NUMBER:
Į į	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
E	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
GENERATION	A: Confuncted Sort to love - CLOYS/ A. Ta W A Toll A D-Sol
CE	B: NON-MAZ B. B. B.
لــا	
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The disposal of majerial has been approved and the tracking is requested by the Oneida – Herkimer Solid
	Waste Authority. Legrify that the above information is true and correct and that if waste shipment is
	not as I have stated, I will accept the return of the load at my (generator's) expense.
	1 - bouleur marin /1/82 8/31/99
	Generator Signature Date Date
-	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
<u> </u>	
~	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
IAU	DRIVERS SIGNATURE: TRAILER NUMBER:
	Francis Kellen
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	WATERIAL 6/31/19
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
ITY	WASTETYPE RECEIVED:
병	n/i/no
FA	SCALE FULL EMPTY NET
SAL	TICKET / WEIGHT: WEIGHT: WEIGHT:
DISPOSAL FACILITY	NUMBER:
DIS	DISPOSAL FACILITY CERTIFICATION:
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	SIGNATURE DATE
	COMMENTS:

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(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	CONTROL PERSONOR SHE REFRESENTATIVE:
TE	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
N SI	525 French Rd, Utun, NY 518-452-7820
TIO	I WASTR I VDR / DDI WILLER X
ERA	A: Coentaminated Soil For cover - CLOUSI A. 16-17 A. Dump A. Dump A. D. 13.
GENERATION SITE	1 100 100
<u> </u>	B. B. B. B.
	<u>Certification</u> - I hereby declare that the contents of this consignment are classified as non-hazardous and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid Waste Authority, I certify that the above information is true and correct and that if waste shipment is
	not as I have stated, I will accept the return of the load at my (generator's) expense.
	1 2 lockwed (full so 9/1/99
	Generators Signature Marke (Ditte Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Burows Tunks 18109
æ	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
H H	DRIVERS SIGNATURE:
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL: G/ /4C
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
TY	WASTE TYPE RECEIVED: DATE RECEIVED:
	WASTE TYPE RECEIVED: DATE RECEIVED:
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DISPOSAL FACILIT	TICKET WEIGHT: WEIGHT: WEIGHT:
POS	NUMBER!) DISPOSAL FACILITY CERTIFICATION:
	SIGNATURE SCALE DE 7/1/77 DATE
	COMMENTS:

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1600 Genesee Street, Utica, NY 13502 (315) 733-1224

		origin of material/stre	ET LOCATION:	DATE:	144
	1 Silahini	Martin Corp		9/11	94
	CONTAGT PERSON-0	R SITE REPRESENTATIVE:		TITLE:	
				$Z_{\cdot \cdot \cdot}$	16 6
P	Colon Colon			100	
Sir	FACILITY LOCATION			TELEPHO	NE NUMBER:
Z	525 Fre	nch Road		518-45	1-7826
Ĭ	WASTE TYPE / PROFI	LE#	Estimate Y		
₹.			2421 A. 18-24) A Down	A. B-514
GENERATION SITE	A: (Darwaynate)	sulfor cover CLI	7431 V-14-02	A. (ARRIVA	A.13 3
3	B: NC	N-HAZ			
			B	B.	B• <u>····</u> ,
		declare that the contents of			
		sludge, construction and dem which disposal has been appro			
		s been approved and the trac			
		tify that the above information			
	not as I have stated, I	vill accept the return of the lo	ad at my (generat	or's) expense.	
		as again for	1/11/11		9/1/51
	Generators Signature	whited)	11/1/1/19		Data
<i> </i>	Generators signature	murtulor	Ville		Date
	TRANSPORTING COM	PANY NAME:		AUTHORITY PER	MIT NUMBER:
	1 7 Y			1810	4
	DRIVER'S NAME (PRIN	m. mum	<u> </u>	TICKET NUMBER	
E	DICT DICTION (TICE			TICKET NOMBER	
HAULER	DRIVERS SIGNATURE	N. MODORE	\$ 2.5		
H	DRIVERS SIGNATURE:	A . A		TRAILER NUMBE	R:
	Jan	is a house		11551	
	DATE OF SHIPMENT, O	F COMMENTS:		CONTAINER S	ZE / TYPE:
	MATERIAL:			$-1/(\sqrt{x^2+1})$	
	1/1/1/				
	DISPOSAL FACILITY	AME:	DISPOSAL SITE	REPRESENTATIVE	NAME:
	Cleak (1)		Lina	Oleans.	
E	WASTE TYPE RECEIVE		~9///	DATE RECEIVED:	
	WASTE TATE RECEIVE	*		altan	
¥			00)	9/11/19	
<u> </u>	SCALE	FULL	EMPTY	NET	
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DISPOSAL FACILIT	DISPOSAL FACILITY C	EDWID*CLWYON			
DIS	DISPOSAL FACILITY O	V Zeros zakoneko zako	101		Olilan
	DUKY (Kian	Maul	Dec	7/179
	SIGNA	rure	TITL	E,	DATE /
	COMMENTS				
	COMMENTS:				

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(315) 733-1224

	FACULTY NAME OF	ORIGIN OF MATERIA	L/STREET LOCAT	TION: DATE		
		Martin Corp		ION. DATE		14
		R-SITE REPRESENTA		TITLE		
(A)	(har 1	_			16/11	Ser
STTE		MAILING ADDRESS:		13502	TELEPHÓNI	NUMBER:
ON O		L Road, Uh		,	5 A 1 A 1	<u> </u>
GENERATION	A: Contaminate				Container Type Dump	Container # A. 13-44
ČE		Non-HAZ				В
; ;	Certification - I hereb	dadaya that the cont	anto of this counie	rmant are class	ified as non b	nzardone
	and are in fact sewage NYCRR Part 364 for disposal of material ha Waste Authority. I ce not as I have stated, I Generators Signature	which disposal has been approved and rtify that the above in	n approved or wh the tracking is req formation is true a	ich tracking ha uested by the C ind correct and	s been reques Incida – Herk that if waste	ted. The imer Solid
	TRANSPORTING COM			AUTH	ORITY PERM	T NUMBER:
	Ism	rows in	when		1810	3
ULER	DRIVER'S NAME (PRII ROLE SHAY			TICKE	T NÜMBER:	
IAU	DRIVERS SIGNATURE				ER NUMBER:	
	Palet Sodd	kmul			3-44	
	DATE OF SHIPMENT (MATERIAL: 9//	F COMMENTS:			18 VU DU	ETTYPE:
	DISPOSAL FACILITY	IAME:	DISPOSA	L SITE REPRE	SENTATIVE N	AME:
2	WASTE TYPE RECEIV	cres	Ly,	nn Olea	u	
ACILI		ED:	Soil	PATE 9	RECEIVED:	
DISPOSAL FACILIT	SCALE TICKET NUMBER:	FULL WEIGHT:	EMPTY WEIGHT		WEIGHT:	
DIS	DISPOSAL FACILITY OF	leave	Sca	rlepper	- 9	1.99
	/ SIGNA	TURE (TITLE		DATÆ
	COMMENTS:					

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-	
	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockheed Martin Corp.
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
SITE	Chris Cen Staff Swenter
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
NO	S25 French Rd., Utu NY. 13502 S18-451-1824 WASTE TYPE / PROFILE# Estimate Yards Container Type Container #
Ĕ	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
ER	A: contaminated soil for com-CLO431 A 16-18 A Dump A. R-485
SENERATION	
	B: B. AUP-PINZ
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part-364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida - Herkimer Solid
	Waste Authority 1 certify that the above information is true and correct and that if waste shipment is not as I have stated, I will accept the return of the load at my (generator's) expense.
	At a 1 may stated, I want accept the return of the load at my (generator s) expense.
100	Generators Signature Date
	Generators Signature Marchin (OTV)
(TRANSPORTING COMPANY NAME: AUTHORITY-PERMIT NUMBER:
	Burrows Truck
æ	DRIVER'S NAME (PRINT):
J. F.	WALTER J CAREY
A	DRIVERS SIGNATURE: TRAILER NUMBER:
	Water Cary 5-98
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE: MATERIAL:
	1/1/99
	DISPOSAL/FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
1	WASTE TYPE RECEIVED: MIN ORCH DATE RECEIVED:
	WASTE THE RECEIVED.
FAC	Jac 1/1/9/
7	SCALE FULL EMPTY NET TICKET WEIGHT: WEIGHT:
DISPOSAL FACILIT	NUMBER:
TSI (DISPOSAL FACILITY CERTIFICATION:
	ALUXO LIQUE Malegal 9/199
	SIGNATURE DATE DATE
	COMMENTS:

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FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCAT	TION: DATE:
Lockheed Markin Corp.	812499 9/1/99
	TITLE: Steeled
Chris Carr	Surpor
FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
525 French Rel. Upu NY 13503	518-452-7826
WASTE TYPE / PROFILE #	
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Certification - I hereby declare that the contents of this consign	nment are classified as non-hazardous
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DRIVER'S NAME (PRINT):	TICKET NUMBER:
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DRIVERS SIGNATURE:	TRAILER NUMBER:
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DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lockheed Marty Corn	8/31/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	(hu lan	Stoffen
SITE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
Į.	SZE French RO, Utres, NY 13502 WASTE TYPE / PROFILE # Estimate Y	stb-4/2-7972 ards Container Type Container #
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1	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
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N.	DRIVER'S NAME (PRINT):	TICKET NUMBER:
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H/	Brian Spain	7-413
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	FACILITY NAME OR ORIGIN OF MATERIAL/STRE	ET LOCATION: DATE:
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	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE: Child Ca
<u>a</u>	Chris lan	110/1/20
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×	DRIVER'S NAME (PRINT):	TICKET NUMBER:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lockheed Markin losp.	DATE: 9/1/99 TITLE:
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	Chris Can	Staff frenchis
읟	FACILITY LOCATION/MAILING ADDRESS:	TEV EDUCNE NUMBER.
SITE		TELEPHONE NUMBER:
GENERATION	525 French Rel, Mara, NY 13502	518 452-726
5	WASTE TYPE / PROFILE # Estimate	Yards Container Type Container #
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	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	DRIVER'S NAME (PRINT):	1811
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
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HAULER	DRIVERS SIGNATURE:	TRAILER NUMBER:
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ы	Chris Can	.`	Stoff Sa	e het
ELIS	FACILITY LOCATION/MAILING ADDRESS:		TELÉPHONE	
NO ,	525 French Rel, Utra, NY 17502 WASTE TYPE/PROFILE#		578-480	-7820
ATT.	WASTE TYPE / PROFILE #	Estimate Yards	Container Type	Container#
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CER	11/11 2	TiCi	KET NUMBER:	
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Ε.	William Barke	***************************************	13-496	
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	Withheed Martin Corp.	1241 9/1/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
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핃	FACILITY LOCATION/MAILING ADDRESS:	TOU EDVIONE NUMBER.
S	• · · · · · · · · · · · · · · · · · · ·	TELEPHONE NUMBER:
SENERATION SITE	525 French RD, Utra, NY 13502	518-1052-7826
È	WASTE TYPE / PROFILE # Estimate Y	
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	Generators Signature / Title	Date
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	Burrows Trucke	18/14
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
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田	FACILITY LOCATION/N	te de la companya de	<u> </u>	TELEBRION	E NUMBER:
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T E		FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
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ER		A: Contain Soul for you - CLOUST A. 16.18 A. Dung A. 1-440
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.:		NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
	, ,	Waste Authority. Learning that the above information is true and correct and that if waste shipment is
		not as I have stated, I will accept the return of the load at my (generator's) expense.
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		Generators Signature Marker //Title Date
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
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,	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	Chille Su
I E	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
GENERATION SITE	525 Trench Rd, Uter NY 13502 518-452 5826
ATI	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
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85	B: WUN-HAZ B. B. B.
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ر د او	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
ģ	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
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•	Generators Signature Comp Sittle Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Burrows Truck
~	DRIVER'S NAME (PRINT): TICKET NUMBER!
HAULER	KICHARL KEGA
H.	DRIVERS SIGNATURE: TRAILER NUMBER:
	D. 930
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE: MATERIAL:
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1	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
Z	525 French 160 11th, NY 17502 518-452-2526
2	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
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	B. B. D.
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
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	Waste Authority. I certify that the above information is true and correct and that if waste shipment is
1	not as Lhave stated, I will accept the return of the load at my (generator's) expense.
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
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ഥ	Chris Can	2/1/1/201
SIT	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
ő	525 French Rd, Utra, NY 13502	518-4527826
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	Certification - I hereby declare that the contents of this consignmen	t are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or	special handling waste as defined in
,	NYCRR Part 364 for which disposal has been approved or which tr disposal of material has been approved and the tracking is requested	
,	Waste Authority. I certify that the above information is true and co	rrect and that if waste shipment is
1	not as I have stated, I will accept the return of the load at my (gener	ator's) expense.
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	COMMENTS:	5

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	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE: Coll fu
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ATT.	WASTE TYPE / PROFILE #	Estimate Yards Container Type Container #
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	and are in fact sewage sludge, construction and demolition NYCRR Part 364 for which disposal has been approved or	which tracking has been requested. The
	disposal of material has been approved and the tracking is Waste Authority. I certify that the above information is tr	requested by the Oneida - Herkimer Solid
	not as I have stated. I will accept the return of the load at n	ny (generator's) expense.
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	Generators Signature	Title Date
6	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
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2	DRIVER'S NAME (PRINT):	TICKET NUMBER:
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HAI	DRIVERS SIGNATURE:	TRAILER NUMBER:
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(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	CONTACT PERSON OR SITE REPRESENTATIVE:/ TITLE:
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SITE	FACILITY LOCATION/MAILING ADDRESS:
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GENERATION	A: Contaminated for love CLO431 A.16-18 A. Ding A. 190
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	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
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	not as I have stated. I will accept the return of the load at my (generator's) expense.
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. x	DRIVER'S NAME (PRINT): TICKET NUMBER:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
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- 10 h	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
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<u>B</u>	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
SI	FACILITY LOCATION/WAILING ADDRESS:
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E		/MAILING ADDRESS:		TELEPHONI	ENUMBER:
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I WI	DRIVERS SIGNATURE:			TRAILER NUMBER:	
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	TACIDIT I NAME OF ORIGIN OF MATERIALISTREET LOCATION: DATE:
	Lockhed Martin Corp 1/19
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
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l o l	525 Trench Ke, Utra , NY 1502 518-451 7026
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5	B: Non Mas
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	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
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	Waste Authority. I certify that the above information is true and correct and that if waste shipment is
	not as Lhave stated, I will accept the return of the load at my (generator's) expense.
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	Generators Signature marin // Title Date
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(TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
-	Property 1811C
	DRIVER'S NAME (PRINT): TICKET NUMBER:
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HAULER	Prancis AICHEN
HA	DRIVERS SIGNATURE: TRAILER NUMBER:
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	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
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ONEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT



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,	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lorhhed Much Con 9/1/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
<u>.</u> ы	In the
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
Z	525 French Rd, Uhran, NY 13502 518-452-1826
GENERATION SITE	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
3	12/ - 11
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Á	
	B: B B B
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
:	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
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	9/199
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	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	1 Junous buch
4	DRIVER'S NAME (PRINT): TICKET NUMBER:
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IA ,	DRIVERS SIGNATURE: TRAILER NUMBER:
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Ę	WASTE TYPE RECEIVED: DATE RECEIVED:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	I with a Markin Com	9/2/59
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	Chu Can	Mah
SITE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
ON S	525 Franch RO, Uha, NY 13502	518-452-7826
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E 5	B: NOW-MAZ B.	B . B .
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ليم ا	Certification - I hereby declare that the contents of this consignment	
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	FACILITY NAME OR OR	igin of material/str	EET LOCATION:	DATE:	
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ļ	Burrows 7.			TICKET NUMBER	<u> </u>
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:	
Š	Light and Mantin Cons	9/2/91
*	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:	
		CLAN C
P		
LIS		ELEPHONE NUMBER:
\ \frac{7}{6}	525 French Rel, Utru NY 13502	18-452-7876
Ĕ	WASTE TYPE / PROFILE # Estimate Yards Con	rtainer Type Container #
₽¥	1. 5. 4. 1 6 cm Classes 1, 22.24 1, 4	brule 1. B-1/3
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	Certification - I hereby declare that the contents of this consignment are classifi	
	and are in fact sewage sludge, construction and demolition debris or special han NYCRR Part 364 for which disposal has been approved or which tracking has been approved by the beautiful has been	
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE: 9/2/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
<u> </u>	1 Chr. Car
ITE	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
GENERATION SITE	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
ATI	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
KER	A: contaminated sollfor cove-CLO431 A. 22-24 A. film A. B-5/4
E	B: NOW- HALL B. B. B. B. B. B. B.
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida - Herkimer Solid
	Waste Authority. I certify that the above information is true and correct and that if waste shipment is not as I have stated. I will accept the return of the load at my (generator's) expense.
	2 Toucher Markon (Loff In 9/2/19
	Generators Signature Corp. Title Date
•	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Burrows trucky 18108
×	DRIVER'S NAME (PRINT): TICKET NUMBER:
ULER	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	DRIVER'S NAME (PRINT): TAMES A. MADORE SR DRIVERS SIGNATURE: TRAILER NUMBER: 3.5/4
HAULER	DRIVER'S NAME (PRINT): TRAILER NUMBER: DRIVERS SIGNATURE: TRAILER NUMBER: S'5/4
HAULER	DRIVER'S NAME (PRINT): JAMES A. MADORE SE DRIVERS SIGNATURE: DATE OF SHIPMENT OF COMMENTS: MATERIAL: 9/2/19 TICKET NUMBER: TRAILER NUMBER: CONTAINER SIZE / TYPE:
HAULER	DRIVER'S NAME (PRINT): TICKET NUMBER: TRAILER NUMBER: DATE OF SHIPMENT OF COMMENTS: MATERIAL: DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
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DISPOSAL FACILITY HAULER	DRIVER'S NAME (PRINT): JAMES A. MADORE SE DRIVERS SIGNATURE: DATE OF SHIPMENT OF COMMENTS: MATERIAL: 2/2/19 DISPOSAL FACILITY NAME: WASTE TYPE RECEIVED: SCALE TICKET NUMBER: DISPOSAL SITEREPRESENTATIVE NAME: DATE RECEIVED: DATE RECEIVED: DATE RECEIVED: DISPOSAL FACILITY CERTIFICATION: DISPOSAL FACILITY CERTIFICATION: DISPOSAL FACILITY CERTIFICATION:
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4	DRIVER'S NAME (PRINT): JAMES A. MADORE SE DRIVERS SIGNATURE: DATE OF SHIPMENT OF COMMENTS: MATERIAL: 2/2/19 DISPOSAL FACILITY NAME: WASTE TYPE RECEIVED: SCALE TICKET NUMBER: DISPOSAL SITEREPRESENTATIVE NAME: DATE RECEIVED: DATE RECEIVED: DATE RECEIVED: DISPOSAL FACILITY CERTIFICATION: DISPOSAL FACILITY CERTIFICATION: DISPOSAL FACILITY CERTIFICATION:

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lighteed which loss.	7/2/17
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
		Chilleri
SITE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
IS		
ģ	525 French No, Whee, NY 13502	518-487-7-26
AT	WASTE TYPE / PROFILE # Estimate	Yards Container Type Container #
ER	A: Contra sort for cover - CLO431 A. 16	A.] A. [37]
GENERATION		35-454
	B: NON 1/A-E B.	B. B.
	Certification - I hereby declare that the contents of this consignment	
	and are in fact sewage sludge, construction and demolition debris or	special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tra	
	disposal of material has been approved and the tracking is requested Waste Authority. I certify that the above information is true and co	
	not as I have stated. I will accept the return of the load at my (general	
3	1 Company of the Company	9/7/19
	white with the state	
/	Generators Signature Corp.	Date /
`	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Burrows Tryshin.	10117
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
ER	O I Wall	
HAULER	DRIVERS SIGNATURE:	TRAILER NUMBER:
₩.	DRIVERS SIGNATURE:	RAILER NUMBER:
	Krd Hall	13-43 0
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL: 9/2/99	
		E REPRESENTATIVE NAME:
>	Frigh (ICUS) Ly	no () 100 m
	WASTE TYPE RECEIVED:	DATE RECEIVED!
DISPOSAL FACILIT		0/2/09
¥.	SCALE FULL EMPTY	NET
7	TICKET WEIGHT: WEIGHT:	WEIGHT:
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ISP /	DISPOSAL FACILITY CERTIFICATION:	
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<i>P</i>	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lochleed Marker Corp	9/2/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
8	Chu Ch	(NI) Ju
SIL	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
NO	525 French Met, Uhra, NY 17502	518-452-1866
LT.	WASTE TYPE / PROFILE # Estimate Ya	
ER	A: Contamunated soil on love CLO431 A. 16-11	A. Dury A. 13-49
GENERATION SITE	B: NON-HAT	
	B	B B
	Certification - I hereby declare that the contents of this consignment a and are in fact sewage sludge, construction and demolition debris or s	
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	disposal of material has been approved and the tracking is requested to Waste Authority. I certify that the above information is true and corr	
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	Low Lord wan AMA (n	9/2/99
	Generators Signature Title	Date
· /	A compression of the compression	
ب	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Durrows livery	18/07
*	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	William Baxter	TRAILER NUMBER:
HA	DRIVERS SIGNATURE:	RAILER NUMBER:
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
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	7/2/95	
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YII	WASTE TYPE RECEIVED:	DATE RECEIVED:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lackheed March Corp. 9/2/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
(H)	Chris Can Staff ha
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
NO	525 French Rel, Whee, NY 13502 518-152-7826
E	
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GE	B: NON-MAZ
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
7	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
•	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid Waste Authority. A certify that the above information is true and correct and that if waste shipment is
L . L	hot as I have stated I will accept the return of the load at my (generator's) expense.
	not as I have stated, I will accept the return of the load at my (generator's) expense.
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\sum_{i}	Generators Signature Com. Title Date
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	Unions Truck
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5	DRIVERS SIGNATURE: TRAILER NUMBER:
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	Transit letter
·····	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	9/2/95
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
<u> </u>	Francis Richer Lynn Olang
T.	WASTE TYPE RECEIVED: DATE RECEIVED:
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	COMMENTS:

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	FACILITY NAME OR O	RIGIN OF MATERIAL/STREET	LOCATION:	DATE:	
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	CONTACT PERSON OR	SITE REPRESENTATIVE:		TITLE:	6.
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LIX.	FACILITY LOCATION/M			TELEPHO	NE NUMBER:
GENERATION SITE	525 Trench	Al, When, NY.	17502		12-7816
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		ich disposal has been approve been approved and the tracki			
		fy that the above information			
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	Generators Signature	lorp.	Title		Date
	TRANSPORTING COMPA	NY NAME:		AUTHORITY PERI	MIT NUMBER:
	Remanne	Thursday		News	
	BUNOW - DRIVERS NAME (PRINT	Truchen		Now!	1
LER	DRIVER'S NAME (PRINT):			
AULER	DRIVER'S NAME (PRINT DRIVER'S SIGNATURE:):			
HAULER	DRIVER'S NAME (PRINT):		FICKET NUMBER	
HAULER	DRIVER'S NAME (PRINT ORIVERS SIGNATURE: DATE OF SHIPMENT OF):		FICKET NUMBER	R:
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HAULER	DRIVER'S NAME (PRINT B S OF CL DRIVERS SIGNATURE: DATE OF SHIPMENT OF MATERIAL: 9/2/96	COMMENTS:		TICKET NUMBER TRAILER NUMBER () - [] () CONTAINER SI	R: ZE/TYPE:
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•	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Joshbert Marka 9/2/99
	CONTACT PERSON OR SITE REPRESENTATIVE:
	
1 12 1	Con Con
SILI	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
N. N.	525 French Res, When, Ny 13502 514-452-7516
Ĭ	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
X	A fortain Geller Care Cho431 1 22-24 1 truly 1 13 44
GENERATION SITE	A TOUR OF THE CONTROL
5	WASTE TYPE / PROFILE # A: furtain fort for Cora CLO431 B:
L	
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
,	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
	Waste Anthority. I certify that the above information is true and correct and that if waste shipment is
;	not as have stated, I will accept the return of the load at my (generator's) expense.
	Com weller Mark 1/1/1/ La 1/2/97
/	Generators Signature Date Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	ا لا بر مربع ا
	Burrows Truck
e e	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	BRIANSEAUEY
HAI	DRIVERS SIGNATURE: TRAILER NUMBER:
	Brian Soawer 13-413
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL: 9 /2 /55
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
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Ę	High CCU Legn Olay DATE RECEIVED:
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a l	1 (1x 1 1) 400 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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	COMMENTS:

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*	FACILITY NAME OR ORIGIN OF MAT	ERIAL/STREET LOCATION:	DATE:
		A STREET BOOKITOK	9/1/69
	CONFACT PERSON OF SITE PERPESE	NITA TIME:	TITLE:
	CONTACT PERSON OR SITE REFRESE	NIARIVE:	CLM G
国	FACILITY LOCATION/MAILING ADDR		3 (2)///
SI	1 A. 1005 2 A.		TELEPHONE NUMBER:
NO N	525 French Ad W	tru, Ny 17102	518-452.7826
GENERATION SITE	WASTE TYPE / PROFILE #	Estimate Yar	ds Container Type Container #
VER	A: Calza Soil for corr	-CL0431 A 10-18	1 A. Jhar A. D-740
GE	B: Mron-HAZ		
		B	B
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	Certification - I hereby declare that the and are in fact sewage sludge, construct		
i i	NYCRR Part 364 for which disposal ha		
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•	Waste Authority. I certify that the abounot as I have stated, I will accept the re-	ve information is true and corre	ct and that if waste shipment is
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(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE: DA
	Louhheed Martin Corn	89/2/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	Chur Can	a b
巴	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
SITE		
GENERATION	525 French Rd. Utra NY 17502	574-451-7826
	WASTE TYPE / PROFILE # Estimate	e Yards Container Type Container #
1 2	A: Lantam soul for cover CLOUSI A. IV	18 A Dia A 1-430
EZ		
G	B: NON-MAT B.	R. B.
	Carlo Alexander	
	Certification - I hereby declare that the contents of this consignment and are in fact sewage sludge, construction and demolition debris of	
	NYCRR Part 364 for which disposal has been approved or which tr	
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	Waste Authority. I certify that the above information is true and co	
	not as I have stated, I will accept the return of the load at my (gener	ator's) expense.
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	Generators Signature // Title	Date
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t in the second	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Gurrono Trushin	18104
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
1 1 1		
HAULER	DRIVERS SIGNATURE:	TRAILER NUMBER:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION	
	Lorhheed Ment Corp.	9/1-/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
GENERATION SITE	1 Charles	Will du
	FACILITY LOCATION/MAILING ADDRESS:	TECEPHONE NUMBER:
S Z	Oc Fred Rd. Uhio DY 13502	518-452 7526
L L	WASTE TYPE / PROFILE # Estimat	e Yards Container Type Container #
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0	B: Non HHZ B.	В. В.
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	Certification - I hereby declare that the contents of this consignment	nt are classified as non-hazardous
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	Generator's Signature Title	Date
	Corp.	
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Burrows Trucky	18/0/
~	DRIVER'S NAME (PRINT):	TICKETNUMBER:
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#AT	DRIVERS SIGNATURE:	TRAILER NUMBER:
	Davis Man Mary	1 8-117
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<i>:</i> :	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lochheed Whenker Corp.	9/2/99
. i	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	Chin Can	Than L.
EJ .		Still pu
H	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
GENERATION SITE	525 French Ld, When, NY 1350m	511-452-7816
1 25	WASTE TYPE / PROFILE # Estimate Y	
₹	12.	
(E)	A: Contains. Soil to Cares - CLO431 . A. LLA	_ A. 17000 A. D. 5/9
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	B: NON-HAZ B B	B B
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	not as I have stated, I will accept the return of the load at my (generat	or's) expense.
	The Locked Weeken Stoll for	9/2/99
	Generators Signature / Title	Date
	d O Corp.	
,	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Burrow Trucking	1810 8
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
E E		
HAULER	DRIVERS SIGNATURE:	TO A IV DD ALVIS IDVID
HA		TRAILER NUMBER:
	DATE OF SHIPMENT OF COMMENTS:	13.679
لــــــا	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL:	
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ONEIDA-HERKIMER SOLID WASTE AUTHORITY

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

		•	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:	
	~		Lochheid Martin Com 9/2/99	•
			CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:	
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	田		Chu Chu Stry on	•
-	Ħ	`	FACILITY LOCATION/MAILING ADDRESS:	NUMBER:
_	ž	1	525 French Del, Utra, NY 13502 518-452-	7826
	GENERATION SITE		WASTE TYPE / PROFILE # Estimate Yards Container Type	Container#
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			and are in fact sewage sludge, construction and demolition debris or special handling waste	
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			disposal of material has been approved and the tracking is requested by the Oneida – Herki Waste Authority. I certify that the above information is true and correct and that if waste s	
			not as I have stated I will accept the return of the load at my (generator's) expense.	inputout is
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•			Generator's Signature Coup. Title	Date
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			DRIVER'S NAME (PRINT): DRIVER'S NAME (PRINT): TICKET NUMBER:	
	XX		BOBS PECCHAN	
	HAULER			
	HA		DRIVERS SIGNATURE: TRAILER NUMBER:	
			Bu Della B-110	
L		l	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE	E/TYPE:
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	Ē	1 6	WASTE/RYPE RECEIVED: DATE RECEIVED;	
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UNIFORM TRACKING DOCUMENT

To the second

ONEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lorsheed Marky Corps	7/2/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
1 2 2 9	Christian	(61/3 Sz.
13.	FACILITY LOCATION/MAILING ADDRESS:	TEXEPHONE NUMBER:
S	525 French Nd, Ubrea, Ny 17502	518-402-7676
2	WASTE TYPE / PROFILE # Estimate	
RA	A: Contan Soul for com CLOUSI A161	
GENERATION SIT	A: Contain in to cover c cours! A. Lot	A 70007 A 707 A
5	B: NON-1117 2	
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	Certification - I hereby declare that the contents of this consignment	are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or	
	NYCRR Part 364 for which disposal has been approved or which tra	
	disposal of material has been approved and the tracking is requested	
	Waste Authority. I certify that the above information is true and cornot as I have stated, I will accept the return of the load at my (genera	
	I araged to	9/2/99
	Generators Signature nzamizm Title	1/2//
,	Corn.	Date
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Rumous Tauchin	18105
~	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	William Baxton	
ΙΨΩ	DRIVERS SIGNATURE:	TRAILER NUMBER:
	111111111111111111111111111111111111111	12490
	DATE OF SHIPMENT OF QOMMENTS:	CONTAINER SIZE / TYPE:
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	or origin of material		TE:
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	N OR SITE REPRESENTATI		PLE:
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FACILITY LOCAT	ION/MAILING ADDRESS:		TELEPHONE NUMBI
521 Fre	is the uten, N	1 13502	18-452-78
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A Chat	fort for love - Co	10431 A1616	A. Drans A. 12.
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	age studge, construction and for which disposal has been		
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not as I have stated	I, I will accept the return of		
	Lordhand Mark	14/1/10	9/2/9
Generators Signatu	ire Corp.	Title	/ Date
TRANSPORTING C	OMPANY NAME:	AU	THORITY PERMIT NUME
Hanson	or Trucky		1817
DRIVER'S NAME (I	PRINT):	TIC	KET NUMBER:
RAA	MOIL SIN		
DRIVERS SIGNATU	JRE:	TR	AILER NUMBER:
1 2-5x	1, CQ		47-450
DATE OF SHIPMEN	NT OF COMMENTS:		CONTAINER SIZE / TYPE
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DICDOCTA MITURE AN	IX NAME:	DISPUSAL STIE REP	RESERVATIVE NAME:
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•	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
•	Lochheed Munta Corp 9/2/99 CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
J.E.	FACILITY LOCATION/MAILING ADDRESS: THE PHONE NUMBER:
N SI	525 French Rel, Utru Ny 13502 578-457 7826
OIL	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
GENERATION SITE	A: Contaminated soil to cove - CLO431 A. 16-18 A. Dun A. 3-485
E	B: NON-HHZ
[i	
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The disposal of material has been approved and the tracking is requested by the Oneida - Herkimer Solid Waste Authority. I certify that the above information is true and correct and that if waste shipment is not as thave stated, I will accept the return of the load at my (generator's) expense.
	Generators Signature Coun. // Title Date
	TRANSPORTING COMPANY NAME: Burows Turks 1810
*	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
HA	Water Camp 185
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE: MATERIAL:
	DISPOSAL FACILITY NAME:, O DISPOSAL SITE REPRESENTATIVE NAME:
4	Migh fores and ill town where zer
ACILIT	WASTE TYPE RECEIVED: DATE RECEIVED: 9/3/99
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DISP	DISPOSAL FACILITY CENTIFICATION: SIGNATURE DISPOSAL FACILITY CENTIFICATION: SIGNATURE TITLE DATE
	COMMENTS:

