

| SHIPPING   | 1. Generator ID Number  MAD000208409  |  | ergency Respons           | e Phone             | 4. Shipping (                          | Document | Tracking Num | nber<br>Q77 | 2      |
|--|---|--|---------------------------|---------------------|--|----------|--------------|-------------|--------|
| 5. Generator's Name a  | GENERAL BLECTPIC<br>ATTNEATT CALACI<br>159 PLASIFCE AVE   | Genera<br>CCO GEN<br>OMF 139 F             |                           | TRIC CO<br>VE       | han mailing address                    | s) ·     | 001          | 011         | J      |
| Generator's Phone: 6. Transporter 1 Comp   | pany Name   | 1.07                                       | and strengt of the second | 20,000              | U.S. EPAID N                           |          | 6 5 6        | 4 8         | 1 1    |
| 7. Transporter 2 Comp.   |   |  |                           |                     | U.S. EPA ID N                          | umber    |              |             |        |
|  | Name and Site Address VIEWIA HE GRHENTI<br>635 TORY ROAD<br>KERSEY, PA 12845  | REE LANDPILL                               |                           |                     | U.S. EPA ID N                          |          |              |             |        |
| Vu.  | A 교육 기계 Description (including Proper Shipping Name, Hazard C   | Class, ID Number,                          | 10. Conta                 | _                   | 11. Total                              | 12. Unit | 13.          | Codes       |        |
| 1. HONRY   | KULATEO MATERIAL  |  | No.                       | Type                | Quantity  OHOMO                        | Wt./Vol. | MAN          |             |        |
| 2.   |   |  |                           |                     | 21,050                                 |          |              |             |        |
| 3.   |   |  |                           |                     | _                                      |          |              |             | -      |
| 4.   |   |  |                           |                     |  |          |              |             |        |
|  |   |  |                           |                     |  |          |              |             |        |
| marked and label Generator's/Offeror's P   | OFFEROR S CERTIFICATION: I hereby declare that the led/placarded, and are in all respects in proper condition of the led/Typed Name |  |                           | tional govern       |  | 43E1     | Mo           | nth Day     |        |
| 1 16. International Shipm<br>Transporter signature   | I Import to U.S.  | Export from U.S.                           | Portofe                   | ntry/exit:          | TOWN TOR                               |          |              |             |        |
| The state of the s | Medgment of Receipt of Shipment   | Signature                                  | Date leav                 | ving U.S.:          |  |          | Mor          | nth Day     | Year   |
| 17. Transporter Acknow Transporter 1 Printed/T Transporter 2 Printed/T   | Typed Name  | Signature                                  | Em                        | 21                  | نسلك                                   |          | Mor          |             | Year   |
| 18. Discrepancy  |   |  |                           |                     |  |          |              |             | 1      |
| 18a. Discrepancy Indic   | ation Space Quantity  | Туре                                       | Residue                   | - 1 To a 1 de - 1 N | Partial Rej                            | ection   |              | Full Rej    | ection |
| 18b. Alternate Facility (  | (or Generator)  | •  | hipping Docume            | nt I racking N      | U.S. EPA ID N                          | lumber   |              |             |        |
| 18b. Alternate Facility ( Facility's Phone: 18c. Signature of Alternate Facility ( 19. Report Management)  | nate Facility (or Generator)  |  |                           |                     | ــــــــــــــــــــــــــــــــــــــ |          | Mo           | nth Day     | y Yea  |
| 19. Report Management  | nt Method Codes (i.e., codes for treatment, disposal, an  | nd recycling systems)  3.                  |                           |                     | 4.                                     |          |              |             |        |
| 20. Designated Facility<br>Printed/Typed Name  | Owner or Operator: Certification of receipt of shipment   | t except as noted in Item 18a<br>Signature |                           |                     |  |          | Mor          | nth Day     | Yea    |
| 4  |   |  | -                         |                     | GEN                                    | EDATOR   | / SHIPPE     | D'S INITI   | L CC   |



|   | PPING<br>CUMENT  | Generator ID Number   | 1 - 4 y . 1/4 .  | 2. Page 1 of   | 3. Emergency Respons   | se Phone                    | 4. Shipping           | Z 0                | Tracking Number 0318774                     |
|---|--|---|--|--|--|-----------------------------|-----------------------|--------------------|---|
|   | nerator's Name and   | Mailing Address   | CALASTAME  |  | Generator's Site Addres  | ARIC CA                     | han mailing addres    | ss)                |   |
| 6. Tra  | rator's Phone<br>nsporter 1 Company  | y Name  |  |  |  |                             | U.S. EPA ID N         | 4                  |   |
|   | nsporter 2 Company<br>signated Facility Nar  | ne and Site Address   | LOTTER STREET  | * 3  |  |                             | U.S. EPA ID N         |                    |   |
|   |  | KIRSE S   | A/-52.7  | A- 2-  |  |                             | 10-                   |                    |   |
| 9a.<br>HM   |  | scription (including Proper Shipping Nam  | ne, Hazard Class, ID Number,   |  | 10. Cont   | ainers Type                 | 11. Total<br>Quantity | 12. Unit<br>WL/Vol | 13. Codes                                   |
|   |  | TEATER TARTER DATE  |  |  | 1 X  | o e                         | 20460                 | - 86               | 15. July                                    |
|   | 2  |   |  |  |  |                             |                       |                    |   |
|   | 3  |   |  |  |  |                             |                       |                    |   |
|   | 4.   |   |  |  |  |                             |                       |                    |   |
| 15.   | GENERATOR S/OF   | FEROR S CERTIFICATION: I hereby d   | leclare that the contents of this                                    | consignment a  | are fully and accurately o   | escribed abo                | ve by the proper sh   | nipping nam        | e, and are classified, packaged,            |
| Gene  | GENERATOR S/OF<br>marked and labeled/<br>rator's/Offeror's Print   | FEROR S CERTIFICATION: I hereby di<br>placarded, and are in all respects in pro-<br>ted/Typed Name  | leclare that the contents of this<br>per condition for transport acc | consignment a<br>ording to applic  | are fully and accurately of able international and n                         | escribed aborational govern | mental regulations    | nipping nam        |   |
| Gene  | GENERATOR S/OF<br>marked and labeled/<br>rator's/Offeror's Print<br>BBAT SATAL3<br>ternational Shipmen<br>sporter signature (for   | FEROR S CERTIFICATION: I hereby of placarded, and are in all respects in protection of the protection | leclare that the contents of this<br>per condition for transport acc | consignment a<br>ording to applic  | are fully and accurately of able international and no mature.  S. Port of of | ational govern              | mental regulations    | nipping nam        |   |
| Gene  | GENERATOR S/OF<br>marked and labeled/<br>rator's/Offeror's Print<br>DERT SAFALD<br>ternational Shipmen<br>sporter signature (for<br>ansporter Acknowled<br>porter 1 Printed/Type   | FEROR S CERTIFICATION: I hereby of placarded, and are in all respects in protect ted/Typed Name  LO (ADEN'S SOCIETY)  Import to U.S.  r exports only):  dgment of Receipt of Shipment ed Name   | leclare that the contents of this<br>per condition for transport acc | sconsignment a cording to applic Sign Export from U                                | nature Port of Date lea  | AK'I                        | mental regulations    | nipping nam        | Month Day Yea  Month Day Yea                |
| Gene 16. In Trans 17 Tr. Trans  | GENERATOR S/OF<br>marked and labeled/<br>rator's/Offeror's Print<br>BERT SAFAL3<br>ternational Shipmen<br>sporter signature (for<br>ansporter Acknowled<br>porter 1 Printed/Type   | FEROR S CERTIFICATION: I hereby of placarded, and are in all respects in protect ted/Typed Name  LO (ADEN'S SOCIETY)  Import to U.S.  r exports only):  dgment of Receipt of Shipment ed Name   | leclare that the contents of this<br>per condition for transport acc | sconsignment a cording to applic Sign Export from U                                | nature Port of o   | AK'I                        | mental regulations    | nipping nam        | Month Day Yea                               |
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| Gene HOT Trans Trans Trans 18. Di 18. D. L. | GENERATOR S/OF marked and labeled/ rator's/Offeror's Printed/Syptemational Shipmen sporter signature (for ansporter 1 Printed/Type porter 2 Printed/Type screpancy Discrepancy Indication of the state o | FEROR S CERTIFICATION: I hereby of placarded, and are in all respects in protect of the protect | declare that the contents of this per condition for transport acc    | sconsignment a cording to applic Sign Export from U                                | nature  Port of Date lea   | AX II                       | Partial Rej           | jection            | Month Day Yea  Month Day Yea  Month Day Yea |
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| SHIPPING  | Q4 1 h g = 6 h (b) dec   | or ID Number   | 3  | 2. Page 1 of                     | 3. Emergency (424-  | 0.02.53-3.00             | rnone                    |  |                      | Tracking Nu<br>1031 |               | 5      |
|---|--|--|--|----------------------------------|---|--------------------------|--------------------------|--|----------------------|---------------------|---------------|--------|
| 5. Generator's Name a Generator's Phone:  | nd Mailing Address   | GENERAL ELECTRIATION MATTICALA<br>159 PLASTICS AVE<br>PITTEFIELD, MA 0   | IC CO<br>COME  |                                  |   | Address<br>HUBC<br>ICS A | rric co                  | than mailing addres                          | s) ·                 | -                   |               |        |
| 6. Transporter 1 Comp.<br>PAGE BTCL, INC.   |  |  |  |                                  |   |                          |                          | U.S. EPAID N                                 |                      | 8 9 6               | 31 31         | 4      |
| 7. Transporter 2 Compa  |  |  |  |                                  |   |                          |                          | U.S. EPA ID N                                | lumber               |                     |               |        |
| 8. Designated Facility N  | tame and Site Addre  | 635 TORY ROAD  |  | FILL                             |   |                          |                          | U.S. EPA ID N                                | lumber               |                     |               |        |
| Facility's Phone: 31  | 265-1744   | KERSEY, PA 15846   | K  |                                  |   |                          |                          | NOT  | Я                    | E Q                 | á             | 13     |
| 9a. 9b. U.S. DOT I<br>and Packing G   |  | Proper Shipping Name, Hazard   | d Class, ID Number   | r,                               |   | 0. Contai                | Type                     | 11. Total<br>Quantity                        | 12. Unit<br>Wt./Vol. | 1.1                 | . Codes       |        |
| 1. NON RE   | AM CETAJUH   | TENJAL.  |  |                                  |   | 1                        | n T                      | 21,590                                       | K                    | TMOM.               |               |        |
| 2.  |  |  |  |                                  |   |                          |                          |  |                      |                     |               |        |
| 3.  | -  |  |  |                                  |   |                          |                          |  |                      |                     |               |        |
| 4.  |  |  |  | -                                | -   | -                        |                          |  |                      |                     |               |        |
| MATERIAL  15. GENERATOR S/O   | FROM SILVE   | PLAKE PROJECT. C   | O/O REQUIRE<br>at the contents of the  | ED PO#11                         | 1171926<br>t are fully and acc  | urately de               | scribed abo              | ive by the proper sh                         | ipping nan           |                     | assified, pag | kaged, |
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| TRAILER N  MATERIAL  15. GENERATOR S/C marked and labele  Generator's/Offeror's Pr  ROBURT PADAL  16. International Shipme  Transporter signature (t)  17. Transporter Acknowled  | FROM SILVE FROM SILVE FFEROR'S CERTIF d/placarded, and are inted/Typed Name LO (AGENT) ents In or exports only): edgment of Receipt of ped Name  | R LAKE PROJECT. Comparison of the proper condition of  | C/O REQUIRE<br>at the contents of the<br>lition for transport ac                               | EXPORT From                      | are fully and accidicable international                               | urately deal and nat     | scribed abordinal govern | ive by the proper sh<br>nmental regulations. | ipping nam           | me, and are co      | onth Da       | y Yea  |
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| Ť                   | 100       | IPPING<br>CUMENT                       | 1. Generator ID Number   | 2. Page 1 of                 | 3. Emergency Response                     | Phone           | 4. Shipping           | Document             | Tracking Num    | 876         | n      |
|---------------------|-----------|--|--|------------------------------|---|-----------------|-----------------------|----------------------|-----------------|-------------|--------|
| 1                   | 100       | enerator's Name and                    | Mailing Address  | 401                          | Generator's Site Address                  | (if different t | han mailing addres    | s)                   | VVI             | 010         | 0      |
|                     | )         |  | GENERAL ELECTRIC (<br>ATTIVIMATT CALACO<br>139 PLASTICS AVE  | NE .                         | GENERAL SLEC<br>159 PLASTICS A            | VE              | 3                     | 1                    |                 | 16          | n.     |
| 1                   | 6. Tra    | erator's Phone: (1) ansporter 1 Compan | y Name   | L                            | PITTSFIELD, MA                            | 07201           | U.S. EPA ID N         | lumber               |                 | -           | -      |
| 1                   |           | BETC INC                               |  |                              |   |                 | NYD                   | 9 8                  | 6.9.6           | 9 9         | 4 7    |
| 1                   | 7. Tra    | ansporter 2 Compan                     | y Name   |                              |   |                 | U.S. EPA ID N         | lumber               |                 |             |        |
| 1                   | 8. De     | esignated Facility Na                  | rne and Site Address   |                              |   |                 | U.S. EPA ID N         | lumber               |                 |             | -      |
|                     |           |  | VEGLIA ES GREENTRI<br>635 TOBY ROAD  | EE LANDFILL                  |   |                 |                       |                      |                 |             |        |
| 1                   | Facili    |  | 365 1741 KERSEY, PA 15846  | 1000                         | -   |                 | NOI                   | R                    | 8 0             | - 1         | 2.3    |
|                     | 9a.<br>HM | 9b. U.S. DOT Dea                       | scription (including Proper Shipping Name, Hazard Cla<br>up (if any))  | ss, ID Number,               | 10. Contai<br>No.                         | Type            | 11. Total<br>Quantity | 12. Unit<br>Wt./Vol. | 13.0            | Codes       |        |
| 8                   |           | 1.<br>NOW REG                          | ULATED MATERIAL  |                              |   | ls.             | SWW &                 | -                    | NONE            |             |        |
| GENERATOR           |           |  |  |                              | 1   | DT              | 21,100                | K                    |                 |             |        |
| GENE                |           | 2.                                     |  |                              |   |                 |                       |                      |                 |             |        |
| 1                   |           |  |  |                              |   |                 |                       |                      |                 |             |        |
|                     |           | 3.                                     |  |                              |   |                 |                       |                      |                 |             |        |
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|                     |           | 4.                                     | The second secon |                              |   | -               |                       |                      |                 |             |        |
|                     | 10        |  |  |                              |   |                 |                       |                      |                 |             |        |
| 1                   | 14. S     | pecial Handling Inst                   | ructions and Additional Information  | If APPEARING MARKET AND THE  | LOTATE ANYTH COMM                         | 776 - 770       | ******                | min a                | Su se           | -           | -      |
| L                   | -         |  |  | CLATED SOUL SEDI             | MENI, AND LEE                             | MALP.           | ROVAL NUM             | MEET (A)             | 2840            |             |        |
|                     | 0.        | TRAILER ME                             | WBER D-5713 +0   |                              |   |                 |                       |                      |                 |             |        |
| 1                   | 15.       | CENERATOR SIGE                         | FEROR S CERTIFICATION: I hereby declare that the   | Contents of this consignment | 117107£                                   | sectional above | us hu the proper ch   | inning name          | and are class   | cified nack | nand   |
| 1                   |           |  | /placarded, and are in all respects in proper condition f  |                              |   |                 |                       |                      | o, and are olds | omeu, pach  | ageu,  |
| 1                   |           |  |  |                              | V   | 201             |                       |                      |                 |             |        |
| 1                   |           | rator's/Offeror's Print                |  | l al                         | TTT                                       | 101             | ARCADIS               | SAG                  | AUT Mon         | th Day      |        |
|                     | 16. In    | BERT PAPALI<br>ternational Shipmen     | LO (AGENT FOR GE)  | Export from                  | De la | -               | AKCAUS)               | HU                   | - C             | 305         | 115    |
| Z                   | Trans     | sporter signature (for                 | Import to U.S.   | Export from                  | U.S. Port of er<br>Date leav              |                 |                       |                      |                 |             |        |
| LER                 |           | the second second second second second | figment of Receipt of Shipment   | Sie                          | inature /                                 |                 |                       | 7/                   | Mon             | th Day      | Year   |
| TRANSPORTER         | Irans     | porter 1 Printed/Type                  | 1/0/   | KIN I                        | ///                                       | -               | 5                     | 10                   | 10              | 10'2        | 112    |
| SN                  | Trans     | porter 2 Printed/Typ                   |  |                              | gnature                                   | -               | 1                     | Lane                 | Mor             | nth Day     |        |
| 3                   |           |  |  |                              |   |                 |                       | -                    |                 |             | 1      |
| 1                   | -         | iscrepancy                             |  | _                            |   |                 |                       | _                    |                 |             | -      |
| 1                   | 18a. I    | Discrepancy Indication                 | on Space Quantity  | Туре                         | Residue                                   |                 | Partial Rej           | ection               | - 1             | Full Rej    | ection |
| l                   |           |  |  |                              | Shipping Documen                          | nt Tracking N   |                       |                      |                 |             |        |
| Ę                   | 18b. /    | Alternate Facility (or                 | Generator)   |                              |   |                 | U.S. EPA ID I         | Number               |                 |             |        |
| AC                  |           | a van                                  |  |                              |   |                 | 1                     |                      |                 |             |        |
| EDF                 |           | ty's Phone:<br>Signature of Alternate  | e Facility (or Generator)  |                              |   |                 |                       | _                    | Mo              | onth Da     | y Ye   |
| A                   |           |  |  |                              |   |                 |                       |                      |                 |             | L      |
| DESIGNATED FACILITY | _         | eport Management I                     | Method Codes (i.e., codes for treatment, disposal, and   |                              |   |                 | - 14                  |                      |                 |             |        |
| õ                   | t.        |  | 2.   | 3.                           |   |                 | 4.                    |                      |                 |             |        |
| 1                   | 20. D     | esignated Facility Ov                  | wner or Operator: Certification of receipt of shipment e   | xcept as noted in Item 18a   |   |                 |                       |                      |                 |             |        |
| 1                   | Printe    | ed/Typed Name                          |  | Si                           | gnature                                   |                 |                       |                      | Mo              | nth Day     | Y      |
| +                   |           |  |  |                              |   |                 |                       |                      |                 |             |        |
|                     |           |  |  |                              |   |                 | GEN                   | IPHATO!              | R / SHIPPE      | R'S INIT'   | ALC    |