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•	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
٠.,		9/2/99
	Lochberd Marth Corp.	
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
63	Chu Can	31000
	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
Z	525 Frank RD, Uhrs, NY 13502	518.412.7826
110	WASTE TYPE / PROFILE # Estimate Yar	rds Container Type Container #
RA	A: Contain soil for cover - CL0431 A. 25	1 Atrack A B-521
GENERATION SITE	A: UMIUM SOU IN LOVE -CLU 731 M. C.	1
5	B: NON-HAZ- B.	B. B.
	Certification - I hereby declare that the contents of this consignment ar	a classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or sp	ecial handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which track	ing has been requested. The
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	Waste Authority. I certify that the above information is true and corre	ct and that it waste shipment is
	not as I have stated I will accept the return of the load at my (generator	9/2/09
•	touched Marking of for	
	Génerators Signature Title	Date
1	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Bunous Trucker	18110
		TICKET NUMBER:
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HAULER	DRIVERS SIGNATURE:	TRAILER NUMBER:
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<u>}</u>	Lian Potes Canatill Town	DATE RUCEIVED!
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	I wishhead Manton Com	9/2/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	Chris	Chath Gu
GENERATION SITE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
NO.	5.25 French Reb, Ulra, NY 13502	518-452 7826
Ĭ	WASIE TIPE / PROFILE #	Yards Container Type Container #
ER	A: Contam. Soul for cover CLOH31 122	27 1 true 1 17 -4/
Na Na	B: NUN-MAZ	
	B.	B. B.
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	and are in fact sewage sludge, construction and demolition debris or	special handling waste as defined in
1.	NYCRR Part 364 for which disposal has been approved or which tradisposal of material has been approved and the tracking is requested	
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,	that weekeed Much 1 17/8 day	9/2/95
1	Generators Signature Up. Title	Dáte
0	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Burrows Truck	18/10
æ	DRIVER'S NAME (PRINT):	TICKET NUMBÉR:
AULER	DRIVERS SIGNATURE:	TRAILER NUMBER:
HA		R-1117
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL:	
	DISPOSAL FACILITY NAME: DISPOSAL SITE	REPRESENTATIVE NAME:
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FACILI	WASTE TYPE RECEIVED:	DATE RECEIVED:
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	Male & Male	JP 9/3/99
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	COMMENTS:	

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	Certification - I hereby	declare that the contents of	of this consignment a	re classified as non-haza	ardous
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	Waste Authority. Leer	tify that the above informa	ition is true and corr	ect and that if waste shi	pment is
	not as I have stated, I w	ill accept the return of the	load at my (generate	or's) expense.	
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l	Generators Signature	Conjo	Title	Da	te
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HAI	DRIVERS SIGNATURE:			TRAILER NUMBER:	
	Pale Sod	COMMENTS:		15-446	
	DATE OF SHIPMENT O	COMMENTS:		CONTAINER SIZE /	TYPE:
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	COMMENTS:				

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
,	- Lochheed Martin Corps 9/3/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	Statises
E	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
Z	525 French NO, Utill, NY 13502 518-452-9826
12	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
E. E.	
GENERATION SITE	13. 10.11.41
5	B: NON-HAZ
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneidá – Herkimer Solid
	Waste Authority. I/certify that the above information is true and correct and that if waste shipment is not as I have stated, I will accept the return of the load at my (generator's) expense.
	9/7/98
•	Generator Signature Number Title Date
./	Generators Signature Film
(TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Burrows Trucking
~	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	Tick Feed
[AU	DRIVERS SIGNATURE: TRAILER NUMBER:
jalia	B-130
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL: 9/2/90
	1/3/11/
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
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CIT	WASTE TYPE RECEIVED: DATE RECEIVED:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Loddned Martin Corp.	913199
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE
	Chris Carr	STAFF Sci.
TE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
IS!	525 Franch Rd. Wig NY 1350	2 510-452-7636
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockherd Martin Cop. 9/3/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
E)	Chris Cano Spitt Sci.
SIT	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
NO	525 French Rd., Otica, NY 13509 510-452-7826
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	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
ر به هوا و به الله	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid Waste Authority. I certify that the above information is true and correct and that if waste shipment is
1	not as Thave stated, I will accept the return of the load at my (generator's) expense.
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()	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
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	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
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	COMMENTS:

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOC LOCKNEED Martin Gro	ATION: DATE: 9/3/99
ru)	CONTACT PERSON OR SITE REPRESENTATIVE:	STAFF Sci.
GENERATION SITE	FACILITY LOCATION/MAILING ADDRESS: 525 Froven Rd, Wica, N	13502 S18-452-7826
NERATI	A: CONTAIM. SOIL FOR COOK -CLOUSI	Estimate Yards Container Type Container # A. 16-18 A. Dwy A. B. 455"
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· (TRANSPORTING COMPANY NAME: RAYOUS TOUCKING	AUTHORITY PERMIT NUMBER:
HAULER	DRIVER'S NAME (PRINT): DRIVER'S SIGNATURE: October 1	TICKET NUMBER: 31969 TRAILER NUMBER: 1)-455
	DATE OF SHIPMENT OF COMMENTS: MATERIAL:	CONTAINER SIZE / TYPE:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lockherd Martin Corp	912199
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
, ,	1 Chris Carr	Staff Sci.
E	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
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Z	1 525 Franch Rd, Utica, UT 1350	1518-452-7826
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		FACILITY NAME OR ORIGIN OF MATERIAL/STREET LO	CATION. DA	TPT-	<u> </u>
		FACILITY NAME OF ORIGIN OF WATERIAL/STREET LO	CATION: DA	TE:	
		Lackher Martin Corp		913199	
٠.		CONTACT PERSON OR SITE REPRESENTATIVE?	, m	ILE:	
ſ				LITTL	
	E	FACILITY LOCATION/MAILING ADDRESS:			E NUMBER:
	SITE				
	Š	525 French Rd, Utica, NY 13 WASTE TYPE/PROFILE#	502	512-452	1-7826
	Ē	WASTE TYPE / PROFILE #	Estimate Yards	Container Type	Container #
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		Certification - I hereby declare that the contents of this con			
**		and are in fact sewage sludge, construction and demolition NYCRR Part 364 for which disposal has been approved or			
		disposal of material has been approved and the tracking is			
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		Generators Signature	Title		Date
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		DRIVER'S NAME (PRINT):	TIC	KET NUMBER:	
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		SIGNATURE COMMENTS:	TITLE	Up 9,	DATE)
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. *	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockheed Martin Con> 9/3/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	Chris Carr Staff Si
ITE	FACILITY LOCATION/MAILING ADDRESS: STAFF SC: TELEPHONE NUMBER:
SN	
9	525 French Roby Utica, M 13502 58-452-786 WASTE TYPE/PROFILE# Estimate Yards Container Type Container #
RA.	A: Contam. Saltor Cour - CL0431 A. 16-18 A. Dhys A. B-450
GENERATION SITE	3. 2.3.
5	B: Nsh-1/142 B. B. B.
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	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
•	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
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,	not as I have stated. I will accept the return of the load at my (generator's) expense.
	ANGE 4: 9/3/9
	Generators Signature Pharth Title Date
. (Commence of the second
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Iswaus Trucking 18/11
2	DRIVER'S NAME (PRINT): TICKET NUMBER:
JLE	Kod HALL
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION	
	Lactbred Mortin Corp	9 3 99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
jaj	Chris Carr	Stat 5:
SIT	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
GENERATION SITE	WASTE TYPE / PROFILE # Estima	te Yards Container Type Container #
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	not as Phave stated I will accent the return of the load at my (gene	rator's) expense.
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,	Generators Signature Martin Con Title	Date
_ _	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
-	Burrous Trudina	1011 Comber
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAÜLER		
A U	DRIVERS SIGNATURE:	TRAILER NUMBER:
#	F 5 10	13-521
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	COMMENTS:	

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
•	Lochled Martin Corp	9/3/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE: C/ 10 C
6	Ch Ch	Jaff su
SIT	FACILITY LOCATION/MAILING ADDRESS:	TELEPHÖNE NUMBER:
No	525 Fitnet Rd, Utra, NY 1350-	515-412-7820
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GENERATION SITE	A: Contain South cover - CL0431 A. 22-	27 Atali ASTIT
GE	p. Man -11At	
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W 1.5	disposal of material has been approved and the tracking is requested	by the Oneida - Herkimer Solid
•	Waste Authority. I certify that the above information is true and cor	rect and that if waste shipment is
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ر بولس درمسد	Generator Signature And Markey Title	/ S///
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æ	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	BRIAN SEAUSY	
HAT	DRIVERS SIGNATURE:	TRAILER NUMBER:
	Brian Staves	13-413
	DATE OF SHIPMENT OF COMMENTS: MATERIAL:	CONTAINER SIZE / TYPE:
	9/3/99	
N.	DISPOSAL FACILITY NAME: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	REPRESENTATIVE NAME:
	Wigh Hores and III Harla	1 YIL
Y	WASTE TYPE RECEIVED:	DATE RECEIVED:
	WASIE I WE RECEIVED:	DATE RECEIVED
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4	SCALE FULL EMPTY TICKET WEIGHT: WEIGHT:	NET/ / WEIGHT:
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DISPOSAL FACILITY	DISPOSAL PACILITY CERTIFICATION:	1 Mala
Ω	The Library Children	(8) 9/3/94
	SIGNATURE TITI	DATE DATE
	COMMENTS:	
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockley Marks Corps
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
G.	Chr Charles and Miller
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
GENERATION SITE	535 Frank Ad MAIN 214 13500 188 152-7528
2	WASTE TYPE / PROFILE # Estimate Yards Container Type Container # A: Contain Core Co431 A. 16-18 A. D. 481
AT.	WASTE TIPE / PROFILE #
K	A: Conta cost to core Cc0431 16-18 1 A Gent A. B-481
EN	
. 5	B: NON-HAZ B. B. B.
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
	Waste Authority. I certify that the above information is true and correct and that if waste shipment is
	not as I have stated, I will accept the return of the load at my (generator's) expense.
	Lockent Mark Miller
The Contract	Generators Signature Date
2	V. C.
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Barrow Trucky 18110
	DRIVER'S NAME (PRINT): TICKET NUMBER:
K	DRIVER STRUME (FRINT).
	11114/148 31 (1111)
HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
	111/1/2/2018
	DATE OF SHIPMENT OF / COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL: 9/
	7/2/64
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
	Lyn Oleans
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3	WASTE TYPE RECEIVED: DATE RECEIVED:
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i i	SCALE FULL EMPTY NET
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08	NUMBER:
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	CONTACT PERSON OR SITE REPRESENTATIV		1/1/17
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B	Ch an		17/1 /s
	FACILITY LOCATION/MAILING ADDRESS:		TELEPHONE NUMBER:
2	525 From No, Whom, NY	1200	518-451 7526
	WASTE TYPE / PROFILE #	Estimate Yards	Container Type Container #
GENERATION SITE		W2x A 16-18	A. D. 441
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8	B: NIN-HAZ	.В.	В. В.
		·B	B
	Certification - I hereby declare that the content and are in fact sewage sludge, construction and		
	NYCRR Part 364 for which disposal has been a		
	disposal of material has been approved and the		
	Waste Authority. A certify that the above inform		
	nof as I have stated I will accept the return of t	he load at my (generator's)	expense.
[ा] च्.	West Linkhard Black	TAILLE	9/7/97
	Generators Signature	Title	Date
	Comp.		
.	TRANSPORTING COMPANY NAME:	AUT	HORITY PERMIT NUMBER:
	Barrows Trushy		8 63
2	DRIVER'S NAME (PRINT):	TiCi	CET NUMBER:
AULER	Dhart = pholowing		
[AU	DRIVERS SIGNATURE:	TRA	ILER NUMBER:
	Fally - adllerus		B-440
	1 DATE OF SHIPMENT OF 1 COMMENTS:		ONTAINER SIZE / TYPE:
	MATERIAL:		
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	DISPOSAL FACILITY-NAME:	the state of the s	ESENTATIVE NAME:
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. A. C.		10el 7	17/99
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DIS	DISTOSAL FACILITY CERTIFICATION:	In 1	7
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	SIGNATURE	TITLE	DATE /
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	FACILITY NAME OR ORIGIN OF MATERI	AL CONDECT LOCATION	2.400
	Louhew Mark Con		DATE: 9/7/99
	CONTACT PERSON OR SITE REPRESENTA	TIVE:	TITLE:
F-3	Chu Can		SMA
SITI	FACILITY LOCATION/MAILING ADDRESS		TECEPHONE NUMBER:
NO	S25 French NO, Mtsse, M WASTE TYPE / PROFILE # A: Lowten Sort Con Cover	713502	511.412-7126
E S	WASTE TYPE / PROFILE #	Estimate Ya	
SENERATION SITE	A: Contan Sort la lavar	-CLOY31 A.16-11	A. 15 410
5	B: NON-HAZ		B B
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	NYCRR Part 364 for which disposal has be	en approved or which track	ing has been requested. The
	disposal of material has been approved and Waste Authority. I certify that the above is	nformation is true and corre	ect and that if waste shipment is
	not as I have stated, I will accept the return	of the load at my (generato	r's) expense.
	1 Contractor Marke	SAM Ja'	7/1/99
	Generators Signature Corps	/U Time	pate
<u> </u>	TRANSPORTING COMPANY NAME:		AUTHORITY PERMIT NUMBER:
	DRIVER'S NAME (PRINT):		TICKET NUMBER:
LER	William Banks		
HAULER	DRIVERS SIGNATURE:		TRAILER NUMBER:
	DATE OF SHIPMENT OF COMMENTS		13-490
	DATE OF SHIPMENT OF COMMENTS		CONTAINER SIZE / TYPE:
o gi stavi Hilosoph	7/1/13		
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λ	WASTE/TYPE RECEIVED:	Lejnn C	MCQLL DATE RECEIVED:
DISPOSAL FACILITY	WASTE/TYPE RECEIVED:	501	Olnlo
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	SIGNATURE	TITLE	DATE
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OMEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT

1600 Genesee Street, Utica, NY 13502

. (315) 733-1224

•		
	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	lockheed Marker lorg	7/7/89
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	Cham Car	fall fre
GENERATION SITE	FACILITY LOCATION/MAILING ADDRESS:	TEZEPHONE NUMBER:
N.	S25 French Rd, Ufre, NY 1802 WASTE TYPE / PROFILE # Estimate	178-452-7826
JII	WASTE TYPE / PROFILE # Estimate	
ERA	A: Contain Fort For Cover - CLOY31 A.16-18	1. Dung A. B-450.
EN		:
9	B: NON-HAZ B.	B B
L		<u>.</u>
1	Certification - I hereby declare that the contents of this consignment	
	and are in fact sewage sludge, construction and demolition debris or NYCRR Part 364 for which disposal has been approved or which tra	special handling waste as defined in
-	disposal of material has been approved and the tracking is requested	
	Waste Authority. Leertify that the above information is true and cor	rect and that if waste shipment is
e nakousokakoka	not as I have stated, I will accept the return of the load at my (genera	tor's) expense.
	Lumber Loubert Marker JMIII 180	1/7/17
	Generators Signature Corp. Title	Date'
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Envor Truch	18117
~	DRIVER'S NAME (PRINT):	TICKET NUMBER:
LEK	ROA MAIL	·
HAULER	DRIVERS SIGNATURE:	TRAILER NUMBER:
14	Rod Hall	B-450
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL: Q/2/66	
	7////	
		REPRESENTATIVE NAME:
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	WASTE TYPE RECEIVED:	DATE RECEIVED:
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		**
	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE: Q/ _ /-
	Lowheed Marker Corp	7/7/19
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	Chu Can	Stafffin
IT	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
SENERATION SITE	S25 French Rd, When, NY 13502 WASTETYPE/PROFILE# Estimate A: Corota Soul Procer - CLU431 A. 22-2	518-452-7826
Ĕ	WASTE TYPE / PROFILE # Estimate	
ERA	A: Cordan Soul For Cove - CLU431 A. 22-2	4 A. frail A. B-113
E SE	11/4.1.1642	
	B:	B B
	Certification - I hereby declare that the contents of this consignment	are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or NYCRR Part 364 for which disposal has been approved or which tra	
	disposal of material has been approved and the tracking is requested	
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	not as I have stated, I will accept the return of the load at my (gonera	
•	Landeng Martin SMIde	7/7/99
	Generators Signature Title	Date
i	1 Corp.	
•	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Byggins linking	18101
~	DRIVERSNAME (PRINT):	TICKET NUMBER:
HAULER	1 Torian Vandwar	
IN I	DRIVERS SIGNATURE:	TRAILER NUMBER:
	Diyla Ylu-	8-113
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL:	
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Ę	WASTE TYPE RECEIVED:	DATE RECEIVED:
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12		FACILITY NAME OR ORIGIN OF MATERIAL/ST	REET LOCATION: DAT	
		Lockheed Martin Corps		9/7/99
		CONTACT PERSON OR SITE REPRESENTATIVE	ŢITI	E
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E	1	FACILITY LOCATION/MAILING ADDRESS:		TELEPHONE NUMBER:
5	5	· Programme and the contract of the contract o	* ************************************	
Z	i 1	525 French Me, When, NY	13502	218-615 1850
		WASTE TYPE / PROFILE #	Estimate Yards	Container Type Container #
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GENERATION SITE				
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	•		E this sansianmini are als	spifod og nor hazardane
		Certification - I hereby declare that the contents and are in fact sewage sludge, construction and d	or this consignment are cit	bandling waste as defined in
		NYCRR Part 364 for which disposal has been app	proved or which tracking	has been requested. The
	in the second	disposal of material has been approved and the tr	acking is requested by the	Oneida – Herkimer Solid
		Waste Authority. I certify that the above information	ition is true and correct a	nd that if waste shipment is
		not as I have stated, I will accept the return of the	load at my (generator's)	expense.
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		Generators Signature	Ditle	Date
	. /	long		
		TRANSPORTING COMPANY NAME:	AUT	HORITY PERMIT NUMBER:
	···	Burns Trucky		18115
1 1		DRIVER'S NAME (PRINT):	Tici	KET NUMBER:
E		mm 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
HAULER		DRIVERS SIGNATURE:	an a	ILER NUMBER:
HA		DRIVERS SIGNATURE:	IKA	ILER NUMBER:
,	4 V	Trancis Keleben		13-121
<u> </u>		DATE OF SHIPMENT OF COMMENTS:	C	ONTAINER SIZE / TYPE:
		MATERIAL: 6/7/55		
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Ž		WASTE TYPE RECEIVED:		E RECEIVED:
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DISPOSAL FACILI		NUMBER:	1	
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockheed Much Corp 9/7/99
[CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	FACILITY LOCATION/MAILING ADDRESS: /ZELEPHONE NUMBER:
LIS	
· S	525 French Rd, When, NY 13102 518-412-7826
AT	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
ER	A: contan, sort la care-CLOY31 A. 2027 A trail AB-584
GENERATION SITE	R. NON-MAZ
ا ننگ	B B B
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
• • •	Waste Authority. I certify that the above information is true and correct and that if waste shipment is not as I have stated, I will accept the return of the load at my (generator's) expense.
Section 201	1 1 1/1/11/19 11/19/11/11/19
	Generator Signature Date
/	Joenstatoly organization of the state of the
į.	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Morrow Truck
2	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	DRIVERS SIGNATURE: C TRAILER NUMBER:
JAI	
	James a modere & R-514
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL: 9/7/99
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
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	WASTE TYPE RECEIVED: DATE RECEIVED:
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7	SCALE FULL EMPTY NET
DISPOSAL FACILIT	TICKET WEIGHT: WEIGHT: WEIGHT:
SPC	DISPOSAL FACILITY CERTIFICATION:
	All Okean Scalepper 9/1/99
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1600 Genesee Street, Utica, NY 13502