| DO                                | PPING<br>CUMENT           | 1, Generator ID Number   |  | 3. Emergency Respons        |                    | Z                  | D cument T     | g Nu         | Bř.       |              |
|-----------------------------------|---------------------------|--|--|-----------------------------|--------------------|--------------------|----------------|--------------|-----------|--------------|
| 5. Ge                             | nerator's Name and Ma     | ailing Address   |  | Generator's Site Address    | s (if different th | nan mailing addres | ss)            |              |           |              |
| П                                 |                           | 1  |  |                             |                    |                    |                |              |           |              |
| Gene                              | rator's Phone:            | 1 18 - 7   |  |                             |                    |                    |                |              |           |              |
| 6. Ira                            | nsporter 1 Company N      | lame   |  |                             |                    | U.S. EPA ID N      | Number         | 5            | 3 5       | 1            |
|                                   | nsporter 2 Company N      | lame   |  |                             |                    | U.S EPAID N        | lumber         |              |           |              |
| 1                                 | ,,                        |  |  |                             |                    | 1                  | TOTTIDET       |              |           |              |
| 8. De:                            | signated Facility Name    |  | i .  |                             |                    | U.S. EPA ID N      | Number         |              |           | _            |
|                                   |                           |  | 1  |                             |                    |                    |                |              |           |              |
| Facilit                           | y's Phone:                | . 14 1   | F.   |                             |                    | 1                  |                |              | ī         | 0.           |
| 9a.                               |                           | iption (including Proper Shipping Name, H  | Hazard Class, ID Number,                     | 10. Conta                   | iners              | 11. Total          | 12 Unit        |              | _         |              |
| HM                                | and Packing Group         | (if any))  |  | No.                         | Type               | Quantity           | - Wt./Vol.     | 13. C        | odes      |              |
| 8                                 | t. NOW REGUL              | ATED MATERIAL  |  |                             |                    |                    |                | IF TIVE      |           |              |
| Z Z                               |                           |  |  | 1                           | U 7                | 20270              |                | Î            |           |              |
| GENERATOR                         | 2                         |  |  |                             | +                  |                    |                |              |           |              |
| 5                                 |                           |  |  |                             |                    |                    |                | 7            | -         | -            |
| -                                 | 3.                        |  |  |                             |                    | _                  |                |              |           |              |
|                                   | J.                        |  |  |                             |                    |                    |                |              |           |              |
|                                   |                           |  |  |                             |                    |                    |                |              |           |              |
|                                   | 4.                        |  |  |                             |                    |                    |                |              |           |              |
|                                   |                           |  |  |                             |                    |                    |                |              |           |              |
| 4. Sp                             | ecial Handling Instruct   | ions and Additional Information  |  | 101                         |                    | 72 T T             | 9              |              | -         |              |
|                                   |                           | D-7307   |  |                             |                    |                    |                |              |           |              |
|                                   |                           | CM SILVARLAR   |  |                             |                    |                    |                |              |           |              |
| 15. 0                             |                           |  | re that the contents of this consignment ar  | ra fully and accurately do  | carbod about       | by the proper chi  | noing name, or | d are classi | find nack | anad         |
|                                   |                           |  | condition for transport according to applica |                             |                    |                    | pping name, a  | d die Gassi  | neu, pack | ageu,        |
|                                   |                           |  |  |                             |                    |                    |                |              |           |              |
| Genera                            | ators/Offeror's Printed/  | Typed Name   | Sign   | ature                       |                    |                    |                | Month        | Day       | Year         |
| 16. Inte                          | ernational Shipments      |  |  |                             | Total Control      |                    |                | 05           | _         |              |
| Transr                            | porter signature (for exp | Import to U.S.   | Export from U.S                              | S. Port of en<br>Date leavi |                    |                    | _              |              | •         |              |
| 17 Tra                            | nsporter Acknowledgm      | ent of Receipt of Shipment   |  |                             | ing 0.0            |                    |                |              |           |              |
| Transp                            | orter 1 Printed/Typed N   | lame   | Signa  | ature /                     |                    |                    |                | Month        | Day       | year<br>3 13 |
| Transo                            | orter 2 Printed/Typed N   | The second secon | Signa  | ature                       |                    | -                  |                | Month        | Day       | Year         |
| 2                                 |                           | 150115   | 1  |                             | -                  |                    |                |              | 1         | 1            |
| -                                 | crepancy                  |  |  |                             |                    |                    |                | . *          |           |              |
| 18a. Di                           | screpancy Indication S    | pace Quantity  | Туре   | Residue                     |                    | Partial Reje       | ction          |              | Full Reje | ection       |
|                                   |                           |  |  |                             |                    |                    |                |              |           |              |
| 18b. Al                           | ternate Facility (or Gen  | perator)   |  | Shipping Document           | Tracking Nun       | u.S. EPA ID No     | ımber          |              | _         |              |
| 3                                 |                           |  |  |                             |                    |                    |                |              |           |              |
| Facility                          | 's Phone:                 |  |  |                             |                    | 1                  |                |              |           |              |
| 18c. Si                           | gnature of Alternate Fa   | cility (or Generator)  |  |                             |                    |                    |                | Month        | Day       | Year         |
| 18b. All<br>Facility<br>18c. Sign | oort Management Meth      | nd Codes (i.e. codes for Ireatment disco   | neal and reguling outtoms)                   |                             |                    |                    |                |              | 1_        |              |
| Ker                               | ort management mein       | od Codes (i.e., codes for treatment, dispo   | osal, and recycling systems)  3.             |                             |                    | 4.                 |                |              | -         |              |
|                                   |                           |  |  |                             |                    |                    |                |              |           |              |
|                                   |                           | or Operator: Certification of receipt of shi   |  |                             |                    |                    |                |              |           |              |
| Printed                           | Typed Name                |  | Signa  | ture                        |                    |                    |                | Month        | Day       | Year         |
|                                   |                           |  |  |                             |                    | OFFIF              | RATOR / SI     | JIDDED.      | I INITE   | 11 000       |
|                                   |                           |  |  |                             |                    | GENE               | UVIIOU 12      | HELEU!       | D HALLIN  | ar cor       |