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	I where Markin Carp	4/7/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	1/4	Chille
SITE	FACILITY LOCATION/MAILING ADDRESS:	TEXEPHONE NUMBER:
IS	S → S → S →	
ģ	SEC French NV, MAIN, NY 13502	518-412-7524
₹	WASTE TYPE / PROFILE #	
GENERATION	A: Contin sort for com - CLO-171 A. 16.	11 Aldrip A.B. 483
	B: Non-MA2 B.	B. B.
	Certification - I hereby declare that the contents of this consignment	t are classified as non-hazardous
4.	and are in fact sewage sludge, construction and demolition debris or	special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tr	acking has been requested. The
4,	disposal of material has been approved and the tracking is requested. Waste Authority I certify that the above information is true and co	a by the Oheida — Herkimer Solid
	not as I have stated A will accept the return of the load at my gener	ator's) expense.
	not as I have stated I will accept the return of the load at my (gener	6/2/00
	John John March Hoff 89	
1	Generators Signature Carp Title	gama magamawa magama Date s Langgaran
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Burrow Turk	18111
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
K	1101 Mary	77710
HAULER	DRIVERS SIGNATURE:	TOLICED NUMBER.
₽	DRIVERS SIGNATURE:	TRAILER NUMBER:
	Moderat Care	15-703
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
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		È REPRESENTATIVE NAME:
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	Lochheed Marken losp.		1///
	CONTACT PERSON OR SITE REPRESENTATIVE:	TIT	LE:
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1	FACILITY LOCATION/MAILING ADDRESS:		AELEPHONE NUMBER:
Z	COCE AND MALL ON	7	515-412 Trib
GENERATION SITE	WASTE TYPE / PROFILE #	Estimate Yards	Container Type Container #
			Container Type Container w
23	A: Conten solfa cores - Cto	13.22 A 16-18	A. Dune A.15-490
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	<u>Certification</u> - I nereby declare that the contents of	this consignment are c	assined as non-nazardous
	and are in fact sewage sludge, construction and de	montion debris or specia	in nandning waste as defined to
	NYCRR Part 364 for which disposal has been app		
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	Waste Authority. I certify that the above informa	tion is true and correct a	ind that it waste snipment is
ž	not as I have stated. I will accept the return of the	load at my (generator's)	expense.
	I want of	(1011-6	9/7/99
	forther West	Title	
	Generators Signature	// title	Date
184 (i)		Complete Company Complete Company	
1866 - 1966	TRANSPORTING COMPANY NAME:	AU	THORITY PERMIT NUMBER:
	Gurrous Truckie		18/07
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I ¥	DRIVERS SIGNATURE:	TRA	AILER NUMBER:
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1 1	Bull Bable	<u>l</u> `	0 770
	DATE OF SHIPMENT OF COMMENTS:		CONTAINER SIZE / TYPE:
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	My Reary	Jacob)	1 1/11/7
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:	1 1
 T	Loshheld Marke lorp.	9/7/98
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE	(1111
5	FACILITY LOCATION/MAILING ADDRESS:	TEEPHONE NUMBER:
SI		
0 N	SAT Frank No, Uhra NY 13502 WASTE TYPE/PROFILE# Estimate Yards	516-452 - 7F26 Container Type Container #
AT	WASTE TYPE / PROFILE # Estimate Yards	Container Type Container #
GENERATION SITE	A Contain cont for core - CLOYS A 16-14	1 1 190 A. D. 190
GE	B: NIN-1972 B. B	. В.
	1 I	
, t(')	Certification - I hereby declare that the contents of this consignment are class	ified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special h NYCRR Part 364 for which disposal has been approved or which tracking ha	andling waste as defined in
,	disposal of material has been approved and the tracking is requested by the C	neida – Herkimer Solid
4 *	Waste Authority. Rertify that the above information is true and correct and	that if waste shipment is
	not as I have stated, I will accept the return of the load at my (generator's) ex	pense.
	In inder white Streff for	9/7/99
	Generator's Signature Title	/ Date
	TRANSPORTING COMPANY NAME: AUTHO	ORITY PERMIT NUMBER:
<u> </u>	Briver's NAME (PRINT): TICKE	1(107)
ا يے ا	DRIVER'S NAME (PRINT): TICKE	T NUMBER:
HAULER	DI IC	
EAL	DENTER SIGNATURE DE MICE TRAIL	ER NUMBER:
	nn and no	15-940
	DATE OF SHIPMENT OF WILL COMMENTS: COMMENTS:	NTAINER SIZE / TYPE:
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	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRES	ENTRANCE NAME:
		71/1
2	Frak acus Lynn C	May
II.	WASTE TYPE RECEIVED:	RECEIVED:
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3	SCALE FULL EMPTY TICKET WEIGHT: WEIGHT:	NET WEIGHT:
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dSi	DISPOSAL FACILITY CERTIFICATION:	
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•	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
		9/7/49
•	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
		THE CAN C
jaj	Churca	1/4//
SIT	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
8	525 Frank Rd, Whan NY 13502	L18-185-2114
ATI	WASTE TYPE / PROFILE # Estimate	
ER	S 25 from AD, When N 13502 WASTE TYPE / PROFILE # Estimate A: Compan for Core - CLOY31 A. 14.	1x A. Dump A. 18-450
GENERATION SITE	1 sharing	
	B: 10010 - 144 2 B	B B
	Certification - I hereby declare that the contents of this consignment	are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or NYCRR Part 364 for which disposal has been approved or which tra	special handling waste as defined in lacking has been requested. The
	disposal of material has been approved and the tracking is requested	l by the Oneida – Herkimèr Solid
, . ·	Waste Authority. I certify that the above information is true and co	
	not as have stated will accept the return of the load at my (gener,	ator's) expense.
	John Soldies Minh 17/1/1	1/7/97
· · · //	Generators Signature Con.	/ Date
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Bunow Truck	18117
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
CER	Rad HAIN	
HAULER	DRIVERS SIGNATURE:	TRAILER NUMBER:
#]	RM 4-00	17-41
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL: A/2/90	
•	7/ ///	•
	DISPOSAL FACILITY NAME: DISPOSAL SIT	E REPRESENTATIVE NAME:
>	Street acres Lynn	Dran
	WASTE TYPE RECEIVED:	DATE RECEIVED:
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ONEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lochhed Mustin Cop	9/7/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
·	Clrus Can	17/1/200
SILL.	FACILITY LOCATION/MAILING ADDRESS:	PÉÉPHONE NUMBER:
GENERATION SITE	525 French Rd, Utres, NY 13502	218-115-2056
ATT	WASTE TYPE / PROFILE # Estimate	. 1 // 1
(E.R.	A: Confum. Soil for Cover - CLOY31 A16.	1/ A. Ump A. 15-5/0
E E E	B: NON-NAZ	
	B	B
	Certification - I hereby declare that the contents of this consignmen	t are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris of	special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tr disposal of material has been approved and the tracking is requeste	
	Waste Authority I certify that the above information is true and co	rrect and that if waste shipment is
	not as I have stated, I will accept the return of the load at my (gener	ator's) expense.
	the touther wash fall to	1/7/77
(Generatory Signature Cons.	V Date
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Burrows Truck-y DRIVER'S NAME (PRINT):	home .
H.	ar	TICKET NUMBER:
HAULER	DOB SPELLMAN DRIVERS SIGNATURE:	TRAILER NUMBER:
H.	A A A A	1)-1-16
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL: 9/7/89	
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OSAL FACILITY	DISPOSAL FACILITY NAME: DISPOSAL SIT WASTE TYPE RECEIVED: SCALE TICKET NUMBER: DISPOSAL SIT WHICKET WEIGHT: WEIGHT:	DICAILI DATE RECEIVED: 1.99
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·	•		FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
:	•		Lordheed Martin Corp.	9/8/99
			CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE;
	· .	7	Cha Cun	(FM Sec.
	ITE		FACILITY LOCATION/MAILING ADDRESS:	ZELEPHONE NUMBER:
•	S		525 Freeh Web, Uter, NY 13502	1-8-452-7876
	TIO		WASTE TYPE / PROFILE # Estimate	ards Container Type Container #
	ERA		A: Contan. Essel for war- CLO43/ A.16.1	8 ADing AB-440
	GENERATION SITE			
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			<u>Certification</u> - I hereby declare that the contents of this consignment and are in fact sewage sludge, construction and demolition debris or s	
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			disposal of material has been approved and the tracking is requested	
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		. 11	I The first the way	9/8/99
			Generators Signature Comment Title	Date
	·		TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
			DRIVER'S NAME (PRINT):	TICKET NUMBER:
	ER		The state of the s	TICKET NOWIBER:
	HAULER		DRIVERS SIGNATURE:	TRAILER NUMBER:
4	H		in Marie Land	13-440
L		╝╏	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
		İ	MATERIAL: 4/8/65	
		l		16-18-id Dumb
_		_	DISPOSAL FACILITY NAME: DISPOSAL SITE	REPRESENTATIVE NAME:
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	H		WASTE TYPE RECEIVED:	DATE RECEIVED:
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	7		SCALE FULL EMPTY TICKEP WEIGHT: WEIGHT:	NET WEIGHT:
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L	-	_] 1	Typi Okean Cale	Des 9/8/99
			SIGNATURE TITL	E DATE
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1600 Genesee Street, Utica, NY 13502

(315) 733-1224

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	Lochheed Martin lorge 7/8/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
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田	FACILITY LOCATION/MAILING ADDRESS: TEEPHONE NUMBER:
SI	
GENERATION SITE	525 French Rel, Uhra Ny 13502 518-412-2826
	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
ER	A: Contain Solf cover- CLOY71 A. 14-18 A. Days A. B-450 B: NON-14/72 B. B. B.
E	1101 1100
l o	B: NON-1474-t B. B. B.
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
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, ,	disposal of material has been approved and the tracking is requested by the Oneida - Herkimer Solid
٠	Waste Authority. I certify that the above information is true and correct and that if waste shipment is
	not as I have stated. I will accept the return of the load at my (generator's) expense.
	I have tookked dank MIII the 9/8/79
••	Generatory Signature Date Date
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	PRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Emons Trucky 18111
ا يم	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	RAJ HOLL
AU	DRIVERS SIGNATURE: TRAILER NUMBER:
Ħ	R-450
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
<i>y</i> .	MATERIAL: 26
	7/8/4/
	DISPOSAL FACILITY-NAME: DISPOSAL SITE REPRESENTATIVE NAME:
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7	Fryh Cous Lynn Olean
רבו	WASTE TYPE RECEIVED: DATE RECEIVED:
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Ω .	den Alan alala
	SIGNATURE TITLE DATE
	SIGNATURE / IIILE DATE
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			will accept the retur				
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	<i>'</i>	Generators Signature	corp.	1	1 ille		Date
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lorenheed Marka Corp
, V	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
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TE	FACILITY LOCATION/MAILING ADDRESS: TEKEPHONE NUMBER:
S	525 French Pel, Win N1 13502 178-412 7/20
Õ	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
Z	1 2 1 1 1 1 1 1 X
GENERATION SITE	WASTE TYPE / PROFILE # A: Contain Soul for Cover - Cloy71 A. 14-18 A. Dlay A.B. 490
3	B. NON-HAZ
	B. B. B.
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida - Herkimer Solid
	Waste Authority. Leeptify that the above information is true and correct and that if waste shipment is
	not as I have stated. I will accept the return of the load at my (generator's) expense.
	for for bookbeed warm of the star 9/1/17
	Generator Signature Date Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
 ;	Remora tauchan 18119
	DRIVER'S NAME (PRINT): TICKET NUMBER:
Ä	PHPM
IAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
Ħ	D112 A
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
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,	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Loshled Muster Corp	9/8/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:_
		CLMC
J.E	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
SI		TELEPHONE NUMBER.
NO.	525 French Rd, When, NY 13102	518-185-1856
AT.	WASTE TYPE / PROFILE # Estimate	
ER	A: Gorton. conto con - CLO431 A10-	18 A. 1) CO (2)
GENERATION SITE	B: NON-HAZ	, , , , , , , , , , , , , , , , , , ,
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	Certification - I hereby declare that the contents of this consignment	are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or	
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	Waste Authority I certify that the above information is true and cor	rect and that if waste shipment is
11	not as I have stated. Will accept the return of the load at my (genera	tor's) expense.
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,	Generators Signature Title	Date
) Cory).	
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Eurous Trulky	Nova
~	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	DUD SPELLMEN	
SA	DRIVERS SIGNATURE:	TRAILER NUMBER:
#	B. I D. Illan	18-510
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL: 16 60	
	9/8/99	
	DISPOSAL FACILITY NAME: DISPOSAL SITE	REPRESENTATIVE NAME:
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(315) 733-1224

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lackberr Marta Cors	7/8/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
5.3	1 Chi Chi	Olos 13/2
	FACILITY LOCATION/MAILING ADDRESS:	PELEPHONE NUMBER:
ONO	5-25 French Me Uha NY 13502	5-18-412-7826
ATT	WASTE TYPE / PROFILE # Estimate \	/ards Container Type Container #
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8	B:	В. В.
	B.	
	Certification - I hereby declare that the contents of this consignment	are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or	special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which trac	
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· ·	not as I have stated, I will accept the return of the load at my (general	tor's) expense.
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	Generator Signature /// Title	- Poss
/	Generators Signature	, Date
<u></u>	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	Kyrrows / num	
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	Pad WOLL	
AU	DRIVERS SIGNATURE:	TRAILER NUMBER:
Ħ	Red Hall	BUKI)
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()	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lackbert Mark Corp. 9/8/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
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I SIT	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
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· · · · · ·	<u>Certification</u> - I hereby declare that the contents of this consignment are classified as non-hazardous and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
*	Waste Authority. Leartify that the above information is true and correct and that if waste shipment is
	not as I bave stated, I will accept the return of the load at my (generator's) expense.
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5	Comp.
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	Bill Raxton
HAU	DRIVERS SIGNATURE: TRAILER NUMBER:
	Bill 15440
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
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B440