| SHIPPING   | 31.5                  | tor ID Number   | 5 J 3   |                         | 3 Emergency Re      |            |              | Z                        | Z                    | acking Number |                  |
|--|-----------------------|---|---|-------------------------|---------------------|------------|--------------|--------------------------|----------------------|---------------|------------------|
| 6 Generator's Name a   | ad Mailing Address    | OBMORAL BLE<br>ATTMEMATE<br>159 PLASTICS<br>PRITSFIELD, M | AVE AVE   | 1                       | Senerator's Site A  | •          | if different | than mailing addres      | ss)                  |               |                  |
| Generator's Phone:  6. Transporter 1 Compa PAGE L'TC INC   |                       |   |   |                         |                     |            |              | U,S. EPA IO              | lumber               |               | -7               |
| 7. Transporter 2 Compa   | any Name              |   |   |                         |                     |            |              | U.S. EPA ID N            | lumber               |               |                  |
| 8. Designated Facility N   | lame and Site Addr    | 635 TOBY SOA  | EENTREE LAND<br>ID  | FILL                    |                     |            |              | U.S. EPA ID N            | lumber               |               |                  |
| Facility's Phone.  | 285-1741              | KEPSEY, 9A (  | 5846  |                         |                     |            |              | .1.                      |                      |               | 0                |
| HM and Packing G   |                       |   | e, Hazard Class, ID Numbe                                 | er,                     | 10.<br>No.          | Containe   | ers<br>Type  | 11. Total<br>Quantity    | 12. Unit<br>Wt./Vol. | 13. Codes     |                  |
| 5  | AVERIED IN            | A CARLON  | +   |                         |                     | 1          | o w          | 20,940                   | 7                    |               |                  |
| 2.   |                       |   |   |                         |                     |            |              |                          |                      |               |                  |
| 3.   |                       |   |   |                         |                     |            |              |                          |                      |               |                  |
| 4.   | *                     |   |   |                         | T                   |            |              |                          |                      |               |                  |
|  | d/placarded, and ar   | e in all respects in prope                                | clare that the contents of the condition for transport as | ccording to applicat    | ole international a |            |              |                          | oping name, a        | Month I       | Day Year         |
| 16. International Shipme   |                       | mport to U.S.   |   | Export from U.S         |                     | t of entry |              |                          |                      | Josic         | 0113             |
| 16. International Shipme Transporter signature (f 17. Transporter Acknowle Transporter 1 Printed/Ty Transporter 2 Printed/Ty | edgment of Receipt    | of Shipment   |   | Šigna                   |                     | e leaving  | 1 U.S.:      | 10                       |                      | 1             | Day Year         |
| Transporter 2 Printed/Ty   | ped Name              | 1   |   | Signa                   | lure                |            |              | 1.21                     | Y                    |               | 8 13<br>Day Year |
| 18. Discrepancy<br>18a. Discrepancy Indica   | tion Space            | Quantity  | Туре  |                         | Residue             |            |              | Partial Reject           | ction                | Full I        | Rejection        |
| 18b. Alternate Facility (o   | r Generator)          |   |   |                         | Shipping Doo        | cument T   | racking Nu   | imber:<br>U.S. EPA ID Nu | ımber                |               |                  |
| 18b. Alternate Facility (o<br>Facility's Phone:<br>18c. Signature of Alterna   | ile Facility (or Gene | rator)  |   |                         |                     |            |              |                          |                      | Month         | Day Year         |
| Report Management  | Method Codes (i.e.    | , codes for treatment, dis                                | sposal, and recycling syste                               | ems)                    |                     |            |              | 4.                       |                      |               |                  |
| 20. Designated Facility C  | Owner or Operator:    | Certification of receipt of                               | shipment except as noted                                  | I in Item 18a<br>Signal | ure                 |            | -            |                          |                      | Month E       | Day Year         |
| 7,7  | _                     |   |   | 5,3,101                 |                     |            |              | GENE                     | RATOR / S            | HIPPER'S IN   |                  |



| 1                   | SHIPPING<br>DOCUMENT  | 1. Generator ID Number   | 0.4.3                           |                        | Emergency Response Phon                | Z                             | Document T     | ing N r                             |
|---------------------|---|--|---------------------------------|------------------------|--|-------------------------------|----------------|-------------------------------------|
|                     | Generator's Name and Ma   | Hing Address ( LEAL FI )  LAINTY ( LANCE )  LAINTY ( LANCE )  LAINTY ( LANCE )  LAINTY ( LANCE ) | AVE                             | Ger                    | erator's Site Address (if diff         | erent than mailing addres     | s)             |                                     |
|                     | Generator's Phone: 6. Transporter 1 Company Na PACKS BTC JINC                                     |  |                                 |                        |  | U.S. EPA ID N                 | lumber         |                                     |
|                     | 7. Transporter 2 Company Na   |  |                                 |                        |  | U.S. EPAID N                  |                |                                     |
|                     |   | and Site Address VEOI A 8 OR<br>699 T BY ROV   | ATQ.                            | ILI,                   |  | Ü.S. EPA ID N                 | lumber         |                                     |
|                     | 9a. 9b. U.S. DOT Descrip  | ption (including Proper Shipping Name  |                                 |                        | 10. Containers                         | 11. Total                     | 12. Unit       | 13. Codes                           |
| TOR -               | HM and Packing Group (i   | ATED MATERIAL  |                                 |                        | No. T                                  | type Quantity                 | Wt./Vol.       | *                                   |
| GENERATOR           | 2.  | W  |                                 |                        |  | 7,700                         |                |                                     |
|                     | 3.  |  |                                 |                        |  |                               | +              | 1                                   |
|                     | 4.  |  |                                 |                        |  |                               |                |                                     |
|                     | MATTERIAL FRO   |  | clare that the contents of this | s consignment are fu   | international and national gr          | overnmental regulations.      | oping name, ai | Month Day Year                      |
| INT                 | 16. International Shipments  Transporter signature (for exp                                       | Import to U.S.   |                                 | Export from U.S.       | Port of entry/exit<br>Date leaving U.S | :                             |                |                                     |
| TRANSPORTER   INT'I | 17. Transporter Acknowledgme Transporter 1 Printed/Typed No.  Y 1 Transporter 2 Printed/Typed No. | ent of Receipt of Shipment<br>ame  |                                 | Signaturi<br>Signaturi | 1                                      | ***                           |                | Month Day Year Month Day Year       |
| 1                   | 18. Discrepancy 18a. Discrepancy Indication Sp  | pace Quantity  | Туре                            |                        | Residue                                | Partial Rejec                 | ction          | Full Rejection                      |
| NATED FACILITY -    | 18b. Alternate Facility (or Gene<br>Facility's Phone:<br>18c. Signature of Alternate Fac          |  |                                 |                        | Shipping Document Track                | ing Number:<br>U.S. EPA ID No | ımber          | Month Day Yea                       |
|                     |   | od Codes (i.e., codes for treatment, dis   | sposal, and recycling system    |                        |  | Tr.                           |                | 111                                 |
| 5                   | 20 Designated Facility Co.  | Or Control or Control or Control   | abinomat current                | 3.                     |  | 14.                           |                |                                     |
|                     | 20. Designated Facility Owner Printed/Typed Name  | or Operator: Certification of receipt of   | snipment except as noted in     | Signature              |  | OFNE                          | DATOR /C       | Month Day Year HIPPER'S INITIAL COI |



| 1                 | DO        | IIPPING<br>OCUMENT<br>enerator's Name and Maili        | 1. Generator ID Number   | 0.83   |   | nergency Respons                       |                                | Z  | Z                    | acki g Number          |                  |
|-------------------|-----------|--|--|--|---|--|--------------------------------|--|----------------------|------------------------|------------------|
|                   | )         | erator's Phone:  | ATTRAATT -<br>ATTRAATT -<br>159 PLASTICS                                   | DLACCHE<br>AVE   | Gene  | ator s site noures.                    | s (ii umerent ii               | an maiing addres                         | 5)                   |                        |                  |
|                   | P 112     | ansporter 1 Company Name                               | ne   |  |   |  |                                | U.S. EPAID N                             | lumber               |                        |                  |
|                   | 7. Tra    | ansporter 2 Company Nan                                | ne   |  |   |  |                                | U.S. EPAID N                             | umber                |                        |                  |
|                   | 8. De     | esignated Facility Name ar                             | nd Site Address  |  |   |  |                                | U.S. EPA ID N                            | lumber               |                        |                  |
|                   | Facil     | lity's Phone: 21/1 25                                  | N 1/14   |  |   |  |                                | 1  |                      |                        |                  |
|                   | 9a.<br>HM |  | ion (including Proper Shipping Name  | , Hazard Class, ID Number                                      |   | 10. Conta                              | Type                           | 11. Total<br>Quantity                    | 12. Unit<br>Wt./Vol. | 13. Codes              |                  |
| GENERATOR -       |           | 1 HON RECUL  | ATEL MATERIAL  |  |   | 7                                      | O Y                            | 20,350                                   |                      | ****                   |                  |
| - GENE            |           | 2.   |  |  |   |  |                                |  |                      |                        | -                |
|                   | n         | 3.   |  |  |   |  |                                |  |                      |                        |                  |
|                   |           | 4.   |  |  |   |  |                                |  |                      |                        |                  |
|                   | 15.       | GENERATOR S/OFFERO<br>marked and labeled/placa         | OR S CERTIFICATION: I hereby dec<br>rded, and are in all respects in prope | lare that the contents of thi<br>r condition for transport acc | s consignment are fully<br>cording to applicable in | and accurately de<br>emational and nat | scribed above<br>ional governm | by the proper ship<br>ental regulations. | oping name, ar       | nd are classified, pad | ckaged,          |
|                   |           | erator's/Offeror's Printed/Ty                          |  |  | Signatur  |  |                                | 7  | -                    | Month Da               | BII3             |
| INT'L             |           | nternational Shipments<br>sporter signature (for expo  | Import to U.S.   |  | Export from U.S.                                    | Port of en                             |                                |  |                      |                        |                  |
| RTER              |           | ransporter Acknowledgmen<br>sporter 1 Printed/Typed Na |  |  | Signature   | 7,                                     | 2                              | 1  |                      | Month Da               |                  |
| TRANSPORTER INT'L | Trans     | Robert /   | ng laro  |  | Signature   | bis                                    | 17                             |  |                      | Month Da               | 3   13<br>y Year |
| $\rightarrow$     |           |  |  |  |   |  |                                |  |                      | 1-1                    |                  |
| 11                |           | iscrepancy Discrepancy Indication Spa                  | Quantity   | Туре   |   | Residue                                |                                | Partial Reject                           | tion                 | Full Re                | ejection         |
| CILITY            | 18b. A    | Alternate Facility (or Gener                           | rator)   |  |   | Shipping Documen                       | t Tracking Nun                 | u.S. EPA ID Nu                           | mber                 |                        |                  |
|                   |           | ty's Phone:<br>Signature of Alternate Facil            | lity (or Generator)  |  |   |  |                                |  |                      | Month Da               | ay Yea           |
| -                 | 9. Re     | eport Management Method                                | d Codes (i.e., codes for treatment, dis                                    | sposal, and recycling system                                   |   |  |                                | Tz.                                      |                      |                        |                  |
| 1                 |           |  | 2  |  | 3.  |  |                                | 4.                                       |                      |                        |                  |
|                   |           | esignated Facility Owner o<br>ed/Typed Name            | r Operator: Certification of receipt of                                    | shipment except as noted i                                     | n Item 18a<br>Signature                             |  |                                |  |                      | Month Da               | y Year           |
| * 1               | -         |  |  |  |   |  | -                              | GENE                                     | BATOR / SI           | HIPPER'S INIT          | IAL COF          |



| 4                 | T 5      | SHIPPING 1. Generator ID Number   | 2. Page 1 of 3. 8  | mergency Respons  | e Phone         |                     | Document F           | racking Numbe                           | er to the |   |
|-------------------|----------|---|--|---|-----------------|---------------------|----------------------|---|-----------|---|
|                   |          | OCUMENT SE BARRES BARRES  |  | <u> </u>  |                 | 3                   |                      | 0313                                    | 11        | 6                                       |
| 1                 | 5.       | Generator's Name and Mailing Address  |  | erator's Site Address   | '               |                     | ss)                  |   |           |   |
| . 1               |          | E HOMERAN LIMITAN TAN<br>A E PROTESANT TO MELANA ME   | *  | 1968 N. H. H. W.<br>H. M. H. M. B. M. B | #함: * **        |                     |                      |   |           |   |
|                   | G        | PUR PLANTING A 7 H enerator's Phone: 1/2  | 1.74   | 1 000000  | 0.00            |                     |                      |   |           |   |
|                   | 6.       | Transporter 1 Company Name  |  |   |                 | U.S. EPA ID N       |                      |   |           |   |
|                   | 7        | Transporter 2 Company Name  |  |   |                 | US EPAID N          | W 7                  | N 1 3 12                                | -1        | ; '                                     |
|                   |          | Handporter a configurity mainte   |  |   |                 | 0.5. C(A)D(         | iumer                |   |           |   |
|                   | 8.       | Designated Facility Name and Site Address   |  |   |                 | U.S. EPA ID N       | lumber               |   |           |   |
|                   |          | AND ALVE A MENTAL AND   | fl.Sz  |   |                 |                     |                      |   |           |   |
|                   |          | <b>東京の</b> - タンジン教育 のた 打ち返  |  |   |                 | 1                   |                      | .,                                      |           | _                                       |
|                   | -        | City's Phone: 113 1A 1 1A 1   |  | 10. Conta   | iners           | 11. Total           | 12. Unit             | <u> </u>                                | :         |   |
|                   | 9a<br>HM |   |  | No.   | Гуре .          | Quantity            | ₩t./Vol.             | 13. Cod                                 | eš        |   |
| 1 %               |          | 1. SOMERNE STOD NATURIAL  |  |   | · ·             | [J. 583) W N        | H.3.                 | Nach ing                                |           |   |
| N S               |          |   |  | ,   | E3 - 37         | 20.390              | ×.                   |   |           |   |
| GENERATOR         | -        | 2.  |  |   | <u> </u>        | 7 7 7 7 7 7 7       |                      |   | 2         |   |
| 5                 |          |   |  |   |                 |                     |                      |   |           | *-                                      |
|                   | <u> </u> | 3.  |  |   | ļ               |                     |                      | <u> </u>                                |           | ~~~                                     |
|                   |          | · ·   |  |   |                 |                     |                      | )                                       |           |   |
|                   |          |   |  |   |                 |                     |                      | ;                                       |           |   |
|                   |          | 4.  |  |   |                 |                     |                      |   | *         |   |
|                   |          |   |  |   |                 |                     |                      | • | 1         |   |
|                   | 14.      | Special Handling Instructions and Additional Information # 124 27 10 17 PM CLARAGE                  | (1. 18) - (1. <b>8</b> 14.)  | jagar senas j   | APPEN AP        | Color of A          | 5-1555 <b>&gt;</b> 7 | triniari                                |           |   |
|                   | i<br>i   | SEASTER CONCERNATION (A. A.C.) 1 13   | •  |   |                 |                     |                      |   |           |   |
|                   |          | , , , , , , , , , , , , , , , , , , ,   |  |   |                 |                     |                      |   |           |   |
|                   | 15.      | GENERATOR S/OFFEROR S CERTIFICATION: Thereby declare that the contents of this                      | consignment are fu   | ly and accurately de  | scribed above   | by the proper shi   | pping name,          | and are classifie                       | d, packa  | ged,                                    |
|                   | l        | marked and labeled/placarded, and are in all respects in proper condition for transport according   | ording to applicable   | nternational and nat  | ional govemn    | nental regulations. | -                    |   |           | •                                       |
|                   | Car      | nerator's/Offeror's Printed/Typed Name  | / Signature  | in a name of  | ··· ,           |                     |                      | Month                                   | Day       | Year                                    |
|                   | i        | POSSE PASA LO ACCETA (CEA 19)   | Contraction of the Contraction o |   |                 |                     |                      |   | le pe 1   | l l la                                  |
| Ę                 |          | International Chimneste   | Export from U.S.   | Port of er  |                 | <u> </u>            | A 1 and              |   | L         | 11                                      |
| FN                | Ťra      | nsporter signature (for exports only):  | 2 Export from 0.0.   | Date leav   |                 |                     |                      |   |           |   |
| TRANSPORTER       |          | Transporter Acknowledgment of Receipt of Shipment<br>isporter 1 Printed/Typed Name                  | Signature  | 2. 11.  |                 |                     |                      | Month                                   | Day       | Year                                    |
| POR               |          |   |  |   | . to the second |                     |                      |   | les q     | 13.7%                                   |
| ANS               | Tran     | isporter 2 Printed/Typed Name   | Signature  |   |                 |                     |                      | Month                                   | Day       | Year                                    |
| TR                |          |   |  |   |                 |                     |                      |   | <u> </u>  | <u> </u>                                |
| 1                 |          | Discrepancy   |  | F:-3  |                 |                     |                      |   |           | *************************************** |
|                   | ioa      | Discrepancy Indication Space Quantity Type  |  | Residue   |                 | Partial Reje        | ction                | L_J F                                   | ull Rejec | tion                                    |
|                   |          |   |  | Shipping Documen  | t Tracking Nu   | mber:               |                      |   |           |   |
| Ě                 | 18b.     | Alternate Facility (or Generator)   |  |   |                 | u,s, epaid ni       | umber                |   |           |   |
| ACI               |          |   |  |   |                 | ı                   |                      |   |           |   |
| 品                 |          | lity's Phone:<br>Signature of Alternate Facility (or Generator)                                     |  |   |                 |                     | ·····                | Month                                   | Day       | Year                                    |
| NAT               |          |   |  |   |                 |                     |                      |   | ļ         |   |
| SIGNATED FACILITY | 19. 8    | Report Management Method Codes (i.e., codes for treatment, disposal, and recycling system           |  |   |                 |                     |                      |   |           |   |
| į.                | 1.       | 2.  | 3.   |   |                 | 4.                  |                      |   |           | -                                       |
| 11                | 20 1     | ]<br>Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in | n Item 18a   |   |                 |                     |                      |   |           |   |
| 1 1 1             |          | ed/Typed Name   | Signature  |   |                 |                     |                      | Month                                   | Day       | Year                                    |
| 1                 |          |   |  |   |                 |                     |                      |   |           |   |

|                    | SHIPPING<br>DOCUMENT  | 1. Generator ID Number  | , ,                                    | 2,5≥,   | ergency Response   |   | Z  | <b>Z</b>              | Frecking Number            |            | 7                                       |
|--------------------|---|---|--|---|--|---|--|-----------------------|----------------------------|------------|---|
|                    | 5. Generator's Name and Mailfr                                    | 19 Address  |  | ∭1.<br>9 } # .                                  | tor's Site Address   | OMERIO.<br>PA                           | an malling addre   | ss)                   |                            |            |   |
|                    | Generator's Phone: 6. Transporter 1 Company Nam                   |   | ************************************** |   |  | <u> </u>                                | U.S. EPA ID I  |                       | 5 7 5 7                    | 3 3        | 7 .                                     |
|                    | 7. Transporter 2 Company Nam                                      | ie  |  | MINUTES AND |  |   | U.S. EPA ID N  | lumber                |                            |            | ···                                     |
|                    | 8. Dasignated Facility Name an                                    | d Site Addressिक्ष भारत्य सम्बद्धाः सङ्ख्या<br>अवस्य विकासिक्षाः स्थापन्तः          | ARAG CAMPALL                           | <del></del>                                     |  | *************************************** | U.S. EPA ID I  | lumber                |                            |            | *************************************** |
|                    | Facility's Phone:   | 1977 (347), Mar (1974)<br>1974  | •                                      |   |  |   | 1327   | G,                    | st j                       | i /        | , i                                     |
|                    | HM and Packing Group (if a  |   | rd Class, ID Number,                   |   | 10. Contair<br>No.   | ners<br>Type ,                          | 11. Total<br>Quantity  | 12. Unit<br>-Wt./Vol. | 13. Code                   | s          |   |
| GENERATOR          |   |   |  |   | *  | er o                                    | 2/20   | is.                   | ()<br>()<br>()<br>()<br>() |            |   |
| GEN                | 2.  |   |  |   |  |   |  |                       |                            |            |   |
|                    | 3.  |   |  |   |  |   |  |                       | :                          | 3          | -                                       |
|                    | 4.  |   | 256                                    |   |  |   |  |                       |                            |            |   |
|                    | 1   | s and Additional Information  | į                                      |   | Marija is ing kabba<br>≨   | i in an akka i wila                     | 10. gr. 10. gr | 19 - A.J. G           |                            |            |   |
|                    |   | R S CERTIFICATION: I hereby declare the ded, and are in all respects in proper cond |  |   |  |   |  | oping name,           | and are classified         | , packag   | ged,                                    |
| ₩                  | Generator's/Offeror's Printed/Typ<br>2003-02-12-1-2-AVV-9-1-2-0-0 | ped Name<br>(사용활동 유민준 전환)   | <u> </u>                               | Signature                                       | HAA  | Wes                                     | ta) řís  | and Tanglas           | Month                      | Day<br>-   | Year                                    |
| NT.L               | 16. International Shipments  Transporter signature (for expor     |   | Export f                               | rom U.S.  | Port of ent<br>Date leavir   |   |  | -                     |                            |            |   |
| TRANSPORTER INT'L  | 17. Transporter Acknowledgment<br>Transporter 1 Printed/Typed Nan | ne ?  |  | Signature                                       | The state of the s | e light have a seal with the season of  |  |                       | Month                      | Day        | Vear                                    |
| TRANS              | Transporter 2 Printed/Typed Nan                                   |   |  | Signature                                       |  |   |  |                       | Month                      | Day        | Year                                    |
|                    | 18. Discrepancy<br>18a. Discrepancy Indication Space              | ce Quantity   | Туре                                   |   | Residue  |   | Partial Reje   | ction                 | Fu                         | ıll Reject | tion                                    |
|                    | 18b, Alternate Facility (or Genera                                | ator)   |  | S   | nipping Document   | Tracking Num                            | nber:<br>U.S. EPA ID N   | ımber                 |                            |            |   |
| FACILI             | Facility's Phone:   | ,   |  |   |  |   | ļ  |                       |                            |            |   |
| FSIGNATED FACILITY | 18c. Signature of Alternate Facili                                | ty (or Generator)   |  |   |  |   |  |                       | Month                      | Day        | Year                                    |
| SESIG              | 19. Report Management Method                                      | Codes (i.e., codes for treatment, disposal, 2.                                      | and recycling systems)                 | 3.  |  |   | 4.   |                       |                            |            |   |
| +                  | 20. Designated Facility Owner or<br>Frinted/Typed Name            | Operator: Certification of receipt of shipm   | ent except as noted in Item 18         | a<br>Signature                                  |  |   |  |                       | Month [                    | Day        | Yéar                                    |