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	V.)
72	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockheed Mark Corp. 1/8/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
_ , , , , , , , , , , , , , , , , , , ,	COMACT TERSON OR SITE REPRESENTATIVE:
- m	Christan 1911
E	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
S	5.25 french NO, Uhra, NY 13502 578-452-7826
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•	not as I have stated, I will accept the return of the load at my (generator's) expense.
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1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:	
	Lochheed Marta Corps 9/1/99	
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:	
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ž	525 Ful Ad Ulan NJ 17502 578-452-788	,
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	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous	
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The	1
	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid	
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	not as I have stated, I will accept the return of the load at my (generator's) expense.	
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	Lockreed Markin Corps. DATE: 9/8/99
. j . j	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	Charles 87MSa
TIE	FACILITY LOCATION/MAILING ADDRESS: ZELEPHONE NUMBER:
NC	5.25 French Rd, Uther, NY 13502 518-412-7826
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•	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Louble Much Corp. 9/9/95
1 7 7 7	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	Christa.
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	I as agent for the first of the
	Generator Signature Date
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· 	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	DRIVER'S NAME (PRINT): TICKET NUMBER:
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нас	DRIVERS SIGNATURE: TRAILER NUMBER:
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1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	CONTACT PERSON OR SITE REPRESENTATIVE:	7/8/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
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Str	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
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	Generators Signature Cons	Date
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HAI	DRIVERS SIGNATURE:	TRAILER NUMBER:
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· iz:	DRIVER'S NAME (PRINT):	TICKET NUMBER:
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(AU	DRIVERS SIGNATURE:	TRAILER NUMBER:
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1600 Genesee Street, Utica, NY 13502

(315) 733-1224

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	Lochheed Marken Corp	7/9/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
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ON SITE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
	525 French Nd, Utom, Ny 13502	511-452 7824
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	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
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1600 Genesee Street, Utica, NY 13502 (315) 733-1224

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*	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:		
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockheed Marky Corp. CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
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3.R	DRIVER'S NAME (PRINT): TICKET NUMBER:
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(315) 733-1224

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lockheed Martin Corp.	9/9/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
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SIT	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
GENERATION SITE	525 Freich NO, Wifee, NY 13502	518-412 7800
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lorther Mark Corn 9/9/99
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	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
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S	OF E. A. A. M. 13002 08-452-7626
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5	B: NON-HAT
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	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
` .	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
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•	not as I have stated, I will accept the return of the load at my (generator's) expense.
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	Blynon Michy 1811
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	525 French Rd, Upra, NY 17502	518-412 7826
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	and the second s	
	B: // BA ~ /7///	B. B.
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	Certification - I hereby declare that the contents of this consignment of the consignment of the consignment of the construction and demolition debrished are in fact sewage sludge, construction and demolition debrished.	
	NYCRR Part 364 for which disposal has been approved or which	
	lisposal of material has been approved and the tracking is reque	
	Waste Authority. I cortify that the above information is true and not as I have stated A will accept the return of the load at my (get	correct and that if waste shipment i
ŀ	tot as I have stated I will accept the return of the load at my (get	nerator sy expense.
,	John Johnson Mark Styff 12	1/2/7!
٠,	Generator Signature Com	Date
-	FRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBE
	Brown Trucky	18/14
Ĭ	DRIVER'S NAME (PRINT):	TICKET NUMBER:
	Brian Source	
Ĭ	DRIVERS SIGNATURE:	TRAILER NUMBER:
	RAIDASMINI	D 413
	PATE OF SHIPMENT OF COMMENTS:	ONTAINER SIZE / TYPE:
ľ	IATERIAL: 6 / Sc	
Î	DISPOSAL FACILITY NAME: DISPOSAL S	SITE REPRESENTATIVE NAME:
	(Nighthers Land: 11 / A.	in Mhuzizer
Ĭ	VASTE TYPE RECEIVED:	DATE RECEIVED;
	생기 (목가를 다른 기가는 문제 다음 기가는 기가였다.	aliaba
	CALE / FULL EMPTY	NET /
	TCKET // WEIGHT: WEIGHT:	WEIGHT:
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j.	ISPOSAL FACILITY CERTIFICATION: -	1 Man Malan
Ť	The Allewance Ma	(c (p) 4/10/99
	SIGNATURE	TITLE DATE
ŕ	OMMENTS:	

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	<u> </u>
: 1	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
) - (Lockheed Must Con 9/10/99
1	CONTACT PERSON OR SITE REPRESENTATIVE:
-	I have can the state of the sta
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
N.	SUFFICIAN, What, NY ITSOL 518-452-7126 WASTE TYPE / PROFILE # Estimate Yards Container Type Container # A: Comba South Cover - CLOY 31 A. 24 A. Haw A. B-514
)II	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
ERA	A: links Corthy Corr - (LOY31 A. 24 A + West A. B-514)
GENERATION SITE	
9	B: Non-Was B. B. B.
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	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida - Herkimer Solid
	Waste Authority. I certify that the above information is true and correct and that if waste shipment is
τ,	not as thave stated I will accept the return of the load at my (generator's) expense.
,	The Lordon Marka 1 /1/1/99
	Generators Signature Com Pitte Date
	TRANSPORTING COMPANY NAME: / AUTHORITY PERMIT NUMBER:
	Burn Tunka 18/08
æ	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	JAMES A. MADORE SL
HA	DRIVERS SIGNATURE: TRAILER NUMBER:
	Fres a Moder to 1 15-31-7
 	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE TYPE:  MATERIAL:  Output  Description:  MATERIAL:  Output  Description:  Output  Descri
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
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YE!	WASTE TYPE RECEIVED: DATE RECEIVED:
딩	5011 9/10/99
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Sig	DISPOSAL FACILITY CERTIFICATION:
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	SIGNATURE / TITLE / / DATE/
	COMMENTS:

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	
	Lochheed Month Cop	9/10/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
E2	Chich	1/1/1/1/1
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ð	Ses French Rd, When, NY 13/02	Yards   Container Type   Container #
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É	B. Non-HAZ	
	B.	B
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	disposal of material has been approved and the tracking is requested	
	Waste Authority. I certify that the above information is true and co	
	not as I have stated. I will accept the return of the load at my (gener	ator's) expense.
,	Lookheed Mich Solly 12	7/10/99
	Generators Signature Law. Title	/ Bate
4	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
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	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL:	
	DISPOSAL/FACILITY NAME: DISPOSAL SIT	E REPRESENTATIVE NAME:
	diah (deles) Les	no deales
	WASTE TYPE RECEIVED:	DATE RECEIVED:
5		9/10/09
F.	SCALE FULL EMPTY	1 NET
YY	TICKET WEIGHT: WEIGHT:	WEIGHT:
õ	NUMBER:	
DISPOSAL FACILITY	DISPOSAL FACILITY CERTIFICATION:	1 1 - 011
	Type young la	10/4 1/10/99
	SIGNATURE	LE DATE
	COMMENTS:	

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:			
	bothhead Marker Corr			
	CONTACT PERSON OR SITE REPRESENTATIVE:			
-	CONTACT TERSON OR SITE RESERVATIVE.			
(4)	Christian Stall			
SITE	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:			
S	( Care that I do the land 121000 1016. UM - 7148			
GENERATION	525 French Les Mars NY 13502 518.411-1845			
<del> </del>	WASTE TYPE / PROFILE # Container Type Container #			
22	A: Contan Find for corn-CLOUSI A. 24 Atunh A. B-10			
Z				
<b>5</b>	B: Non-HAZ B. B. B.			
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous			
and are in fact sewage sludge, construction and demolition debris or special handling waste a				
•	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid			
9	Waste Authority. I certify that the above information is true and correct and that if waste shipment is			
<b>Y</b>	not as I have stated, I will accept the return of the load at my (generator's) expense.			
	9/10/99			
	Generators Signature Alman /// Title Date			
	De la			
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:			
<u> </u>	18115			
	DRIVER'S NAME (PRINT): TICKET NUMBER:			
×				
HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:			
Ĭ.	DRIVERS SIGNATURE: TRAILER NUMBER:			
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PINK COPY - DISPOSAL FACILITY COPY



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(315) 733-1224

			Que 10
•	FACILITY NAME OR ORIGIN OF MATERIAL/STREE	T LOCATION: DATE	2613
	CONTACT PERSON OR SITE REPRESENTATIVE:		9/8/99
,	CONTACT PERSON-OR SITE REPRESENTATIVE:	TITLE	and C
THE E	FACILITY LOCATION/MAILING ADDRESS:		TELEPHONE NUMBER:
SIS	525 Band AD When, NY 131	7)-a	
Į į	WASTE TYPE / PROFILE #		SIS-III & - 752C
RA.		Clarent	Di. 1 R-140
GENERATION SITE	A: bontain soul for cover. CL 043		`
9	B: Non/-HH7	B I	3. B.
	Certification - I hereby declare that the contents of the		
	and are in fact sewage sludge, construction and demo NYCRR Part 364 for which disposal has been approv		
	disposal of material has been approved and the track		
	Waste Authority. I certify that the above information not as I have stated A will accept the return of the loa		
ر برورتغورت میشاند	Leading and the	11/	9/4/45
	Generators Signature	Title	Dytte
	TRANSPORTING COMPANY NAME:	AITH	ORITY PERMIT NUMBER:
		7.011	18107
	BWWW Truck, DRIVER'S NAME (PRINT):	тіскі	T NUMBER:
HAULER	Abort Daglerinix		
HAU	DRIVERS SIGNATURE:	TRAII	ER NUMBER:
	DATE OF SHIPMENT OF COMMENTS:		11-440
	DATE OF SHIPMENT OF COMMENTS:	CO	NTAINER SIZE / TYPE:
	9/3/99	· * * * * * * * * * * * * * * * * * * *	1810 Jonay
	DISPOSAL/FACILITY NAME:	DISPOSAL SITE REPRE	
[ > ]	digh alles	hem DI	caus
	WASTE TYPE RECEIVED:	DATE	RECEIVED:
ACI	20/	4	11099
		EMPTY	NET WEIGHT:
OSA	TICKET WEIGHT: NUMBER:	WEICHT:	WEIGHT:
DISPOSAL FACILITY	DISPOSAL FACILITY CERTIFICATION:		0/0/00
	DUNI KRAU	Naleone	1 9/10/99
	SIGNATURE	TITLE	DATE
	COMMENTS:		

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(315) 733-1224.

		6
	Lochled White Corp	DATE: 9/8/59
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE: (fall) Ser
SITE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
TON	WASTE TYPE / PROFILE # Estimate	Yards   Container Type   Container #
GENERATION	A: Contam. south cover - CLOY71 A. K	
5,	B: NON WAZ	ВВ.
1	Certification - I hereby declare that the contents of this consignment	t are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or NYCRR Part 364 for which disposal has been approved or which tradisposal of material has been approved and the tracking is requested Waste Authority. Lertify that the above information is true and congras I have stated, I will accept the return of the load at my (gener	special handling waste as defined in acking has been requested. The I by the Oneida – Herkimer Solid rrect and that if waste shipment is
نست در د	Generators Signature Cong. Title	9/3 /99 Date
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
HAULER	DRIVER'S NAME (PRINT): SOB SPELLMAN	TICKET NUMBER:
HAU	DRIVERS SIGNATURE:	TRAILER NUMBER:
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
	DISPOSAL FACILITY NAME: DISPOSAL SIT	E REPRESENTATIVE NAME:
ITX		
SITTY	WASTE TYPE RECEIVED: KYN	DATE RECEIVED:
FACILITY	5016	DATE RECEIVED:  9/10/99
OSAL FACILITY	WASTE TYPE RECEIVED:  SCALE TICKET NUMBER:  WEIGHT:	DATE RECEIVED:    DATE RECEIVED:   DATE RECEIVED:   DATE RECEIVED:   DATE RECEIVED:   WEIGHT:
DISPOSAL FACILITY	SCALE FULL EMPTY TICKET WEIGHT: WEIGHT:	9/10/99 NET 9
DISPOSAL FACILITY	SCALE FULL EMPTY TICKET WEIGHT: WEIGHT:	9/10/99 NET 9

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NA.	
	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Loshberd Marks long
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	Challeton Challeton
12	FACILITY LOCATION/MAILING ADDRESS:  TELEPHONE NUMBER:
SI	
ő	525 Fresh RD, Uhan, MY 13102 518-452-1826
5	WASTE TYPE / PROFILE # Estimate Yards   Container Type   Container #
3	A: Corbe Soul for your - Chays 1 11 20 1. Day 1. 18-491
GENERATION SITE	
ן ט	B: Non-HAZ B. B.
and the second	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
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	Waste Authority. I certify that the above information is true and correct and that if waste shipment is
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	Generators Signature Date
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	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	DRIVER'S NAME (PRINT): TICKET NUMBER:
×	DRIVER'S NAME (PRINT):
J. I	Dill Baxter
HAULER	DRIVERS SIGNATURE: 1 TRAILER NUMBER:
	5el 6aft
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL:
	7/10/99
	disposal facility name: disposal site representative name:
	della della
£	WASTE TYPE RECEIVED:  DATE RECEIVED:
H	Sail
DISPOSAL FACILIT	2010 7/10/99
	SCALE FULL EMPTY NET / TICKET WEIGHT: WEIGHT:
VSC	NUMBER:
	DISPOSAL FACILITY GERTIFICATION:
	Site of the see Malina 9/10/99
	The May Start 11011
	SIGNATURE / DATE /
-	COMMENTS:

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•		FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
4		
		CONTACT PERSON OR SITE REPRESENTATIVE: TITLE: 1 2 C
F	<b>-</b>	CONTROL PERSON OR SITE REPRESENTATIVE:
色		FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
S		FACILITY LOCATION/MAILING ADDRESS:  TELEPHONE NUMBER:
Į Ž		535 Frank Ht, Uhr, NY 13502 11-412-7896
GENERATION SITE		
Ä		A: Comban Southa Cover. CLOYS! A. 18th A. My A. D. Y) N
GE		A: Contain solfor cover. CLOY31 A. 1814 A. Dry A. 15-450 B: Non-1442 B. B. B. B.
	╜┃	B. B. B.
		<u>Certification</u> - I hereby declare that the contents of this consignment are classified as non-hazardous and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
4:	Ĭ	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
		disposal of material has been approved and the tracking is requested by the Oneida - Herkimer Solid
	- 1	Waste Authority. I certify that the above information is true and correct and that if waste shipment is
		not as I have stated, I will accept the return of the load at my (generator's) expense.
		Contract to the total total
	A	Generators Signature Conga. / Title Date
•	4	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
· ·	7 ]	Bury Truck DRIVER'S NAME (PRINT):  TICKET NUMBER:
~		DRIVER'S NAME (PRINT): TICKET NUMBER:
LE		Rad Hall
HAULER		ROC Hall DRIVERS SIGNATURE: TRAILER NUMBER:
<b>14</b>		Rod Hall
	J	DATE OF SHIPMENT OF   COMMENTS:   CONTAINER SIZE / TYPE:
	. [	MATERIAL: 9/10/199
	L	
		DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
<u> </u>		Agh (acres) Lynn Ollaces
<b>5</b> .	$\prod$	WASTERYPE RECEIVED: DATE RECEIVED:
DISPOSAL FACILIT		501/2 9/10/99
) 		SCALE FULL EMPTY NET
SA		TICKET WEIGHT: WEIGHT: WEIGHT:
SPC	1 1	DISPOSAL FACILITY CERTIFICATION:
IQ		XXVIII Dela Colone Glass
	<b>-</b> '   ·	SIGNATURE TITLE DATE
*	L	
	- 17	COMMENTS:

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*	
	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockhed Whatin Com alizage
i	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
<u> </u>	TOST 12 May
4 🖹	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
SI	
<u> </u>	535 Franch Pd. Utica, NY 13500 518-451-7626
A L	WASTE TYPE / PROFILE # Estimate Yards   Container Type   Container #
GENERATION SITE	1. Katam Soil For Guar - Clot (3) 1
H. H.	I have the
	B:   B   B
<u> </u>	
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida — Herkimer Solid Waste Authority. I certify that the above information is true and correct and that if waste shipment is
	pot as I have stated. I will accept the return of the load at my (generator's) expense.
	1/1/02+DB99999 GOLLY
	Generators Signature Latin Gaz
	Generators Signature Hotin Cop. Title Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Burays Trudaina 18103
	DRIVER'S NAME (PRINT): TICKET NUMBER:
ER	Dd 1 =
HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
H H	
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL:
	16-18-10 Dian
" .	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
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DISPOSAL FACILITY	WASTE TYPE RECEIVED: DATE RECEIVED:
Ç	Miles 19/13/99
, R	SCALE FULL EMPTY NET
SAI	TICKET WEIGHT: WEIGHT:
Ŏ.	NUMBER:
SIG	DISPOSAL FACILITY CERTIFICATION:
	Synokian Saleope 9/13/99
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	COMMENTS:
	COMMENTS.
•	<u>.</u>

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•.	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lackhed Martin Carp.	913/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
63	Jett Loustrel	50
	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
GENERATION SITE	525 French Rd, Utica, Mr. 13502	518-452-7836
Ē	WASTE TYPE / PROFILE # / Estimate	Yards Container Type Container #
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	disposal of material has been approved and the tracking is requested	by the Oneida - Herkimer Solid
	Waste Authority. I certify that the above information is true and cor	rect and that if waste shipment is
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ï	Senerators Signature About Com. Title	Dale
÷.	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
<u>1</u>	12 ma & Tortina	8114
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	Project Spring.	
AU	DRIVERS SIGNATURE:	TRAILER NUMBER:
#	Brian Sonier	13-413
	DATE OF SHIPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
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		REPRESENTATIVE NAME:
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4,	COMMENTS:	