| 1                    | SHIPPING<br>DOCUMENT  | 1. Generator ID Number  | 2. Page 1 of                      | 3. Emergency Response                  |  | Z  | <b>Z</b>             | Fracking Numb  |             | 3  |
|----------------------|---|---|-----------------------------------|--|--|--|----------------------|----------------|-------------|--|
| <u> </u>             | 5. Generator's Name and Marii                                     | ng Address<br>・ pro to fight ( からみと) できる。<br>・ pro to fight ( からまる) できる。<br>・ See Mich そきのは、人では<br>to aut ( pro to ) ・ Mich ( 2 またまる) まる。 できた | To <sup>®</sup> ¥∰                | Generator's Site Address               |  | n mailing addrei   | ss)                  |                |             |  |
|                      | Generator's Phone:<br>6. Transporter 1 Company Nan                |   |                                   | A 4 1                                  |  | U.S. EPA ID I  | Number               |                |             |  |
|                      | TAGESTA NA  |   |                                   |  |  |  |                      | 1 Å j          | 3 (4)       | ý "  |
| 7,11.10              | 7. Transporter 2 Company Nam                                      | ne .  |                                   |  |  | U.S. EPA ID N  | lumber               |                |             | ***************************************  |
|                      | 8. Designated Facility Name an                                    | id Sile Address ात्र सुरक्षित्र स्टब्स्ट हिन्द  | <b>的某人的数多接收</b>                   | —————————————————————————————————————— |  | U.S. EPA ID N  | Number               |                |             |  |
|                      |   | SALECTER BELLEY<br>LEBERTER BLOCK   |                                   |  |  |  |                      |                |             |  |
|                      | Facility's Phone:   | 5 3 3 X 4   |                                   |  | ····-                                  |  | ::<br>               | is d           | i           | 7  |
|                      | HM and Packing Group (if a  |   | Class, ID Number,                 | 10, Contair<br>No.                     | Type .                                 | 11. Total<br>Quantity  | 12. Unit<br>Wt./Vol. | 13. Co         | odes        |  |
| GENERATOR -          |   | COMPARATORIS.   |                                   | ì                                      |  |  | 0 <b></b><br>40      |                |             |  |
| - GENE               | 2.  |   |                                   |  | Į.                                     |  |                      |                |             |  |
|                      | 3.  |   |                                   |  |  | <u></u>  |                      |                |             |  |
|                      | 4.  |   |                                   |  |  | to the second se |                      | i i            |             | Alexandra de la companya de la comp |
|                      |   |   |                                   |  |  |  |                      |                |             |  |
|                      | 15. GENERATOR S/OFFERO  | R S CERTIFICATION: I hereby declare that tided, and are in all respects in proper condition   | ne contents of this consignment a | we fully and accurately des            |  |  | pping name,          | and are classi | fied, packa | ged,   |
|                      | Generator's/Offeror's Printed/Ty                                  |   | Sign<br>13.2                      | nature                                 | Course                                 |  |                      |                | •           | Year   |
| INT                  | 16. International Shipments Transporter signature (for expor      | Import to U.S.  | Export from U                     |  | ry/exit:                               |  |                      |                |             | L  |
| TER.                 | 17. Transporter Acknowledgment<br>Transporter 1 Printed/Typed Nar | t of Receipt of Shipment  | Sign                              |  |  |  |                      | Month          | - Cour      |  |
| POR                  | Z   |   | J.gii                             | ature,                                 |  | A.   |                      | ** /:          | Day .       | Year   |
| TRANSPORTER INT'L    | Transporter 2 Printed/Typed Nar                                   | ne -  | Sign                              | pature                                 |  |  |                      | Month          | Day         | Year   |
| ,                    | 18. Discrepancy  18a. Discrepancy Indication Spa                  | ra []   | []                                |  |  |  |                      | ,              | 1           |  |
|                      | Total Discrepancy Indication ope                                  | Ce LI Quantity  | Туре                              | Residue                                | Ĺ                                      | Partial Reje   | clion                | l              | Full Reje   | ction  |
| <u>-</u><br><u>-</u> | 18b, Alternate Facility (or Genera                                | afor)   |                                   | Shipping Document                      |  | er:<br>U.S. EPA ID Ni  | umber                | <u> </u>       |             |  |
| FACIL                | Facility's Phone;   |   |                                   |  | ı                                      |  |                      |                |             |  |
| SIGNATED FACILITY    | 18c, Signature of Alternate Facili                                | ty (or Generator)   |                                   |  | ************************************** |  |                      | Month          | n Day       | Year   |
| 58                   | 19. Report Management Method                                      | Codes (i.e., codes for treatment, disposal, an  | d recycling systems)              |  |  |  |                      |                |             |  |
| 1                    | 1.  | 2.  | 3.                                |  |  | 4.   |                      |                |             |  |
| <i>)</i> 1 1         |   | Operator: Certification of receipt of shipment  |                                   |  |  |  |                      |                |             |  |
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|                                       | SH                             | IPPING   | 1. Generator ID Number   |  | 2. Page 1 of 3.                         | Emergency Respons      | e Phone                                | 4. Shipping                             | Document                               | Tracking Number                         |   |
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|                                       | 5. Ge                          | nerator's Name and Mail  | ing Address  | versik kristis i i i i i i i i i i i i i i i i i |   | erator's Site Address  |  |   | s)                                     |   | *************************************** |
|                                       |                                |  | All Market   | Del Maria  | . *                                     | outselle s             | A CAMP                                 |   |  |   |   |
|                                       | Čona                           | rator's Phone: (1917)  | 1.72 3 3 4 4 13 13 13 14 1   | 566. (桂) 614                                     | [ / ]                                   | 新                      | 5-39,704                               |   |  |   |   |
|                                       | 6. Tra                         | rator's Phone:<br>insporter 1 Company Nar  | me   |  | <u></u>                                 |                        |  | U.S. EPA ID N                           |  | ,                                       |   |
| 1 L                                   |                                | CHRIMANIC  |  | ,  |   |                        |  |   |  |   | 4 4 4                                   |
|                                       | 7. Tra                         | nsporter 2 Company Nar   | me   |  |   |                        |  | U.S. EPA ID N                           | umber                                  |   |   |
| 11                                    | 8. De:                         | signated Facility Name a   | nd Site Address  |  | <del></del>                             |                        | <del></del>                            | U.S. EPA ID N                           | lumber                                 |   | ·····                                   |
|                                       |                                | - ,  | ind Site Address   | MEERINGH IJ (I<br>MD                             | 7 8 12                                  |                        |  |   |  |   |   |
|                                       | Facilit                        | ty's Phone:  | and the second of the  | \$\$.36.5 <u>\$</u>                              |   |                        |  | 180 × 30 - 1                            | 3₹,                                    | A 2                                     | 1 / 1                                   |
|                                       | 9а.<br><b>НМ</b>               |  | tion (including Proper Shipping Name   |  |   | 10. Contai<br>No.      | iners<br>Type                          | 11. Total<br>Quantity                   | 12. Unit<br>Wt./Vol.                   | 13. Codes                               | ;                                       |
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|                                       |                                | <u> </u>   | ns and Additional Information  |  |   |                        | <u> </u>                               |   | 1                                      |   |   |
|                                       | 15. (                          | GENERATOR S/OFFERO   | DR S CERTIFICATION: 1 hereby dec<br>arded, and are in all respects in prope  | lare that the contents of thi                    | is consignment are f                    | illy and accurately de |  |   | pping name,                            | and are classified,                     | packaged,                               |
|                                       | Gener                          | ator's/Offeror's Printed/Ty  | yped Name  |  | Signatu                                 | P ( \ \ ) ///          | (37                                    | · \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ |  | ( Month                                 | Day Year                                |
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| ۱ŀ                                    |                                | screpancy<br>Piscrepancy Indication Sp   | ace Quantity   | Туре   |   | Residuc                |  | Partial Rejer                           | clion                                  | [ ] <sub>Ful</sub>                      | II Rejection                            |
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|                                       |                                |  |  |  |   |                        |  |   |  |   |   |
|                                       |                                | y's Phone:<br>ignature of Alternate Faci   | ility (or Generator)   |  | *************************************** |                        | ······································ |   |  | Month                                   | Day Yea                                 |
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| 11                                    |                                | de la mero   |  |  | :- 14 40                                |                        |  |   |  |   |   |
|                                       |                                | signated Facility Owner o<br>I/Typed Name  | or Operator; Certification of receipt of   | sn:pment except as noted                         | in Item 18a<br>Signatui                 | e                      |  | ·                                       | ······································ | Month                                   | Day Year                                |
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|                   | 6. Tra      | rator's Phone.<br>ansporter 1 Company Nar            |   |  | <u> </u>                                |                                       |                                | U.S. EPA ID N                               |                      | * * 7 G                   | .,      |
|                   | L           | ensporter 2 Company Nan                              |   |  |   |                                       |                                | U.S. EPA ID N                               |                      | ÷ 1 + +                   | 1 }     |
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|                   | 9a.<br>HM   | 9b. U.S. DOT Descript<br>and Packing Group (if       | ion (including Proper Shipping Na<br>any))                                | me, Hazard Class, iD Number  |   | 10, Contai<br>No.                     | iners<br>Type                  | 11. Total<br>Quantity                       | 12. Unit<br>Wt./Vol. | 13. Codes                 |         |
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| - GENERATOR       |             | 2.   |   |  |   |                                       |                                |   |                      |                           |         |
|                   |             | 3.   |   |  |   |                                       | ļ                              |   |                      | ·                         |         |
|                   |             |  |   |  |   |                                       |                                |   |                      | 3. <sup>7</sup><br>f      |         |
|                   |             | 4.   |   |  | *************************************** |                                       |                                |   |                      |                           |         |
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|                   | 15.         | GENERATOR S/OFFERO                                   | DR S CERTIFICATION: Thereby arded, and are in all respects in pro         | declare that the contents of th  | s consignment are fu                    | ily and accurately de                 | scribed above<br>ional governn | e by the proper ship<br>nental regulations. | oping name           | , and are classified, pac | kaged,  |
|                   | •           | rator's/Offeror's Printed/Ty                         | /ped Name<br>- 그런 실론하다 다시하는 어플  |  | Signatur                                | LALKS                                 | (don't                         | (iz) (72                                    |                      | Month Day                 | ·       |
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| <u> </u>          | 18. Di      | iscrepancy   |   |  | 1                                       |                                       |                                |   |                      |                           |         |
|                   | 18a. 0      | Discrepancy Indication Sp                            | ace Quantity  | Туре   |   | Residue                               |                                | Partial Reje                                | ction                | Full Re                   | jection |
|                   | 18b. A      | Alternate Facility (or Gene                          | rator)  |  |   | Shipping Documen                      | it Tracking Nu                 | mber:<br>U.S. EPA ID N                      | umber                |                           |         |
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| 3.G               | 19. R       | eport Management Metho                               | d Codes (i.e., codes for treatment  | , disposal, and recycling syste  | . ,                                     |                                       |                                |   |                      |                           |         |
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|                   |             | esignated Facility Owner of                          | or Operator: Certification of receip                                      | t of shipment except as noted  | in Item 18a<br>Signatur                 | 3                                     |                                |   |                      | Month Day                 | / Year  |
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|                   | DOCUMENT 5. Generator's Name and Mailing Address:   | Generat  | or's Site Address                     | (if different tha | n mailing addres      | <u>/</u> (                            | ا الرياد الله الله الله الله الله الله الله ال |        |
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|                   | Generator's Phone: 113 154 1555 15  | 13.1   | n maland                              | , Billy           |                       |                                       |  |        |
|                   | 6. Transporter 1 Company Name   |  |                                       |                   | U.S. EPAID N          |                                       | 11/4/9/5                                       | 4 1    |
|                   | CONTRACT AND SUPPORT OF CO.  7. Transporter 2 Company Name  |  | · ·                                   |                   | U.S. EPA ID N         |                                       |  |        |
|                   |   |  | }                                     |                   | <u> </u>              | 1.3                                   |  |        |
|                   | 8. Designated Facility Name and Site Address<br>, 기가 가지 본 기가  | a Park   |                                       |                   | U.S, EPA ID N         | lumber                                |  |        |
|                   | Facility's Phone: 1984 1995 1994 1995 1996 1996 1996 1996 1996  |  |                                       |                   | 1451                  | 4 - 8                                 | : 'A }   |        |
|                   | 9a. 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group (if any))   | er,  | 10, Contain<br>No,                    | ers<br>Type       | 11. Total<br>Quantity | 12. Unit<br>Wt./Vol.                  | 13. Codes                                      |        |
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|                   | 15. GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the contents of the marked and labeled/placarded, and are in all respects in proper condition for transport as   | his consignment are fully a  | nd accurately des                     |                   |                       | oping name, a                         | ind are classified, pack                       | (aged, |
|                   | Generator's/Offeror's Printed/Typed Name  | Signature  | EXY/                                  | ()(a)             | Mr. Yes               | /XEPC)                                | Month Day                                      |        |
| NIT               | 16. International Shipments Import to U.S.  Transporter signature (for exports only):   | Export from U.S.   | Port of enti<br>Date leavin           | y/exit:           |                       |                                       |  |        |
| TER               | 17. Transporter Acknowledgment of Receipt of Shipment Transporter 1 Printed/Typed Name  | Signature  |                                       |                   | <del></del>           | · · · · · · · · · · · · · · · · · · · | Month Day                                      | . Year |
| POR               | 197 Halle & C. V  | 17   | 4                                     |                   | , = 1                 |                                       | [84.5] P.                                      |        |
| TRANSPORTER       | Transporter 2 Printed/Typed Name  | Signature  |                                       |                   |                       |                                       | Month Day                                      | Year   |
| †                 | 18. Discrepancy   |  |                                       |                   |                       |                                       | and the second                                 |        |
|                   | 18a. Discrepancy Indication Space Quantity Type   |  | Residue                               |                   | Partial Rejec         | ction                                 | Full Rej                                       | ection |
|                   |   | Sh   | ipping Document                       | Tracking Num      |                       | ·                                     |  |        |
| SIGNATED FACILITY | 18b. Alternate Facility (or Generator)  | _ · · · · · ·  | -                                     |                   | U.S. EPA ID N         | umber                                 |  |        |
| DFA               | Facility's Phone:<br>18c. Signature of Alternate Facility (or Generator)  |  |                                       |                   | 1                     |                                       | Manth Do                                       | y Year |
| VATE              | 1995 Addition of Virginians Leading for Generalist  |  |                                       |                   |                       |                                       | Month Da                                       | , raai |
| SIG               | 19. Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)   |  |                                       |                   |                       |                                       |  |        |
|                   | 2.  | 3.   | 1                                     |                   | 4.<br>                |                                       |  | ٠      |
| 1 7               | 20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted   |  | · · · · · · · · · · · · · · · · · · · |                   |                       |                                       |  | Vana   |
|                   | Printed/Typed Name  | Signature  |                                       |                   |                       |                                       | Month Day                                      | Year   |



| +                 | SHIPPIN                        | G 1. G   | enerator ID Number                       |   | 2. Page 1 of 3. Er       | nergency Respons         | e Phone                               |  | Document   | Tracking Numb     | ber                             | . **s                                   |
|-------------------|--------------------------------|--|--|---|--------------------------|--------------------------|---------------------------------------|--|--|-------------------|---------------------------------|---|
|                   | DOCUME                         |  | 1 1 13 13 13 15 -3 3                     | 1 3 3 5   |                          | ator's Site Address      |                                       | Z mailing address  |  | 1934.             | 3/1                             | <u> </u>                                |
| 11                | 5. Generator                   | s Name and Mailing Ad  | CHAMAC A                                 | CNS A NEW   | +24 <sub>0</sub>         | ator's Site Address      | ing<br>Tanggaranggan                  | *  | is)  |                   |                                 |   |
|                   | Generator's                    | Phone: 41 t 12 4.1   | 7.99 (2016年)<br>2.31 - 2.51 (2018年)      |   | 25/3                     | (4) Miletjari            | Congress of the                       |  |  |                   |                                 | *************************************** |
|                   | 1                              | r 1 Company Name   |  |   |                          |                          |                                       | U.S. EPAID N   |  |                   |                                 | 5 r                                     |
|                   | 7. Transporte                  | r 2 Company Name   | ₹1                                       |   |                          |                          |                                       | U.S. EPA ID N  | fumber   | 7 7               | . , 1                           |   |
|                   |                                |  |  |   |                          |                          |                                       |  |  |                   |                                 |   |
|                   | 8. Designate                   | d Facility Name and Site   | Address<br>VALATALES 1<br>AMS ROLE X ROL | 2512年登入後ではから8<br>9 章  | tui.                     |                          |                                       | U.S. EPA ID N  | lumber<br>,  |                   |                                 |   |
|                   | Facility's Pho                 | ne: <u>13 8 125 1</u> 3  | 4.88 <b>2</b> 008 (4.88                  | 10444   |                          |                          |                                       | A 45 A   | 6 .<br>1   | 14 - 1            | £ '/                            | <i>i</i> : .                            |
|                   | 9a. 9b. U<br>HM and            | J.S. DOT Description (in<br>Packing Group (if any))  | cluding Proper Shipping Nam              | e, Hazard Class, ID Number,   |                          | 10. Conta<br>No.         | iners<br>Type                         | 11. Total<br>Quantity  | 12. Unit<br>Wt./Vol.   | 13. Co            | odes                            |   |
| GENERATOR -       | 1                              | Corp (1903, Agi)   | A CARACTER LA L                          |   |                          | ì                        | 11 "                                  | 21370  | portion of the control of the contro | , gir (Allige     |                                 |   |
| - GENE            | 2.                             | and the second s |  |   |                          |                          |                                       | *  |  | :                 |                                 |   |
|                   | 3.                             |  |  |   |                          |                          |                                       |  |  |                   | :                               |   |
|                   | 4.                             |  |  |   |                          |                          |                                       |  |  |                   |                                 |   |
|                   | 15. GENER                      | FREAL SIZE A CH  | ERTIFICATION: I hereby do                | eclare that the contents of this<br>ber condition for transport acc | s consignment are fully  | and accurately de        |                                       |  | oping name   | , and are classi  | ifie <b>d</b> , pa <b>c</b> kaį | ge <b>d</b> ,                           |
|                   | ļ                              | ifferor's Printed/Typed N  |  |   | Signature                | 4.00                     | 11/                                   | No. of Team  |  |                   |                                 | Year                                    |
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| Z                 |                                | ignature (for exports on   | import to U.S.                           | L_  | Export from U.S.         | Port of en<br>Date leavi |                                       |  |  |                   |                                 |   |
|                   | 17. Transporte                 | er Acknowledgment of R   | <del>///</del>                           |   | χ, ,                     |                          | <u> </u>                              |  |  |                   |                                 |   |
| ČR.               | Transporter 1                  | Printed/Typed Name   | S. S. S. S.                              | ,   | Signature                | - <b>- )</b>             | - <sup>5</sup> ,                      | Separation of the separation o |  | Month<br>L~∵. ∵   | Day"                            | Year                                    |
| TRANSPORTER       |                                | Printed/Typed Name   |  | * <u>, , , , , , , , , , , , , , , , , , ,</u>                      | Signature                |                          | · · · · · · · · · · · · · · · · · · · | <u> </u>   |  | l':<br>Month<br>I | Day                             | Year                                    |
| <u> </u>          | 18. Discrepan                  | су   |  |   |                          |                          |                                       | ···  |  |                   |                                 | <u> </u>                                |
|                   | 18a. Discrepa                  | ncy Indication Space   | Quantity                                 | Туре  |                          | Residue                  |                                       | Partial Reje   | ction  |                   | ] Full Rejec                    | ction                                   |
| 1                 |                                |  |  |   |                          | Shipping Documen         | t Tracking Nu                         |  |  |                   |                                 |   |
| SIGNATED FACILITY | 18b. Alternate                 | Facility (or Generator)  |  |   |                          |                          |                                       | U.S. EPA ID N  | umber  |                   |                                 |   |
| DF                | Facility's Pho                 | ne:<br>e of Alternate Facility (or   | Generator)                               |   |                          |                          |                                       |  | ·  | Month             | h Day                           | Year                                    |
| Ā                 | 100. Olgizatori                | our atomotor dointy (or  | <i>Constant</i>                          |   |                          |                          |                                       |  |  |                   |                                 | 1                                       |
| Sign              | 19. Report Ma                  | nagement Method Cod  | es (i.e., codes for treatment,           | disposal, and recycling syster                                      |                          |                          |                                       |  |  |                   |                                 |   |
| ĺ                 | `1.<br>                        |  | 2.                                       |   | 3.                       |                          |                                       | 4.   |  |                   |                                 |   |
|                   | 20. Designate<br>Printed/Typed |  | rator: Certification of receipt          | of shipment except as noted i                                       | in Item 18a<br>Signature |                          |                                       |  |  | Month             | n Day                           | Year                                    |
|                   | , inteurtyped                  | TOTAL  |  |   | oignatule                |                          |                                       |  |  | IMPLIA:           | 1                               | 1                                       |