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	Lockher	Motion Corp.		۵	713199	
	CONTACT PERSON OR SI	TE REPRESENTATIVE:		TITLI	E: / .	
<b>E</b>		Sousteel			500	
SIT	FACILITY LOCATION/MA				TELEPHONI	_
NO	505 French	Rd., Utica, M	13502		512-452-7	
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GE	B: Nan-H				•	D
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	I VIPI DOWN X	= Loure	Scientist		9	13/97
	Generators Signature	yn cop.	Title		•	Date
	TRANSPORTING COMPAN	IY NAME:	· · · · · · · · · · · · · · · · · · ·		ORITY PERM	IT NUMBER:
	Burraus	Truking			8115	
<b>8</b>	DRIVER'S NAME (PRINT):			TICK	ET NUMBER:	
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}	COMMENTS:					

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WHITE COPY - GENERATOR / HAULER / TRANSPORTER COPY YELLOW COPY - ONEIDA HERKIMER SOLID WASTE AUTHORITY COPY

PINK COPY - DISPOSAL FACILITY COPY

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•					
	FACILITY NAME OR	ORIGIN OF MATERIAL/ST	REET LOCATION:	DATE:	ı
	Latherd	Martin Carp.	-	9/13/99	<i>i</i> /
		R SITE REPRESENTATIVE:		TITLE:	
Д		Bausteel		501	
SIT	FACILITY LOCATION	MAILING ADDRESS:			IE NUMBER:
NOI	525 French	Rd, Utica, NY	13502		57.7676
ATI	WASTE TYPE / PROFIL	Æ# / 1	Estimate Y	Yards Container Type	Container#
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	1 MI DOWN	for lather		<u> </u>	
	Generators Signature	Marinary.	1106		Date
	TRANSPORTING COM	PANY NAME:		AUTHORITY PERM	IIT NUMBER:
	Kurrew	5 Tracking		18117	
~	DRIVER'S NAME (PRIN	T):		TICKET NUMBER:	
HAULER	I RAL U	011	;	:	٠.
AU	DRIVERS SIGNATURE:			TRAILER NUMBER	ξ:
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	DATE OF SHIPMENT OF COMMENTS:			CONTAINER SIZ	ZE / TYPE:
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<del></del>	DISPOSAL FACILITY N			REPRESENTATIVE	NAME:
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	WASTE TYPE RECEIVE	DD:		DATE RECEIVED:	
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	LO-1/201 Motiva Coro. 9/13/199
	CONTACT PERSON OR SITE REPRESENTATIVES TITLE:
	TOFF British
13	FACILITY LOCATION/MAILING ADDRESS:  TELEPHONE NUMBER:
SI	
Õ	SOS French Rd, Utica, NY 13502 SO-450-7806 WASTE TYPE / PROFILE #   Estimate Yards   Container Type   Container #
<del>T</del>	WASTE TYPE / PROFILE #   Estimate Yards   Container Type   Container #
GENERATION SITE	1. Contam. Soil For over-claps/ 1 1 Teit 13-
E	
9	B: Lon-Haz B. B. B.
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1 - 1 - 1	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid Waste Authority. I certify that the above information is true and correct and that if waste shipment is
	not as I have stated. I will accept the return of the load at my (generator's) expense.
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	May to Lordico 500ths 913th
	Generators Signature Months Com
,	TRANSPORTEGENOMPANY NAME: AUTHORITY PERMIT NUMBER:
· ·	Buraus Trutiva 18108
	DRY 19 02 (PRINT): TICKET NUMBER:
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	time ( ) 13-514
I	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	DISPOSAL SITE REPRESENTATIVE NAME:
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	WASTE TYPE RECEIVED: DATE RECEIVED:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lookhard Martin Cap. 9/13/99
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
pa	De la Consticci
IIS	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
GENERATION SITE	WASTE TYPE / PROFILE #   SGO2   58.452.7836
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EE CE	B: Nan-Haz
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	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
A. C.	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
· **	Waste Authority. I certify that the above information is true and correct and that if waste shipment is
	not at I have stated, I will accept the return of the load at my (generator's) expense.
	1/14/02 the most
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v ²	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
<del></del>	Bereak Textisa 18109
	DRIVER'S NAME (PRINT): TICKET NUMBER:
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HAULER	Bill Baxter
HA	DRIVERS SIGNATURE: TRAILER NUMBER:
	500 Boll
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
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E	WASTE TYPE RECEIVED: LYN (MU)  WASTE TYPE RECEIVED:
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	MANNIAU LAVORDE 9/13/17
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	O DIAMANITA OI

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockhart Martin Cons
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	Jeff Panoteel Sci
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
SZ	65 Forch Rol, Utka NY 13602 518-450-7806
GENERATION SITE	WASTE TYPE / PROFILE #   Estimate Yards   Container Type   Container #
<b>₹</b>	
Z E	1. Cortam. Soil For Court - CLON31 1 - 12510
3	B. A.
	B. B. B.
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· .	not as I have stated, I will accept the return of the load at my (generator's) expense.
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	Generatory Signature Works Copi Title Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	DRIVER'S NAME (PRINT):  TICKET NUMBER:
×	DRIVER'S NAME (PRINT):
HAULER	BUB SPECCOUNT
HA	DRIVERS SIGNATURE: TRAILER NUMBER:
	150 Daylon 15-510
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
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15	WASTE TYPE RECEIVED: DATE RECEIVED:
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AL.	TICKET WEIGHT: WEIGHT: WEIGHT:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:	
	Lockwed Mortin Corp. 9131	M
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:	
i i	Jeff Konskel	
SITE	FACILITY LOCATION/MAILING ADDRESS: TELEPHO	ONE NUMBER:
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Ĭ,	【】【《经验结合》:"我们,我们是有点,我们是这个人,我们是这种的,我们也不是一样的。""我们,我们是这种的,我们是我们是这个人的。""我们是这个人,我们就是	pe Container#
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	and are in fact sewage sludge, construction and demolition debris or special handling w NYCRR Part 364 for which disposal has been approved or which tracking has been req	
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ir.	not as I have stated, I will accept the return of the load at my (generator's) expense.	1-1-
	My mounter torkned scientist	91399
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	Burous Touting 18101	
	DRIVER'S NAME (PRINT):\ TICKET NUMBE	R:
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[AU]	DRIVERS SIGNATURE: TRAILER NUMB	ER:
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<i>3</i>		
The second	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lockhard Mortin Corp.	9113199
<u> </u>	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
100	AS POSTE	
	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
GENERATION SITE	SAS French Rd, which M 13602 WASTE TYPE / PROFILE #/ Estimate Y	518-452-7826
Ĭ		
1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A: Cortain Soil for care - CLO431 A.	_ INTrailer AB-514
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HAULER	DRIVER'S NAME (PRINT):	18108 TICKET NUMBER:
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HAULER	DRIVERS SIGNATURE:	18108 TICKET NUMBER: TRAILER NUMBER: 3-514
HAULER	DRIVER'S NAME (PRINT):  DRIVER'S NAME (PRINT):  DRIVER'S SIGNATURE:  DATE OF SHIPMENT OF COMMENTS:  MATERIAL:	TICKET NUMBER:  TRAILER NUMBER:  3-54  CONTAINER SIZE / TYPE:
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<b>&gt;</b> -	DRIVER'S NAME (PRINT):  DRIVER'S SIGNATURE:  DATE OF SHIPMENT OF COMMENTS:  MATERIAL:  DISPOSAL FACILITY NAME:  NO HOLD ACCIDITY NAME:  NO HOLD ACCIDITY NAME:  OCCUPANT OF COMMENTS:  DISPOSAL SITE	TICKET NUMBER:  TRAILER NUMBER:  B-514  CONTAINER SIZE/TYPE:  REPRESENTATIVE NAME:
<b>A</b>	DRIVER'S NAME (PRINT):  DRIVER'S SIGNATURE:  DATE OF SHIPMENT OF COMMENTS:  MATERIAL:  DISPOSAL FACILITY NAME:  WASTE TYPE RECEIVED:  SCALE  DRIVER'S NAME (PRINT):  COMMENTS:  DISPOSAL SITE  HOLL  EMPTY	TICKET NUMBER:  TRAILER NUMBER:  B-514  CONTAINER SIZE / TYPE:  REPRESENTATIVE NAME:  DATE RECEIVED:  9/14/99  NET
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DISPOSAL FACILITY HAULER	DRIVER'S NAME (PRINT):  DRIVER'S NAME (PRINT):  DATE OF SHIPMENT OF COMMENTS:  MATERIAL:  DISPOSAL FACILITY NAME:  WASTE TYPE RECEIVED:  SCALE TICKET  TICKET  TOWN DORE SAL  DISPOSAL SITE  WASTE TYPE RECEIVED:  EMPTY WEIGHT:	TICKET NUMBER:  TRAILER NUMBER:  B-514  CONTAINER SIZE / TYPE:  REPRESENTATIVE NAME:  DATE RECEIVED:  9/14/99  NET
<b>&gt;</b> -	DRIVER'S NAME (PRINT):  DRIVER'S SIGNATURE:  DATE OF SHIPMENT OF COMMENTS:  MATERIAL:  DISPOSAL FACILITY NAME:  WASTE TYPE RECEIVED:  SCALE TICKET WEIGHT:  NUMBER:  DISPOSAL FACILITY CERTIFICATION:	TICKET NUMBER:  TRAILER NUMBER:  B-514  CONTAINER SIZE/TYPE:  REPRESENTATIVE NAME:  DATE RECEIVED;  P/4/99  NET WEIGHT:
<b>&gt;</b> -	DRIVER'S NAME (PRINT):  DATE OF SHIPMENT OF COMMENTS:  MATERIAL:  DISPOSAL FACILITY NAME:  WASTE TYPE RECEIVED:  SCALE TICKET NUMBER:  DISPOSAL FACILITY CERTIFICATION:  SIGNATURE  TITL	TICKET NUMBER:  TRAILER NUMBER:  B-514  CONTAINER SIZE/TYPE:  REPRESENTATIVE NAME:  DATE RECEIVED;  P/4/99  NET WEIGHT:
<b>&gt;</b> -	DRIVER'S NAME (PRINT):  DRIVER'S SIGNATURE:  DATE OF SHIPMENT OF COMMENTS:  MATERIAL:  DISPOSAL FACILITY NAME:  WASTE TYPE RECEIVED:  SCALE TICKET WEIGHT:  NUMBER:  DISPOSAL FACILITY CERTIFICATION:	TICKET NUMBER:  TRAILER NUMBER:  B-514  CONTAINER SIZE/TYPE:  REPRESENTATIVE NAME:  DATE RECEIVED;  P/4/99  NET WEIGHT:

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### ONEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	JEFF Bansteel	5ci
SIT	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
NOI	WASTE TYPE / PROFILE # Estimate	Yards   Container Type   Container #
GENERATION SITE	A: Contain Soil For cour - CL\$431 A.	ATrailer AB-521
GEN	B: Van-Mac	
	B	B.   B.
	Certification - I hereby declare that the contents of this consignment	are classified as non-hazardous
•	and are in fact sewage sludge, construction and demolition debris or NYCRR Part 364 for which disposal has been approved or which tra	special handling waste as defined in acking has been requested. The
	disposal of material has been approved and the tracking is requested Waste Authority. I certify that the above information is true and co	l by the Oneida – Herkimer Solid
	not as I have stated, I will accept the return of the load at my (general	
	LANGUE PRIMER SIGNED	9/34
	Gehefathrs Signature	D'ate)
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
R.	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	DRIVERS SIGNATURE	TRAILER NUMBER:
B	F. S.	13-521
*	DATE OF SHIPMENT OF COMMENTS: MATERIAL:	CONTAINER SIZE / TYPE:
	MATERIAL:	
	DISPOSAL FACILITY NAME: DISPOSAL SITI	E REPRESENTATIVE NAME:
ŽI .	WASTE TYPE RECEIVED:	a Whiveizer
ACILI	WASTE TYPE RECEIVED:	DATE RECEIVED:
DISPOSAL FACILITY	SCALE FULL EMPTY TICKET WEIGHT: WEIGHT:	NET WEIGHT:
DISPC	DISPOSAL FACILITY CERTIFICATION:	No obillo
	SIGNATURE TIT	LE GATE DATE
	COMMENTS:	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s

COPY DISTRIBUTION:

1600 Genesee Street, Utica, NY 13502

نه ا محدد	
	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
•	Lockherd Martin Carp.  CONTACT PERSON OR SITE REPRESENTATIVE:  TITLE:
GENERATION SITE	CONTACT PERSON OR SITE REPRESENTATIVE:  TITLE:  SCI
	FACILITY LOCATION/MAILING ADDRESS:  TELEPHONE NUMBER:
	· · · · · · · · · · · · · · · · · · ·
) EX	WASTE TYPE / PROFILE #/ Estimate Yards   Container Type   Container #
TER.	A: Contain Goil For cour - CLOY31 A. A.Dunp AB-440
E	R. Non-Horz
لــا	B. B. B.
er er er er er er er er er er er er er e	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
	Waste Authority. I certify that the above information is true and correct and that if waste shipment is not as I have stated, I will accept the return of the load at my (generator's) expense.
i 1870 - Nordan Herri	1/11/12 Ht 13 an agent for Londist
	Generators Signature Cop. Title Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
<u> </u>	Buraus Trucking 18403
8	DRIVER'S NAME (PRINT):  TICKET NUMBER:
HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
H	Raly = addlined B- 440
<u> </u>	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL:
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
<b>X</b>	Mighters and taulanchiveixer
LII	WASTE TYPE RECEIVED:  DATE RECEIVED:
'ACI	9/14/44
DISPOSAL FACILITY	SCALE FULL EMPTY NET TICKET WEIGHT: WEIGHT:
POS.	NUMBER:
DIS	DISPOSAL FACILITY CERTIFICATION:
	SIGNATURE TITLE DATE
	COMMENTS:

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YELLOW COPY - ONEIDA HERKIMER SOLID WASTE AUTHORITY COPY
PINK COPY - DISPOSAL FACILITY COPY



1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LO	DCATION: DATE:
	Lockhed Hartin Corp.	9/13/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
	JEST Bousteel	5ci
	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
SNS	505 French Rd, Utica, MY 135	519-452-7826
	WASTE TYPE / PROFILE #	Estimate Yards   Container Type   Container #
GENERATION SITE	A. Contam. Soil For cour - CLOHBI	A. A. A. A. B-510
CEN	B: Non-Maz	
		B B
	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	
1	<u>Certification</u> - I hereby declare that the contents of this co and are in fact sewage sludge, construction and demolition	
	NYCRR Part 364 for which disposal has been approved of	
	disposal of material has been approved and the tracking is	requested by the Oneida - Herkimer Solid
	Waste Authority. I certify that the above information is to	rue and correct and that if waste shipment is
	not as Lhave stated, I will accept the return of the load at	my (generator's) expense.
,	LIMINI CONTINUED TO	9/13/99
	Generalous/Signature	Title   Ddte
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
<u> </u>	13 crows Truction	18 Nove
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
HAULER	BUR SPELLMAN	
AUI.	DRIVERS SIGNATURE:	TRAILER NUMBER:
	Ch Della	B-510
النا.	DATE OF SHIPMENT OF   COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL:	
	DISPOSAL FACILITY NAME: DISP	OSAL SITE REPRESENTATIVE NAME:
<b> </b>	Oign Hores Landtill	ava Chweizer
	WASTE TAPE RECEIVED:	DATE RECEIVED:
FACILIT		9/14/99
	SCALE N FULL EMP	
DISPOSAL	TICKET WEIGHT: WEIGH	GHT: WEIGHT:
ISP(	DISPOSAL FACILITY CERTIFICATION:	1 11/10
Ω	( ) Land ( ) Co	1100 100 414199
· · · · · · · · · · · · · · · · · · ·	SIGNATURE	TITLE DATE
	COMMENTS:	
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1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
·	Lockherd Martin Cord 9/13/99
· · · · · · · · · · · · · · · · · · ·	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
GENERATION SITE	JOSEF BOUSTRE! Sci
	FACILITY LOCATION/MAILING ADDRESS:  TELEPHONE NUMBER:
	525 FENCY Rd, Utica, MY 13502 58.45-7826
ATI	WASTE TYPE / PROFILE #   Estimate Yards   Container Type   Container #
ER	A: Contam. Goil for Can - CLOH31 A. A.Dump AB-150
E GE	B: Lon-Haz
L	B B B
3.9	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid Waste Authority. I certify that the above information is true and correct and that if waste shipment is
	not as I have stated, I will accept the return of the load at my (generator's) expense.
	1 / My Buth Bor troit Greatest 9/1349
	Generator's signature Math Con. Title Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
<u> </u>	Brows Toxtera 1811
<u> </u>	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	Rod HALL
I EX	DRIVERS SIGNATURE: TRAILER NUMBER:
	Kod Hall
<u></u>	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE: MATERIAL:
*	9/14/99
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
	Nah Anne I antill I faile Sohringison
E	WASTE TYPE RECEIVED: DATE RECEIVED:
DISPOSAL FACILIT	a/14/199
E E	SCALE FULL EMPTY NET
SAI	TICKET WEIGHT: WEIGHT: WEIGHT:
ISPC	DISPOSAL FACILITY GERTIFICATION
ũ	X 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	SIGNATURE TITLE DATE
	COMMENTS:

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3-1224

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LO	CATION: DATE:
	Lather Matin Corp	9/12/79
***	CONTACT PERSON OR SITE REPRESENTATIVE	TITLE: 1
GENERATION SITE	Test Rousteel	
	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
Ő	505 Francy 121, Utica MY 135	58452-7826
₹	WASTE TYPE / PROFILE #	Estimate Yards   Container Type   Container #
ER	A. Cottam Soilter cour. CLOH31	A. Dunt A.B-470
E	A CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR OF THE CONTRACTOR	
	B: Man-Haz	B B
$f = \lambda \sqrt{r}$	Certification - I hereby declare that the contents of this co	nsignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition	debris or special handling waste as defined in
. L.	NYCRR Part 364 for which disposal has been approved or	which tracking has been requested. The
	disposal of material has been approved and the tracking is Waste Authority. I certify that the above information is tr	requested by the Oneida – Herkimer Solid
	ngkas I have stated, I will accept the return of the load at r	
	1/1/07 15/89/99	14
the second	1 1 1 Juliu for Lartified Tic	1001 4/13/17
	Generators Signature Martin Corp.	Title Date
4	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
<del></del> i·	Perrows Tarking	12109
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
æ	L DRIVER'S NAME (PRINT)	FILENCIA ON DEN.
<b>E</b>	DI (T)	TICKET HUMBER:
ULE	Bill Baxtier	
HAULER	BILIBax (a- DRIVERS SIGNATURE:	TRAILER NUMBER:
HAULEI	Bill Baxter  DRIVERS SIGNATURE:  Rill Rath	TRAILER NUMBER: B-490
HAULEI	Bill Baxter  DRIVERS SIGNATURE:  DATE OF SHIPMENT OF / COMMENTS:	TRAILER NUMBER:
HAULEI	Bill Baxter  DRIVERS SIGNATURE:  Rill Rath	TRAILER NUMBER: B-490
HAULEI	Bill Bax ter- DRIVERS SIGNATURE:  DATE OF SHIPMENT OF COMMENTS: MATERIAL:	TRAILER NUMBER:  3-490  CONTAINER SIZE / TYPE:
HAULEI	Bill Bax ter- DRIVERS SIGNATURE:  DATE OF SHIPMENT OF COMMENTS: MATERIAL:	TRAILER NUMBER: B-490
	Bill Bax ter- DRIVERS SIGNATURE:  DATE OF SHIPMENT OF COMMENTS: MATERIAL:	TRAILER NUMBER:  3-490  CONTAINER SIZE / TYPE:  OSAL SITE REPRESENTATIVE NAME:
	Bill Bax ter- DRIVERS SIGNATURE:  DATE OF SHIPMENT OF COMMENTS: MATERIAL:	TRAILER NUMBER:  3-490  CONTAINER SIZE / TYPE:
	Bill Baxter  DRIVERS SIGNATURE:  DATE OF SHIPMENT OF / COMMENTS:  MATERIAL:  DISPOSAL FACILITY NAME:  OLD ACTES OF ALL	TRAILER NUMBER:  3-490  CONTAINER SIZE / TYPE:  OSAL SITE REPRESENTATIVE NAME:
FACILITY	Bill Bax ter- DRIVERS SIGNATURE:  DATE OF SHIPMENT OF COMMENTS: MATERIAL:  DISPOSAL FACILITY NAME:  WASTE TYPE RECEIVED:	TRAILER NUMBER:  3-490  CONTAINER SIZE / TYPE:  DSAL SITE REPRESENTATIVE NAME:  DATE RECEIVED:  9//4/99
FACILITY	DATE OF SHIPMENT OF COMMENTS:  DATE OF SHIPMENT OF COMMENTS:  MATERIAL:  DISPOSAL FACILITY NAME:  WASTE TYPE RECEIVED:  SCALE TICKET  FULL WEIGHT:  WEIGHT:	TRAILER NUMBER:  3-490  CONTAINER SIZE / TYPE:  OSAL SITE REPRESENTATIVE NAME:  DATE RECEIVED:  9//.//99
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FACILITY	DATE OF SHIPMENT OF COMMENTS:  MATERIAL:  DISPOSAL FACILITY NAME:  WASTE TYPE RECEIVED:  SCALE TICKET NUMBER:  DISPOSAL FACILITY CERTIFICATION:  SIGNATURE	TRAILER NUMBER:  3-490  CONTAINER SIZE / TYPE:  OSAL SITE REPRESENTATIVE NAME:  DATE RECEIVED:  9//.//99
FACILITY	DATE OF SHIPMENT OF COMMENTS:  MATERIAL:  DISPOSAL FACILITY NAME:  WASTE TYPE RECEIVED:  SCALE TICKET NUMBER:  DISPOSAL FACILITY CERTIFICATION:	TRAILER NUMBER:  3-490  CONTAINER SIZE / TYPE:  OSAL SITE REPRESENTATIVE NAME:  DATE RECEIVED:  9//.//99

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BUK3

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

' . •	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
GENERATION SITE	Loothed Martin Corp. 9/13/99.
	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	Deft Borsteel Sci
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
	525 Franch Rd, Utica MY 13502 518-452-7826
ATI	WASTE TYPE / PROFILE # Estimate Yards   Container Type   Container #
ER	A: Contain Soil for over-CLOS431 A ATVENTON A3-413
É	B: Non-Haz
	B B B
٠.	
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida - Herkimer Solid
	Waste Authority. I certify that the above information is true and correct and that if waste shipment is not as it have stated. I will accept the return of the load at my (generator's) expense.
	I have stated twing accept the return of the load at my (generator's) expense.
ne generalis	11/1/1/ COUNTY CONTROL MONN SCIENTS! 9/13/71
#11 - 11 - 11 - 11 - 11 - 11 - 11 - 11	Centrators Signature Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	1 18114
<b>2</b> 2	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	Thion Space
EAT	DRIVERS SIGNATURE: TRAILER NUMBER:
	Brian Scarley 13-413
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE: MATERIAL:
•	WAIRIAE;
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
	DISPOSAL FACILITY NAME.
4	WASTE PAPE RECEIVED: DATE RECEIVED:
	WASTE PYPE RECEIVED:
FAC	9/14/99
) <u> </u>	SCALE /FULL EMPTY NET / TICKET WEIGHT: WEIGHT:
/so	NUMBER:
DISPOSAL FACILITY	DISPOSAL FACILITY CERTIFICATION:
	A ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (
	SIGNATURE TITLE DATE
·	COMMENTS:
	COMMENTS:

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1600 Genesee Street, Utica, NY 13502

(315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:				
	Lockhard Martin Com. 9/13/99				
GENERATION SITE	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:			
	Jeff Barstrel	- Sci			
	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:	$\dashv$		
	of French Bd where we	13602 518-452-7826			
E 7	WASTE TYPE / PROFILE # /	Estimate Yards   Container Type   Container #	#		
ER.	A: Contain for for cut - CLOS43	1 A LATRIER ABOTIT	5		
EN					
9	B: NON-MAZ	B B B	_		
	Certification - I hereby declare that the contents of				
	and are in fact sewage sludge, construction and de NYCRR Part 364 for which disposal has been app	molition debris or special handling waste as defined i	in		
		icking is requested by the Oneida – Herkimer Solid	, [		
		tion is true and correct and that if waste shipment is			
	notias I have stated I will accept the return of the	load at my (generator's) expense.			
	111 Daw Jorkhant John	Scientist 9/13/99	_ [		
	Generators Signature Cop.	Title Date			
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER	::		
	1 AUCTOWS	18101	ı		
			- 1		
~	DRIVER'S NAME (PRINT):	TICKET NUMBER:	$\dashv$		
LER					
TAULER					
HAULER	DRIVER'S NAME (PRINT):  47 14 14 14 14 14 14 14 14 14 14 14 14 14	TICKET NUMBER:			
HAULER	DRIVER'S NAME (PRINT):  DRIVER'S SIGNATURE:  Min W MM  DATE OF SHIPMENT OF COMMENTS:	TICKET NUMBER:			
HAULER	DRIVER'S NAME (PRINT):  47 14 14 14 14 14 14 14 14 14 14 14 14 14	TICKET NUMBER:  TRAILER NUMBER:  3-113			
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	DRIVER'S NAME (PRINT):  DRIVER'S SIGNATURE:  DATE OF SHIPMENT OF COMMENTS:  MATERIAL  DISPOSAL FACILITY NAME:	TICKET NUMBER:  TRAILER NUMBER:  B-1/3  CONTAINER SIZE / TYPE:  DISPOSAL SITE REPRESENTATIVE NAME:			
	DRIVER'S NAME (PRINT):  TO THE DATE OF SHIPMENT OF COMMENTS:  MATERIAL  MATERIAL	TICKET NUMBER:  TRAILER NUMBER:  CONTAINER SIZE / TYPE:  DISPOSAL SITE REPRESENTATIVE NAME:			
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	DRIVER'S NAME (PRINT):  DRIVER'S SIGNATURE:  DATE OF SHIPMENT OF COMMENTS:  MATERIAL  DISPOSAL FACILITY NAME:  WASTE TYPE RECEIVED:  SCALE  TICKET  TICKET  WEIGHT:	TICKET NUMBER:  TRAILER NUMBER:  B-13  CONTAINER SIZE / TYPE:  DISPOSAL SITE REPRESENTATIVE NAME:  DATE RECEIVED:  PARTY NET			
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1 4 25



# ONEIDA-HERKIMER SOLID WASTE AUTHORITY UNIFORM TRACKING DOCUMENT

1600 Genesee Street, Utica, NY 13502

(315) 733-1224

Å.,	
	FACILITY NAME OF ORIGIN OF MATERIAL/STREET LOCATION: DATE:
SENERATION SITE	CONTACT PERSON OR SITE REPRESENTATIVE TITLE:
	CONTACT PERSON OR SITE REPRESENTATIVE
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
	525 Franch Rd, Wire, WY 13502 510.452.7826
	WASTE TYPE / PROFILE # / Estimate Yards   Container Type   Container #
ERA	A: CONTAM GOIL FOR COURT-CLOPISI A
SEN	B. W. Hor
	B. B. B.
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
	Waste Authority. I certify that the above information is true and correct and that if waste shipment is
	not as Thave stated, I will accept the return of the load at my (generator's) expense.
	MARCHA TUNING SCIONES SIGNES
	Generator Signature Date Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Burrays Trucking 18119
¥	DRIVER'S NAME (PRINT):  TICKET NUMBER:
HAULER	DRIVERS SIGNATURE: TRAILER NUMBER:
H H	DRIVERS SIGNATURE:
	DATE OF SHIPMENT OF COMMENTS:   CONTAINER SIZE / TYPE:
	MATERIAL:
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
7	WASTE TYPE RECEIVED: LYNG OlCaref
DISPOSAL FACILIT	WASTE TYPE RECEIVED:  DATE RECEIVED:
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AL	SCALE FULL EMPTY NET TICKET WEIGHT: WEIGHT:
POS	NUMBER:
DIS	DISPOSAL FACILITY CERTIFICATION:
	SIGNATURE SIGNATURE DATE
31	
	COMMENTS:

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	The off to the one of the off
. 8	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
GENERATION SITES	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:
	Jeff Barsted Sci
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
	525 French 178d, Utica, MY 13502 518-452-7836
AT	WASTE TYPE / PROFILE # Estimate Yards Container Type Container #
NER	A. Cotom Soil Fer our - Clop431 A. A. A. A. A. A. A. A. A. A. A. B-SM
E G	B:
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	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
	Waste Authority. I certify that the above information is true and correct and that if waste shipment is
	not as I have stated, hwill accept the return of the load at my (generator's) expense.
market from	MAN (12 with 150 Kindist 9/14/29
	Generators Signature Collection 7. Title Date
	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
	Paras Initina 18108
~	DRIVER'S NAME (PRINT): TICKET NUMBER:
HAULER	Thunds of man a small to do
AU	DRIVERS SIGNATURE: TRAILER NUMBER:
# .	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL:
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
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IT.	WASTE TYPE RECEIVED: / DATE RECEIVED: /
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<b>-</b>	organory Javopy 1/197
	SIGNATURE / TITLE DATE
	COMMENTS:
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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lockhard Martin Cap.	9/19/19
	CONTACT PERSON OR SITE REPRESENTATIVE	TITLE:
GENERATION SITE	JEFF Bonstrel	Scrist
	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
Ιχ Sz	Sas Franch Rd, Wica N 13502 WASTE TYPE/PROFILE # Estimate	518-452-7626
TIC		
ERA	1. Cottom Soil for cour - aug 431 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
EN		
9	B: Nan-Marz B.	B
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	Certification - I hereby declare that the contents of this consignment	are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or NYCRR Part 364 for which disposal has been approved or which transfer in the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second sec	
	disposal of material has been approved and the tracking is requested	d by the Oneida – Herkimer Solid
	Waste Authority. I certify that the above information is true and co	rrect and that if waste shipment is
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	Generator Signature LCC FRCIII DIVICE Title	7 Date
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
	1 Perross Tretina	18 PM
	DRIVER'S NAME (PRINT)	TICKET NUMBER:
HAULER	FACILITY PAR WINEY	
AU	DRIVERS SIGNATURE:	TRAILER NUMBER:
	Mars Hickory	BOMS
	DATE OF SEMPMENT OF COMMENTS:	CONTAINER SIZE / TYPE:
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	DISPOSAL FACILITY NAME: DISPOSAL SIT	E REPRESENTATIVE NAME:
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<u>₩</u>	SCALE FULL EMPTY	NET
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·	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:   DATE:
	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:
	Lockman Martin Cop. 9/19/79
GENERATION SITE	CONTACT PERSON OR SITE/REPRESENTATIVE: TITLE:
	Jett Barsteel 501
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
	525 French Rd, Wica Nr 13502 518-45-7896
	WASTE TYPE / PROFILE # Estimate Yards   Container Type   Container #
₹	A Cortain Soil- For cour - CLOSUSI A DAMP AB-440
N. N. E.	A: Costom Soil-for court - CL9431 A. ASMIP ABOUT
3	B: Non-Marz B. B. B.
	Certification - I hereby declare that the contents of this consignment are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debris or special handling waste as defined in
d.	NYCRR Part 364 for which disposal has been approved or which tracking has been requested. The
	disposal of material has been approved and the tracking is requested by the Oneida – Herkimer Solid
	Waste Authority. I certify that the above information is true and correct and that if waste shipment is not as a have stated, I will accept the return of the load at my (generator's) expense.
	All AZ HA As an agent for I have stated, I will accept the return of the road at my (generator s) expense.
	1 VITA A LUMB Y - Liverthy WY 605 DC VONDS
	Generators Signature Date
-	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
····	Buraus Truking 18103
	DRIVER'S NAME (PRINT): TICKET NUMBER:
RA	<b>1</b>
HAULER	Robert SARO LE MICE DRIVERS SIGNATURE: TRAILER NUMBER:
田	13-440
	DATE OF SHIPMENT OF COMMENTS: CONTAINER SIZE / TYPE:
	MATERIAL:
	16-18-10 Damh
	DISPOSAL FACILITY NAME: DISPOSAL SITE REPRESENTATIVE NAME:
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4	trigh acus Lynn Olegian
	WASTE TYPE RECEIVED:
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SA	TICKET WEIGHT: WEIGHT: WEIGHT:
DISPOSAL FACILIT	DISPOSAL FACILITY CERTIFICATION:
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	SIGNATURE JOSEY
	TITLE TOTALE.
	COMMENTS:

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	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION: DATE:				
		LOCATION:	DATE:		
	Lockhad Martin Corp.		9/4/99		
·	CONTACT PERSON OR SITE REPRESENTATIVE		TITLE:	TITLE:	
<b>E</b>	Jeff Bansteel		50		
GENERATION SITE	FACILITY LOCATION/MAILING ADDRESS:		TELEPHON		
	WASTE TYPE / PROFILE # / WHICH, WY	13500	56-452		
	WASTE TYPE / PROFILE #	Estimate Y	ards Container Type	Container #	
	A: Contemsoil For cour - CCQ 431	A	_ A. Dunp	1.13-510	
EN					
	B: Non-Maz	- В	B	В	
i	Certification - I hereby declare that the contents of this cand are in fact sewage sludge, construction and demoliti				
<i>)</i>	NYCRR Part 364 for which disposal has been approved				
	disposal of material has been approved and the tracking	is requested	by the Oneida – Herl	cimer Solid	
	Waste Authority. I certify that the above information is	true and cor	rect and that if waste	shipment is	
	not as I have stated, I will accept the return of the load a	- l. L	or sy expense.	Ludes	
	Generators Signature			119179	
	Generators Signature	rue .	· '	Date	
	TRANSPORTING COMPANY NAME:		AUTHORITY PERM	IT NUMBER:	
	DRIVER'S NAME (PRINT):		AB NENO	2	
<b>x</b>	DRIVER'S NAME (PRINT):		TICKET NUMBER:		
HAULER	Pur Springu				
HAI	DRIVERS SIGNATURE:		TRAILER NUMBER	:	
	DATE OF SHIPMENT OF COMMENTS:		B-51U		
L	DATE OF SHIPMENT OF / COMMENTS:		CONTAINER SIZ	E/TYPE:	
!	MINIDIAL.				
!	DISPOSAL FACILITY NAME: DIS	SPOSÁL SITE	REPREȘENTATIVE !	NAME:	
		/	<b>&gt;</b> /		
Ě	WASTE TYPE RECEIVED:	MAN	DATE RECEIVED:		
DISPOSAL FACILIT	WASTE THE RECEIVED.	٠, ١	9 1499		
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ISIC	DISPOSAL FACILITY CERTIFICATION:	101		1166	
	Dyno Klay	Calle	D. 9	14.99	
	SIGNATURE	TITL	E "	DATE	
	COMMENTS:				
				į	

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				•		
	FACILITY NAME OR OR	IGIN OF MATERIAL/STRE	ET LOCATION:	DATE:		
•	CONTACT PERSON OR SITE REPRESENTATIVE: TITLE:					
GENERATION SITE	CONTACT PERSON OR SI	TE REPRESENTATIVE:		TITLE:		
	FACILITY LOCATION/M/	15015TEEL		TELEPHONE NUMBER:		
			سير ومنور مرو			
Į į	WASTE TYPE / PROFILE	in Ka, Othica	/ 55 Estimate Y		2-7526 T Container#	
RA1		, , , , , , , , , , , , , , , , , , ,	Estimate	ards contained type	3-01	
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5	B:	the	В.	В	В	
	Certification - I hereby de					
	and are in fact sewage slue NYCRR Part 364 for which					
	disposal of material has be	een approved and the trac	king is requested l	by the Oneida – Her	kimer Solid	
	Waste Authority. I certify				Shipment is	
	not as I have stated, I will	As an agent for	ad at my (general	or's) expense.	Indoc.	
	Generators Signature	it the time	- Stide CAT	51		
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H.		AA-0		B-521	Way ?	
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	MATERIAL:					
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<del></del>	DISPOSAL FACILITY NAME:		DISPOSAL SITE REPRESENTATIVE NAME:			
ITY	WASTE TYPE RECEIVED:		DATE RECEIVED:			
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*		·
,	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION	ON: DATE:
	Lockhed Martin Corp.	9/14/99
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
ED)	Jeff Boustre	50
SITI	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
NO NO	525 Franch Rd, Otica M 1:	3502 512-452-7526
Ě	WASTE TYPE / PROFILE # / Ksti	mate Yards   Container Type   Container #
GENERATION SITE	A: Cartam Soil for cour - CCG431 A-	1 ADMD 13-450
18	In Ahandar	
<u></u>	B	B B
	Certification - I hereby declare that the contents of this consigni	nent are classified as non-hazardous
	and are in fact sewage sludge, construction and demolition debri	s or special handling waste as defined in
	NYCRR Part 364 for which disposal has been approved or which	
	disposal of material has been approved and the tracking is reque Waste Authority. I certify that the above information is true an	
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	1 1 Sugar Lation Cop Delay	Ald b
	Generators Signature Title	Date
	TRANSPORTING COMPANY NAME:	AUTHORITY PERMIT NUMBER:
· ·	Remark Tarking	1811 Lac
	DRIVER'S NAME (PRINT):	TICKET NUMBER:
ER	0	
HAULER	KOD FIALL DRIVERS SIGNATURE:	TRAILER NUMBER:
H	0 1 11 00	B -450
}	DATE OF SHIPMENT OF   COMMENTS:	CONTAINER SIZE / TYPE:
	MATERIAL:	CONTAINERSIZE / III E.
	9/14/99	
	DISPOSAL FACILITY-NAME: DISPOSAL	SITE REPRESENTATIVE NAME:
	dech (Can	a Means
Ĭ.	WASTE TYPE RECEIVED:	DATE RECEIVED:
DISPOSAL FACILIT	6011	0-1499
FA	SCALE FULL EMPTY	NET
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SO	NUMBER:	
ISP	DISPOSAL FACILITY CERTIFICATION:	1 0 /-
A .	PYCL () Klaw IN	118DV 91499
,-	SIGNATURE	TITLE DATE
7	(	
	COMMENTS:	·

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(315) 733-1224

•	•	
	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lockheed Martin Corp.	91499
	CONTACT PERSON OR SITE REPRESENTATIVE:	TITLE:
<b>B</b>	Jett Bousteel	
GENERATION SITE	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
) Š	535 Krown Rd, Unica M 1350x	518-457-7826
\¥	WASTE TYPE / PROFILE #	Yards Container Type Container #
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	Certification - I hereby declare that the contents of this consignment	are classified as non-hazardous
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	NYCRR Part 364 for which disposal has been approved or which tradisposal of material has been approved and the tracking is requested	
	Waste Authority. I certify that the above information is true and cor	rect and that if waste shipment is
·	not as I have stated, I will accept the return of the load at my (genera	tor's) expense.
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	7	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LO	OCATION: DATE:
	. j.	CONTACT PERSON OR SITE REPRESENTATIVE:	7/19/77
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YELLOW COPY - ONEIDA HERKIMER SOLID WASTE AUTHORITY COPY
PINK COPY - DISPOSAL FACILITY COPY



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	Certification - I hereby declare that the contents of this consignment	are classified as non-hazardous
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1600 Genesee Street, Utica, NY 13502 (315) 733-1224

	FACILITY NAME OR ORIGIN OF MATERIAL/STREET LOCATION:	DATE:
	Lootheed Martin Corp	9/19/99
·		TITLE:
ы	Jett Borsteel	501
IIS	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
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	Contineed Martin Corp.	914199
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	Vett Brustop	Sci
	FACILITY LOCATION/MAILING ADDRESS:	TELEPHONE NUMBER:
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۲	Lockherd Matin 9/14/19
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r-ì	Jeff Boistel Sci
	FACILITY LOCATION/MAILING ADDRESS: TELEPHONE NUMBER:
N.	525 French Rd. Utica, NY 518-452-7026
Ι	WASTE TYPE / PROFILE # Estimate Yards   Container Type   Container #
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GENERATION SITE	$\mathbf{I}^{\prime}$
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	TRANSPORTING COMPANY NAME: AUTHORITY PERMIT NUMBER:
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Appendix - E -

Hazardous Waste Manifests

DEPARTMENT OF ENVIRONMENTAL CONSERVATION DIVISION OF SOLID & HAZARDOUS MATERIALS

1. Generator's US EPA No.

### **HAZARDOUS WASTE MANIFEST**



Please type or print. Do not staple.

In case of emergency of spill immediately call the National Response Center (890) 424-8902 and the NYS Department of Environmental Conservation (518) 457-7362

P.O. Box 12820, Albany, New York 12212

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7. T	ransporter 2 (Company Name)	8. US EPA ID Number		E. State Transporters	
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DEPARTMENT OF ENVIRONMENTAL CONSCHARTION * DIVISION OF SOLID & HAZARDOUS MATERIALS

### HAZARDOUS WASTE MANIFEST

Please type or print. Do not staple.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environment

## P.O. Box 12820, Albany, New York 12212

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## DEPARTMENT OF ENVIRONMENTAL CONSERVATION DIVISION OF SOLID & HAZARDOUS MATERIALS

### HAZARDOUS WASTE MANIFEST

Please type or print. Do not staple.

In case of emergency or spill mmediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

P.O. Box 12820, Albany, New York 12212

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# In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

DIVISION OF SOLID SHAZARDOUS MATERIALS

## HAZARDOUS WASTE MANIFEST P.O. Box 12820, Albany, New York 12212

Please type or print. Do not staple.

(Hazardous Waste Markfest 4/97)

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HAZARDOUS WASTE MANIFEST P.O. Box 12820, Albany, New York 12212



Please type or print. Do not staple.

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7382

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In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-73628

FACILITY

## HAZARDOUS WASTE MANIFEST P.O. Box 12820, Albany, New York 12212



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HAZARDOUS WASTE MANIFEST P.O. Box 12820, Albany, New York 12212

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## HAZARDOUS WASTE MANIFEST P.O. Box 12820, Albany, New York 12212

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	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA No.	Manifest Doc. No.	2. Page 1 of afformation with anot required to	nin heavy bold line by Federal Law.
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In case of emergency or apill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

### **HAZARDOUS WASTE MANIFEST** P.O. Box 12820, Albany, New York 12212

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### DEPARTMENT OF ENVIRONMENTAL CONSERVATION OVER THE DIVISION OF SOLID & HAZARDOUS MATERIALS

## HAZARDOUS WASTE MANIFEST P.O. Box 12820, Albany, New York 12212

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In case of egiergency or spill immediately call the National Response Center (600) 424-6802 and the NYS Department of Englonmental Conservation (518) 457-7362

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## DEPARTMENT OF ENVIRONMENTAL CONSERVATION DIVISION OF SOLID & HAZARDOUS MATERIALS

(Hazardous Waste Manifest 4/97)

Please type or print. Do not staple.

in case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

## HAZARDOUS WASTE MANIFEST P.O. Box 12820, Albany, New York 12212

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Pleas

In case of emergency or spill immediately call the National Response Center (860) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

TRANSPORTER

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COPY 5—Generator—Mailed by TSD Facility

DEPARTMENT OF ENVIRONMENTAL CONSERVATION DIVISION OF SOLID & HAZARDOUS MATERIALS

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the NYS Department of Environmental Conservation (518) 457-7362

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COPY 5—Generator—Mailed by TSD Facility

### **HAZARDOUS WASTE MANIFEST**

Please type or print. Do not staple.

In case of emergency or apill immediately call the National Response Center (800) 424-8802 and the INYS Department of Envirgismental Conservation (518) 457-7362.

P.O. Box 12820, Albany, New York 12212

(Hazardous Waste Manifest 4/97)

UNIFORM HAZARDOUS WASTE MANIFEST	MIN DEPONDED IN 1913	Marinest Doc. No	Informa	tion within heavy bold line equired by Federal Law.
3. Generator's Name and Mailing Address.		* • •	^ NYB9	141561
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16. GENERATOR'S CERTIFICATION: I hereb	v dodara that the contents of this consider	pont are fully and power		
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### WASTE MANAGEMENT, INC.

CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD **UTICA NY 13502** 

### CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/14/99 as described on Hazardous Waste Manifest number NYB9141534 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151382101 CWM Unit #: 1*0

Disposal Date: 09/14/99

Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C 1001 and 15 U.S.C. 2615) I certify that the information contained in or accompanying this document is true accurate and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true accurate and complete.

Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158894 09/15/99

For questions please call our Customer Service Dept. at (800) 843-3604



### WASTE MANAGEMENT, INC.

CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD **UTICA NY 13502** 

### CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/13/99 as described on Hazardous Waste Manifest number NYB9141525 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151365101 CWM Unit #: 1*0

Disposal Date: 09/13/99

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Sonna ames- Cussed

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158681 09/14/99

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Federal EPA ID: NYD049836679

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# CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/13/99 as described on Hazardous Waste Manifest number NYB9141318 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151365401 CWM Unit #: 1*0

Disposal Date: 09/13/99

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Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158684 09/14/99



CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD UTICA NY 13502

### CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/13/99 as described on Hazardous Waste Manifest number NYB9141543 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151366301

CWM Unit #: 1*0 Disposal Date: 09/13/99

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Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158693 09/14/99



CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD UTICA NY 13502

# CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/13/99 as described on Hazardous Waste Manifest number NYB9141552 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151366401 CWM Unit #: 1*0

Disposal Date: 09/13/99

Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C 1001 and 15 U.S.C. 2615) I certify that the information contained in or accompanying this document is true accurate and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true accurate and complete.

Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158694 09/14/99



CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD UTICA NY 13502

# CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/13/99 as described on Hazardous Waste Manifest number NYB9141561 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382
CWM Tracking ID: 8151366801
CWM Unit #: 1*0
Disposal Date: 09/13/99

Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C 1001 and 15 U.S.C. 2615) I certify that the information contained in or accompanying this document is true accurate and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true accurate and complete.

Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158697 09/14/99



CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD UTICA NY 13502

# CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/13/99 as described on Hazardous Waste Manifest number NYB9141579 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151366901 CWM Unit #: 1*0 Disposal Date: 09/13/99

Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C 1001 and 15 U.S.C. 2615) I certify that the information contained in or accompanying this document is true accurate and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true accurate and complete.

Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158698 09/14/99



CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD UTICA NY 13502

# CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/10/99 as described on Hazardous Waste Manifest number NYB9141345 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151353201 CWM Unit #: 1*0 Disposal Date: 09/10/99

Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C 1001 and 15 U.S.C. 2615) I certify that the information contained in or accompanying this document is true accurate and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true accurate and complete.

Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158552 09/13/99



CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD UTICA NY 13502

### CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/10/99 as described on Hazardous Waste Manifest number NYB9141606 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151353301 CWM Unit #: 1*0

Disposal Date: 09/10/99

Under civil and criminal penalties of law for the making or submission of false or fraudulent statements or representations (18 U.S.C 1001 and 15 U.S.C. 2615) I certify that the information contained in or accompanying this document is true accurate and complete. As to the identified section(s) of this document for which I cannot personally verify truth and accuracy, I certify as the company official having supervisory responsibility for the persons who, acting under my direct instructions, made the verification that this information is true accurate and complete.

Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158553 09/13/99



CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD UTICA NY 13502

# CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/10/99 as described on Hazardous Waste Manifest number NYB9141408 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151353401

CWM Unit #: 1*0
Disposal Date: 09/10/99

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Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158554 09/13/99



CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD UTICA NY 13502

# CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/10/99 as described on Hazardous Waste Manifest number NYB9141597 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151353501 CWM Unit #: 1*0 Disposal Date: 09/10/99

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Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158555 09/13/99



CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD UTICA NY 13502

### CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/10/99 as described on Hazardous Waste Manifest number NYB9141399 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151353601 CWM Unit #: 1*0 Disposal Date: 09/10/99

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Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158556 09/13/99



CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD UTICA NY 13502

### CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/10/99 as described on Hazardous Waste Manifest number NYB9141336 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151353701 CWM Unit #: 1*0 Disposal Date: 09/10/99

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Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158557 09/13/99



CWM Chemical Services, L.L.C. 1550 Balmer Rd. P.O. Box 200 Model City, N.Y. 14107 716/754-8231

Federal EPA ID: NYD049836679

LOCKHEED MARTIN CORP ATTN: ENVIRONMENTAL COMPLIANCE DEPT NYD000521971 FRENCH RD UTICA NY 13502

# CERTIFICATE OF DISPOSAL

CWM CHEMICAL SERVICES, L.L.C. has received waste material from LOCKHEED MARTIN CORP on 09/10/99 as described on Hazardous Waste Manifest number NYB9141453 Sequence number 01. CWM CHEMICAL SERVICES, L.L.C. hereby certifies that the above described material was landfilled in accordance with the 40 CFR part 761 as it pertains to the land disposal of polychlorinated biphenyl contaminated materials.

Profile Number: CL4382 CWM Tracking ID: 8151356301 CWM Unit #: 1*0 Disposal Date: 09/10/99

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Jonna ames- Cussick

DONNA AMES-CASSICK COMPLIANCE MANAGER Certificate # 158582 09/13/99

Appendix - F -

Certification of Clean Fill



# FRED BURROWS TRUCKING & EXCAVATING

437 ORISKANY BOULEVARD WHITESBORO, NY 13492

Phone: (315) 736-1971, 736-1444 Fax: (315) 736-0620

ARCADIS Geraghty & Miller

10/11/99

Attn: John Kuhn SLC Constructors, Inc. 295 Mill Street Lockport, New York 14094

RE: Sand Fill Material Delivered to French Road (ConMed) Site Utica.

Dear John,

Please accept this letter as certification that the run of bank sand fill delivered to your job site is free from industrial and petroleum based contamination. The material is bank run sand (not processed) and is loaded directly out of the bank, into the truck and delivered to your job site.

Please do not hesitate to contact me if you have any questions.

Frederick R. Burrows, Sr.

Fred Burrows Trucking and Excavating