|                     | Ген           | IPPING                       | 1. Generator ID Number               |   | 2. Page 1 of     | 3. Emergency Re  | sponse                                | Phone          | 4. Shipping                           |                       | Tracking Numb                           |  |             |
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|                     | 4             | CUMENT                       |                                      | · .4 ·  | ŧ                | Part of the  | * 3.4                                 |                | <b>1</b> Z                            | <b>Z</b> 0            | 19312                                   |  | 7           |
|                     | 5. Ge         | nerator's Name and Maili     | ng Address                           |   | <u> </u>         | Generator's Site A   |                                       |                | an mailing addres                     |                       |   |  |             |
| ş                   | :             |                              | 与艾尔曼(成一)。<br>(高爾子數學學                 | (원교회) 전 1년<br>- 1일 전 1년 1년 1년 1년 1일 |                  |  |                                       | id pilota<br>P |                                       |                       |   |  |             |
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| $\prod$             | Gene<br>6 fra | rator's Phone:               |                                      | - 1   | i                |  | · · · · · · · · · · · · · · · · · · · |                | U.S. EPA ID N                         | lumher                |   | ********                               |             |
|                     | 1             |                              |                                      |   |                  |  |                                       |                |                                       |                       | 4 4                                     |  | 1 .         |
|                     | 7. Tra        | nsporter 2 Company Nam       | ne                                   |   | <i></i>          |  |                                       |                | U.S. EPA ID N                         | fumber                |   | ·······                                |             |
|                     | Į             |                              |                                      |   |                  |  |                                       |                |                                       |                       |   |  |             |
|                     | 8. De         | signated Facility Name ar    | d Site Address                       | a Mariana<br>Angeriana  | Ţ.1.             |  |                                       |                | U.S. EPA ID N                         | lumber                |   |  |             |
|                     | Facilit       | ty's Phone: 😘 🔆              | 188 G. C.                            | n ( j. 1944)  |                  |  |                                       |                | \$ 12 S                               | Ъ.                    | n v                                     |  | 1 2         |
|                     | 9a.<br>HM     | <u> </u>                     | on (including Proper Shipping Nam    | e, Hazard Class, ID Number,   |                  | 10.  | Contain                               | ers<br>Type    | 11. Fotal<br>Quantity                 | 12, Unit<br>.Wt./Vol. | 13. Co                                  | les                                    |             |
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| <br>5               | <u> </u>      | ^                            |                                      |   | <u> </u>         |  |                                       |                | $M/m_0$                               |                       |   |  |             |
| GENERATOR           |               | 2.                           |                                      |   |                  |  |                                       |                |                                       |                       | <u> </u>                                | :                                      |             |
| Ī                   |               | <u> </u>                     |                                      |   |                  |  | 1                                     |                |                                       |                       |   |  |             |
|                     |               | 3.                           |                                      |   |                  |  |                                       |                | · · · · · · · · · · · · · · · · · · · |                       |   | :                                      |             |
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| H                   | <u> </u>      |                              |                                      | · · · · · · · · · · · · · · · · · · ·                                   | <u></u>          |  |                                       |                |                                       |                       |   |  |             |
|                     |               | <b>]</b> 4.                  |                                      |   |                  |  |                                       |                |                                       |                       |   |  |             |
|                     |               |                              |                                      |   |                  |  | Ì                                     |                |                                       |                       |   |  |             |
|                     | 14. Sp        | pecial Handling Instruction  | s and Additional Information 💎 👍     | Magnitude of the Magni  | thir Hilb        | eratif, AdMiss   | 11. 127                               | 1 444.5        | Description of a                      | 15(18-11)             | :P1                                     |  |             |
|                     |               | TERRIER OF MOT               | - 36923                              | . }   |                  |  |                                       |                |                                       |                       |   |  |             |
|                     | 1             |                              |                                      |   |                  | * 3 . * /  |                                       |                |                                       |                       |   |  |             |
|                     | ·             |                              | R S CERTIFICATION: I hereby de       |   |                  | ارميه ويرم مرمسته مستحدث الترويج   | tely desc                             | ribed above    | by the proper shi                     | pping name            | , and are classifi                      | ed, packa                              | ged,        |
|                     | n             | narked and labeled/placar    | ded, and are in all respects in prop | er condition for transport acco   | ording to applie | able international a   | nd natio                              | nal governm    | ental regulations.                    |                       |   |  |             |
|                     |               |                              |                                      |   | , e - 2 - 10 c   |  | <br>                                  |                | · · · · · · · · · · · · · · · · · · · | ·                     | <u> </u>                                |  | ··········· |
|                     |               | ator's/Offeror's Printed/Typ | •                                    |   | Sigi<br>ir∵ (    | nalure   | 1                                     |                |                                       |                       | Month                                   | ∪ay                                    | Year        |
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| Ä                   |               | orter 1 Printed/Typed Nan    | •                                    |   | Sigr             | nature   |                                       |                |                                       |                       | Month                                   | Day                                    | Year        |
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| _                   | 18. Dis       | screpancy                    |                                      |   | I                | ., <del></del>   |                                       |                |                                       | ····                  | 1                                       | 1                                      |             |
|                     | <b> </b>      | iscrepancy Indication Spa    | ce Quantity                          | Туре  |                  | Residu   | e                                     |                | Partial Reje                          | ction                 |   | Full Rejec                             | ction       |
|                     |               |                              | ,                                    |   |                  |  |                                       |                |                                       |                       |   | ,-                                     |             |
| <u>-</u>            | 18b. Ai       | Itemate Facility (or Genera  | ater)                                |   |                  | Shipping Do  | curnent                               | Tracking Nu    | nber:<br>U.S. EPA ID N                | umber                 |   | ~~************************************ |             |
|                     | 100.11.       |                              | ··-·,                                |   |                  |  |                                       |                |                                       |                       |   |  |             |
| FΑ                  | Facility      | 's Phone:                    |                                      |   |                  |  |                                       |                | 1                                     |                       |   |  |             |
| Œ                   |               | ignature of Alternate Facili | ty (or Generator)                    |   |                  | The state of the s |                                       |                |                                       |                       | Month                                   | Day                                    | Year        |
| SNA                 |               |                              |                                      |   |                  |  | -                                     |                |                                       |                       |   | <u></u>                                |             |
| PESIGNATED FACILITY | 19. Re        | port Management Method       | Codes (i.e., codes for treatment, d  | sposal, and recycling system  | ns)<br>  13.     |  |                                       |                | 4.                                    | ··········            |   |  |             |
| €.                  |               |                              | <u>.</u>                             |   | ]3.              |  |                                       |                | 7.                                    |                       |   |  |             |
|                     | 20. Des       | signated Facility Owner or   | Operator: Certification of receipt o | f shipment except as noted in   | Item 18a         |  |                                       | ······         | L                                     |                       | *************************************** |  |             |
|                     |               | /Typed Name                  |                                      |   |                  | nature   |                                       |                |                                       | ·····                 | Month                                   | Day                                    | Year        |
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| 1                 | SHIPPING<br>DOCUMENT   | 1. Generator ID Number  | 2, Page 1 of                   | 3. Emergency Response                   | Phone                | 4. Shipping  |                        | Tracking Number                       | 113  |  |  |
|-------------------|--|---|--------------------------------|---|----------------------|--|------------------------|---------------------------------------|--|--|--|
|                   | 5. Generator's Name and Maili                                |   |                                | Generator's Site Address                | (if different tha    | an mailing addres  |                        | 1                                     |  |  |  |
| .                 |  | 5 \$50 (MAN) (1962) (2006) (4<br>5 ) (100 MA) (2017) (175 (MA) (2017)<br>1763 (24 ) (1863 (MA) (2017)         | 200                            | 1、1865年12、第二年<br>《文文》第二年中國的第二年<br>《四四年》 | 14                   |  |                        |                                       |  |  |  |
|                   | Generator's Phone: (3): (4)  6. Transporter 1 Company Nan    | ne variable (1967) och 1890, sign etter<br>Ne   | <u> </u>                       | AND FREE STEEL                          | 1000                 | U.S. EPA JD N  | lumber                 | · · · · · · · · · · · · · · · · · · · |  |  |  |
|                   | the price of the energy                                      |   | ,                              |   |                      |  |                        | 9 9 4 3                               | ş «  |  |  |
|                   | 7 Transporter 2 Company Nan                                  |   |                                |   |                      | U.S. EPA ID N  |                        |                                       |  |  |  |
|                   |  |   |                                |   |                      |  |                        |                                       |  |  |  |
|                   | 8. Designated Facility Name ar                               | nd Site Address<br>কিন্তু কৰি কিন্তু কৰি কিন্তু কৰিছে কৰিছে কিন্তু<br>কিন্তু কিন্তু কৈ কিন্তু কৰি কৰিছে কৰিছে | A LANGARIA                     |   |                      | U.S. EPA ID N  | lumber                 |                                       |  |  |  |
| Ш                 | Facility's Phone: 193 115                                    | · · · · · · · · · · · · · · · · · · ·   |                                |   |                      |  | νψ.                    | 4 j                                   | 1 7 5  |  |  |
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| ATOR -            | 1. ((M*1QU))   | es out sa metura.   |                                | >                                       | ija e                | 2000   | , 1-4<br>              | 8 1 1                                 |  |  |  |
| GENERATOR         | 2.   |   |                                |   |                      | #.13 <u>16.2</u>   |                        |                                       |  |  |  |
| 1                 |  |   |                                | j                                       |                      |  |                        | :                                     | ÷  |  |  |
|                   | 3.   |   |                                |   |                      |  |                        |                                       |  |  |  |
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|                   |  |   |                                |   |                      | :  |                        |                                       |  |  |  |
|                   | 15. GENERATOR S/OFFERO                                       | OR S CERTIFICATION: I hereby declare that the rided, and are in all respects in proper condition for          | contents of this consignment a | re fully and accurately des             |                      |  | oping name,            | and are classified, p                 | ackaged,   |  |  |
|                   | Generator's/Offeror's Printed/Ty                             | ned Name  | Siar                           | nature.                                 | F *                  | 1  | 25 <u>,</u> 154 f      | Month                                 | Day Year   |  |  |
|                   | THE ENTRY WAS LEADING  | ,   |                                |   | 1 / 6457             |  | n Sulveni<br>De Leding | 2101                                  | 2)   14.   |  |  |
| TRANSPORTER INT'L | 16, International Shipments Transporter signature (for expor | Import to U.S.  | Export from U                  |   | ry/exit:             |  |                        |                                       |  |  |  |
| 吊                 | 17. Transporter Acknowledgmen                                | · · · · · · · · · · · · · · · · · · ·   |                                |   |                      |  |                        |                                       |  |  |  |
| ORT               | Transporter 1 Printed/Typed Nar                              | me  | Sign<br>#                      | ature                                   |                      |  |                        | Month [                               | Day Year<br>> 3 I s  |  |  |
| SSP               | Transporter 2 Printed/Typed Na                               | me  |                                | nature                                  | ethological con-     | 5. m = V m   |                        | Month E                               | Day Year   |  |  |
| 图                 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                      |   | 1                              |   |                      |  |                        | 1 1                                   | 1  |  |  |
| <u>.</u>          | 18. Discrepancy  |   |                                |   |                      |  |                        |                                       |  |  |  |
|                   | 18a, Discrepancy Indication Spa                              | ace Quantity  | Туре                           | Residue                                 |                      | Partial Reje   | ction                  | Eull f                                | Rejection  |  |  |
| 1                 |  |   |                                | Shipping Document                       | Tracking Num         |  |                        |                                       |  |  |  |
|                   | 18b. Alternate Facility (or General                          | ator)   |                                |   |                      | U.S. EPA ID N  | ımber                  |                                       |  |  |  |
| ACII              |  |   |                                |   |                      | 1  |                        |                                       |  |  |  |
| 유                 | Facility's Phone:<br>18c. Signature of Alternate Facil       | lity (or Generator)   |                                |   |                      | 1  |                        | Month                                 | Day Yoar   |  |  |
| SIGNATED FACILITY |  | ·   |                                |   |                      |  |                        |                                       |  |  |  |
| SiG               | 19. Report Management Method                                 | d Codes (i.e., codes for treatment, disposal, and i   | ·                              |   |                      | 1,   |                        |                                       |  |  |  |
|                   |  | Z   | 3.                             | \$                                      |                      | 4.   |                        |                                       | The state of the s |  |  |
|                   |  | r Operator: Certification of receipt of shipment ex   |                                | atro                                    |                      | This is a second of the second |                        | Month C                               | Jay V  |  |  |
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| Γ.              | T cu    | HIPPING   | 1. Generator ID Number  | 2. Page 1 of            | 3. Emergency Response Phone  | 4. Shipping Doc           | cument Tracking Number                |  |  |  |  |
|-----------------|---------|---|---|-------------------------|--|---------------------------|---------------------------------------|--|--|--|--|
| 11              | ,       | OCUMENT   |   |                         | 301 - A 18 1 3 3000  | 77                        | 00318719                              |  |  |  |  |
|                 |         | Senerator's Name and Mailir                                 |   | L                       | Generator's Site Address (if differe   | nt than mailing address)  |                                       |  |  |  |  |
|                 |         |   | · · · · · · · · · · · · · · · · · · ·   |                         | VENERAL BULL TEN   | 1.                        |                                       |  |  |  |  |
| 1               | !       |   | (2) (N. A. G. M. J. C. C. C. W.   | Ţ.                      | · 图 34.高级技术等 4.4%  |                           |                                       |  |  |  |  |
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| Ш               | Gen     | nerator's Phone:<br>ransporter 1 Company Nam                | 3P  |                         | <u> </u>   | U.S. EPA ID Num           | her                                   |  |  |  |  |
|                 | 1       |   |   |                         |  |                           |                                       |  |  |  |  |
| П               | 1       | ransporter 2 Company Nam                                    |   | ·····                   |  |                           | U.S. EPA ID Number                    |  |  |  |  |
|                 | ] (. 11 | ransporter z Company Nan                                    | 10  |                         |  | U.S. EFAID NUM            | Jei                                   |  |  |  |  |
| 11              |         |   |   |                         |  |                           |                                       |  |  |  |  |
|                 | 8. D    | Designated Facility Name an                                 | d Site Address  | (N) will                |  | U.S. EPA ID Numl          | oer                                   |  |  |  |  |
|                 |         |   | A ROLL OF SALES   |                         |  |                           |                                       |  |  |  |  |
|                 |         |   | Grand Control   |                         |  | • •                       |                                       |  |  |  |  |
|                 | Faci    | ility's Phone:  | 4 7 3   |                         |  | , in the second second    | •                                     |  |  |  |  |
|                 | 9a.     |   | on (including Proper Shipping Name, Hazard Class  | , ID Number,            | 10. Containers   |                           | 2. Unit 13. Codes                     |  |  |  |  |
|                 | нм      |   |   |                         | <b>N</b> o. Турв   | Quantity W                | /t,/Vol.                              |  |  |  |  |
| 12              |         | The American Control of                                     | (A) 2000年 (B)   |                         |  | T                         | Wall of the S                         |  |  |  |  |
| 먑               | l       | İ   |   |                         | 1 , *  | - A-11                    |                                       |  |  |  |  |
| 15              | L       |   |   |                         |  | 440                       |                                       |  |  |  |  |
| GENERATOR       |         | 2.  |   |                         |  |                           |                                       |  |  |  |  |
| 9               |         | •   |   |                         |  |                           | i                                     |  |  |  |  |
|                 |         |   |   |                         |  |                           |                                       |  |  |  |  |
|                 |         | 3.  |   |                         |  |                           |                                       |  |  |  |  |
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|                 |         | 14.   |   |                         |  |                           |                                       |  |  |  |  |
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|                 | Ĺ,,,    | <u></u>   |   |                         |  |                           |                                       |  |  |  |  |
|                 | 19. 3   |   | s and Additional Information । কিন্তু পুরুষ্ট প্র   | 2324 M. 27 M. 28        | AND COMPTENDED OF  | nik mentil metaktibish    |                                       |  |  |  |  |
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| П               | 15.     |   | rded, and are in all respects in proper condition for   | · ·                     | •  |                           | g hame, and are classified, packaged, |  |  |  |  |
|                 |         | ·   | , , ,   |                         | -  |                           |                                       |  |  |  |  |
|                 | Conc    | erator's/Offeror's Printed/Ty                               | ned Name  | - Sin                   | inature // //  |                           | Month Day Year                        |  |  |  |  |
|                 | l .     | erator st-Orienters ( Anticarty)                            |   | ( , 🕽                   | CHELLAND   |                           | REWRIE                                |  |  |  |  |
| *               |         | nternational Shipments                                      | f   | 7/0                     | MODE DISTRICT  |                           |                                       |  |  |  |  |
| INT             | •       |   | Import to U.S.  | Export from U           |  |                           |                                       |  |  |  |  |
| Ę               |         | nsporter signature (for expor<br>Fransporter Acknowledgment |   |                         | Date leaving U.S.:   |                           |                                       |  |  |  |  |
| H               |         | sporter 1-Printed/Typed Nar                                 |   | Sig                     | inature  |                           | Month Day Year                        |  |  |  |  |
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| Ş               | Trans   | sporter 2 Printed/Typed Nar                                 |   | I<br>Síg                | mature   |                           | Month Day Year                        |  |  |  |  |
| TRANSPORTER     |         |   |   | 1                       |  |                           |                                       |  |  |  |  |
|                 | 18 [    | Discrepancy   |   |                         |  |                           |                                       |  |  |  |  |
| 1               |         | Discrepancy Indication Spa                                  | re  | 7                       |  |                           |                                       |  |  |  |  |
|                 | 100.    | Discrepancy indication ope                                  | Quantity  | Туре                    | Residue  | Partial Rejection         | n Full Rejection                      |  |  |  |  |
|                 |         |   |   |                         | Shipping Document Tracking   | Number                    | •                                     |  |  |  |  |
| . 1             | 18b.    | Alternate Facility (or Genera                               | ator)   |                         | опірріну слосителі таскіну   | U.S. EPA ID Numb          | ier                                   |  |  |  |  |
| <u>'</u>        |         |   |   |                         |  |                           | ļ                                     |  |  |  |  |
| ă               | Engil   | litula Dhana:   |   |                         |  | }                         |                                       |  |  |  |  |
| 0               |         | lity's Phone:<br>Signature of Alternate Facili              | ity (or Generator)  |                         |  | <u></u>                   | Month Day Year                        |  |  |  |  |
| GNATED FACILITY |         |   |   |                         |  |                           |                                       |  |  |  |  |
| 8               | 19 F    | Recort Management Method                                    | Codes (i.e., codes for treatment, disposal, and rec   | cycling systems)        |  |                           |                                       |  |  |  |  |
| ,               | 1.      |   | 2.  | 3.                      | **************************************   | 4.                        |                                       |  |  |  |  |
| ] , [           |         |   |   |                         |  |                           |                                       |  |  |  |  |
|                 | 20. D   | Designated Facility Owner or                                | r Operator: Certification of receipt of shipment exce   | pt as noted in Item 18a |  |                           | 100                                   |  |  |  |  |
|                 |         | ed/Typed Name   |   |                         | gnature  |                           | Month Day Year                        |  |  |  |  |
|                 |         | •   |   | 1                       |  |                           | ***                                   |  |  |  |  |



| <b>1</b>        | SHIPPING<br>DOCUMENT   | 1. Generator ID Number   |  | 3, Emergency Response Phone                  | 4. Shipping Document Track            | sing Number               |  |  |  |  |
|-----------------|--|--|--|--|---------------------------------------|---------------------------|--|--|--|--|
| jl              | 5. Generator's Name and  | Mailing Address  | ······································       | Generator's Site Address (if different th    | an mailing address)                   |                           |  |  |  |  |
|                 |  | (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)  |  | CONTRACTOR OF THE CO.                        |                                       |                           |  |  |  |  |
| $\prod$         | Generator's Phone: 🥪 🦠   | and the second s |  | "作品的好不够的"。 医二十岁 经交                           |                                       |                           |  |  |  |  |
|                 | 6, Transporter 1 Company   | •  |  |  | U.S. EPA ID Number                    |                           |  |  |  |  |
|                 | 7, Transporter 2 Compan  |  |  |  | U.S. EPA ID Number                    |                           |  |  |  |  |
|                 | 7, Hansporter 2 Compar   | y (vane  |  |  |                                       |                           |  |  |  |  |
|                 | 8. Designated Facility Na  | me and Site Address  |  |  | U.S. EPA ID Number                    |                           |  |  |  |  |
|                 | -  | が続ける。これ <b>の時代には</b><br>Seary Transit at Seary 1   | (教育·統治)(新一品為 <b>%</b> (於2 <sup>19</sup> 公))。 |  |                                       |                           |  |  |  |  |
|                 | Facility's Phone:  | Florida States   | , **   |  | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |                           |  |  |  |  |
|                 | <u> </u>   | scription (including Proper Shipping Name, Ha  | zard Class, ID Number,                       | 10. Containers<br>No. Type                   | 11. Total 12. Unit Quantity Wt./Vol.  | 13. Codes                 |  |  |  |  |
|                 | 1.   |  |  | Tight 1)pc                                   | CITUATE                               | : <i>I</i> 1              |  |  |  |  |
| GENERATOR       | A 3520 10 17 1   | eransa nekarakan   |  |  |                                       |                           |  |  |  |  |
| ER              |  |  |  |  | 23.410                                |                           |  |  |  |  |
| E               | 2.   |  |  |  |                                       |                           |  |  |  |  |
| 1               |  |  |  |  |                                       |                           |  |  |  |  |
|                 | 3.   |  |  |  |                                       |                           |  |  |  |  |
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|                 | }  |  |  |  |                                       |                           |  |  |  |  |
|                 | 4.   | the contract of the second   |  |  |                                       |                           |  |  |  |  |
|                 |  |  |  |  |                                       | •                         |  |  |  |  |
|                 |  | ructions and Additional Information ( ) Fig. (6)   |  |  |                                       |                           |  |  |  |  |
|                 | 15. GENERATOR S/OF   | FEROR S CERTIFICATION: Thereby declare placarded, and are in all respects in proper con  | that the contents of this consignment at     | re fully and accurately described above      |                                       | are classified, packaged, |  |  |  |  |
|                 | Generator's/Offeror's Prin   | ••   | Sign   | ature (C)                                    | NE AGENT                              | Month Day Year            |  |  |  |  |
| +               | 16. International Shipmen  | service the service of the service o |  |  | MC) END CE                            |                           |  |  |  |  |
| F               |  | lmport to U.S.   | Export from U.                               | S. Port of entry/exit:<br>Date leaving U.S.: |                                       |                           |  |  |  |  |
| OK.             | Transporter signature (for<br>17. Transporter Acknowled  | Igment of Receipt of Shipment  |  | Date reaving 0.5                             |                                       |                           |  |  |  |  |
| TRANSPORTER     | Transporter 1 Printed/Type   | ed Name  | Signa  | ature  |                                       | Month Day Year            |  |  |  |  |
| SPC             | 11000  | and the second second  | <b>*</b> *********************************** |  | of Car                                |                           |  |  |  |  |
| Z.              | Transporter 2 Printed/Typ  | ed Name <sub>g</sub> .   | Sign:  | ature  |                                       | Month Day Year            |  |  |  |  |
| E               |  |  |  |  |                                       |                           |  |  |  |  |
| 1               | 18. Discrepancy 18a. Discrepancy Indication  | on Space O   |  | Residue                                      | Partial Rejection                     | Full Rejection            |  |  |  |  |
|                 |  | □ Quantity   | <u></u> Туре                                 |  | ·                                     | Full Rejection            |  |  |  |  |
| _               | 18b. Alternate Facility (or  | Generator)   |  | Shipping Document Tracking Nun               | nber:<br>U.S. EPA ID Number           |                           |  |  |  |  |
| GNATED FACILITY | The state of the s | ,  |  |  |                                       |                           |  |  |  |  |
| Ā               | Facility's Phone:  |  |  |  |                                       |                           |  |  |  |  |
| 臣               | 18c. Signature of Alternate  | Facility (or Generator)  |  | ***************************************      |                                       | Month Day Year            |  |  |  |  |
| Ä               |  |  |  |  |                                       |                           |  |  |  |  |
| اپن             | 19. Report Management N  | Method Codes (i.e., codes for treatment, dispos  |  |  |                                       |                           |  |  |  |  |
|                 | 1.   | 2.   | 3.   |  | 4.                                    |                           |  |  |  |  |
|                 | 20. Designated Facility O  | yner or Operator: Certification of receipt of ship   | ment except as noted in Item 18a             |  |                                       |                           |  |  |  |  |
|                 | Printed/Typed Name   | men an experience. Commission of receipt of Ship   | Signal                                       | ature  |                                       | Month Day Year            |  |  |  |  |
|                 |  |  |  |  |                                       | 1 1 1                     |  |  |  |  |



| T+          | SHIPPING 1. Generator ID Number  | 2. Page 1 of 3. Eme         |                               | Phone 4.            |  | ent Tracking Number    |                | ٠,                                     |
|-------------|--|-----------------------------|-------------------------------|---------------------|--|------------------------|----------------|--|
|             | DOCUMENT   |                             | ik a resigna)                 |                     |  | 00313                  | 10.            | d .                                    |
| ,           | 5. Generator's Name and Mailing Address  | e in in                     | ors one Adoless in            | different than mail | ing address)                           |                        |                |  |
|             | Generator's Phone:   | 1 1 170                     | Kiroka konsensi               | +#1 +\$;            |  |                        |                |  |
|             | 6. Transporter 1 Company Name  |                             |                               | U.S                 | . EPA ID Number                        |                        |                | ····                                   |
|             | n was ing single region.   |                             |                               |                     |  |                        | ·              | ,                                      |
|             | 7. Transporter 2 Company Name  |                             |                               | U.S                 | . EPA ID Number                        |                        |                |  |
|             | 8. Designated Facility Name and Site Address ্ত্ৰাৰ স্থান কৰিব কৰিব কৰিব কৰিব কৰিব কৰিব কৰিব কৰিব  | ार हे के <sub>हु</sub> ै    |                               | U.S                 | . EPA ID Number                        |                        |                |  |
|             | Facility's Phone: 100 model 100 mode |                             |                               |                     | 2                                      | 50 gr                  |                |  |
|             | 9a. 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group (if any))  | r,                          | 10. Containe<br>No.           |                     | Total 12. U                            | I IO. UIN              | les            | ······································ |
| GENERATOR   | 1. 260 (64 中 [63]) (4 ) (4 ) (4 ) (4 ) (4 ) (4 ) (4 ) (4   |                             |                               | 21                  | 150                                    | A                      |                |  |
| - GENE      | 2.   |                             |                               |                     |  |                        |                |  |
|             | 3.   |                             |                               |                     |  |                        |                |  |
|             | 4.   |                             |                               |                     |  |                        |                |  |
|             | D—94 64  15. GENERATOR S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of the marked and labeled/placarded, and are in all respects in proper condition for transport according to the contents of the marked and labeled placarded, and are in all respects in proper condition for transport according to the contents of the  | nis consignment are fully a | nd accurately desc            |                     |  | ame, and are classific | ed, packaged   | d,                                     |
|             | Generator's/Offeror's Printed/Typed Name<br>発力が発行する場合によってものできまった。  | Signature                   | 520                           | (MCHOX)             | S FAR                                  | Month                  | Day            | Year                                   |
| INT         | 16. International Shipments Import to U.S.  Transporter signature (for exports only):  | Export from U.S.            | Port of entry<br>Date leaving | /exit:              | - Care Care                            |                        |                |  |
| ER          | 17. Transporter Acknowledgment of Receipt of Shipment  | Signature                   |                               |                     |  | Month                  | Day            | Year                                   |
| S<br>R      | Transporter 1-Printed/Typed Name   | Jighatine                   |                               |                     |  | 1 / E                  | >              | ) Fall                                 |
| TRANSPORTER | Transporter 2 Printed/Typed Name   | Signature                   |                               |                     |  | Month                  | Day            | Year                                   |
| 1           | 18. Discrepancy  |                             |                               |                     | ······································ |                        |                |  |
|             | 18a. Discrepancy Indication Space Quantity Type  |                             | Residue                       | P                   | artial Rejection                       |                        | Full Rejection | on                                     |
|             |  | Sh                          | ipping Document T             |                     |  |                        |                |  |
| ZILTY       | 18b. Alternate Facility (or Generator)  Facility's Phone: 18c. Signature of Alternate Facility (or Generator)  19. Report Management Method Codes (i.e., codes for treatment, disposal, and recycling syste  |                             |                               | U.S.                | EPA ID Number                          |                        |                |  |
| FAC         | Facility's Phone:  |                             |                               |                     |  |                        |                |  |
| ATEL        | 18c. Signature of Alternate Facility (or Generator)  |                             |                               |                     |  | Month                  | Day            | Year                                   |
| 5           | 19. Report Management Method Codes (i.e., codes for treatment, disposal, and recycling syste   | ems)                        |                               |                     |  |                        |                |  |
| ۱,          | 2.   | 3.                          |                               |                     | 4.                                     |                        |                |  |
|             | 1<br>20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted   | in Item 18a                 |                               |                     |  |                        |                |  |
|             | Printed/Typed Name   | Signature                   | · - <del></del>               |                     |  | Month                  | Day            | Year                                   |



| 1                 | SHIPPING<br>DOCUMENT  | 1. Generator ID Number   | 1 *   | 3. Emergency Response Phone                | 4. Shipping Document Tra             | cking Number                               |  |  |
|-------------------|---|--|---|--|--------------------------------------|--|--|--|
|                   | 5. Generator's Name and Maili                                   | <ul><li>(特別的)の表別をおりません。</li><li>(対別的)の表別を表別を表別を表示。</li></ul>   | · · · · · · · · · · · · · · · · · · ·   | Generator's Site Address (if different the | nan mailing address)                 |  |  |  |
|                   |   | TI SEE GETTE STEEL SEE ON OF THE SEE OF THE  | Kol   | 多数型型器扩展 2.42 多重点 2000 FB F                 |                                      |  |  |  |
|                   | Generator's Phone: 6. Transporter 1 Company Nar                 | ne   | digaranga and an analysis and |  | U.S. EPA ID Number                   |  |  |  |
|                   | 7. Transporter 2 Company Nar                                    | ne   |   |  | U.S, EPA ID Number                   |  |  |  |
|                   |   |  |   |  |                                      |  |  |  |
|                   | 8. Designated Facility Name at                                  | nd Site Address  | THE HOLD AND SHOOT STATE OF THE SHOOT SHOUT SHOOT SHOUT SHOOT SHOUT SHOOT SHOOT SHOUT SHOOT SHOUT SHOOT SHOUT SHOOT SHOUT SHOOT SHOUT SHOUT SHOT SHOUT SHOT SHOUT |  | U.S. EPA ID Number                   |  |  |  |
|                   | Facility's Phone:   | "我一次,大人,我是能<br>第二  |   |  | 18000 800                            |  |  |  |
|                   |   | lon (including Proper Shipping Name, Hazar<br>any))  | d Class, ID Number,   | 10. Containers No. Type                    | 11. Total 12. Unit Quantity Wt./Vol. | 13. Codes                                  |  |  |
| GENERATOR -       | 1. No see a production of                                       | ont, parlinen  |   | 7 74 T                                     | 21,330                               |  |  |  |
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|                   | 3.  | one to the second of the Process of the Second of the Seco | Marine   |  |                                      |  |  |  |
|                   | 4.  |  |   |  |                                      |  |  |  |
|                   | 15. GENERATOR S/OFFERO  | A S CERTIFICATION: I hereby declare the rided, and are in all respects in proper condi-  | at the contents of this consignment   | are fully and accurately described above   | , , ,                                | d are classified, packaged,                |  |  |
|                   | Generator's/Offeror's Printed/Ty                                | rped Name<br>DANS THE STORY OF THE P   | Sign Sign Sign Sign Sign Sign Sign Sign   | nature.                                    | w Yar E                              | Month Day Year                             |  |  |
| INT'L             | 16. International Shipments Transporter signature (for expo     |  | ☐ Export from \   | J.S. Port of entry/exit:                   |                                      |  |  |  |
| <b>XTER</b>       | 17. Transporter Acknowledgmen<br>Transporter 1 Printed/Typed Na |  | Sigi  | nature /                                   |                                      | Month Day Year                             |  |  |
| SPO               |   |  | Cin   | nature                                     | A. S. Carlotte and Company           | <u>                                   </u> |  |  |
| TRANSPORTER       | Transporter 2 Printed/Typed Na                                  | me   | j j   | ng(me                                      |                                      | l l l                                      |  |  |
| 1                 | 18. Discrepancy   |  |   |  |                                      |  |  |  |
|                   | 18a. Discrepancy Indication Spa                                 | ace Quantity   | Туре  | Residue                                    | Partial Rejection                    | Full Rejection                             |  |  |
| \<br>\<br>\       | 40h av 5 1984 (a. C.  |  |   | Shipping Document Tracking Nur             |                                      |  |  |  |
| JIGNATED FACILITY | 18b. Alternate Facility (or Gener                               | awij   |   |  | U.S. EPAID Number                    |  |  |  |
| D FA              | Facility's Phone:<br>18c. Signature of Alternate Faci           | Rity (or Generator)  |   | **************************************     |                                      | Month Day Year                             |  |  |
| NATE              |   |  |   |  |                                      |  |  |  |
| 1                 | 19. Report Management Method 1.                                 | d Codes (i.e., codes for treatment, disposal,  | and recycling systems)  |  | T4.                                  |  |  |  |
|                   |   |  |   |  |                                      |  |  |  |
|                   | 20. Designated Facility Owner of<br>Printed/Typed Name          | or Operator: Certification of receipt of shipme  |   | nature                                     |                                      | Month Day Year                             |  |  |
| $\downarrow$      |   |  | 1   |  |                                      |  |  |  |



| Î                 | SHIPPING<br>DOCUMENT                                   | 1. Generator ID Number  |                                  | Emergency Response Phone                  | 4. Shipping Document Tra                | acking Number                |
|-------------------|--|---|----------------------------------|---|---|------------------------------|
| ] !<br>  .        | 5. Generator's Name and Maili                          | ng Address  |                                  | nerator's Site Address (if different that | n mailing address)                      |                              |
|                   | Congrator's Phonor                                     | 有 5.5 大   | 1 41                             | 医大大鼠类 医电影通知 网络特别                          |   |                              |
|                   | 6. Transporter 1 Company Nan                           | ne  |                                  |   | U.S. EPA ID Number                      |                              |
|                   | 7. Transporter 2 Company Nam                           | 7e  |                                  |   | U.S. EPA ID Number                      |                              |
|                   | T. Hamperton E Sampany Hair                            |   |                                  | 3   | ]                                       |                              |
|                   | 8. Designated Facility Name an                         | id Site Address: (1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  | 2.500 et 1                       |   | U.S. EPA ID Number                      |                              |
|                   |  | i kan di mananan di manan<br>Manggari Minga mengahanan  |                                  |   |   |                              |
|                   | Facility's Phone.                                      |   |                                  |   |   |                              |
|                   | 100.   | on (including Proper Shipping Name, Hazard Class, ID  | Number,                          | 10. Containers                            | 11. Total 12. Unit<br>Quantity Wt./Vol. | 13. Codes                    |
|                   | 1. 27 27 35 37 37                                      |   |                                  | No. Type                                  |   |                              |
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| GENERATOR         | 2.   |   |                                  |   | -1,300                                  |                              |
| · GEI             |  |   |                                  |   |   |                              |
|                   | 3.   |   |                                  |   |   |                              |
|                   | 3.   |   |                                  |   |   |                              |
|                   |  |   |                                  |   |   |                              |
|                   | 4.   |   |                                  |   |   |                              |
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|                   | •  | s and Additional Information , 19 18 19 19 19 19 19 19 19 19 19 19 19 19 19                                     | A PARTY SPECIAL STREET,          | <u>and the terminations</u>               | ent trails substitutely to the          |                              |
|                   | ser suggesterior                                       | D-7632  |                                  |   |   |                              |
|                   | Asia Maria da da                                       | ent his experience of the big   | anke for the                     | ug two                                    |   |                              |
|                   |  | R S CERTIFICATION: I hereby declare that the conte<br>ded, and are in all respects in proper condition for tran |                                  |   |   | nd are classified, packaged, |
|                   |  |   |                                  |   |   |                              |
|                   | Generator's/Offeror's Printed/Ty                       |   | -Signatu                         | BOOD/A Louis                              | JACK BLIT                               | Month Day Year               |
| 1                 | 16. International Shipments                            |   | <u>``</u>                        | TE JAMES (ARCHES                          | C)HREGE                                 |                              |
| N                 | Transporter signature (for expo                        | Ll Import to U.S.<br>rts only):   | Export from U.S.                 | Port of entry/exit:<br>Date leaving U.S.: |   |                              |
| ER                | 17. Transporter Acknowledgment                         | t of Receipt of Shipment  | Clanatu                          |   |   | Mostly Day Voor              |
| TRANSPORTER INT'L | Transporter 1 Printed/Typed Nar                        | 7   | Signatui                         |   | .9                                      | Month Day Year               |
| <b>KNS</b>        | Transporter 2 Printed/Typed Nar                        | mg-   | Signatu                          | id  |   | Month Day Year               |
|                   |  |   |                                  |   |   |                              |
| 1                 | 18. Discrepancy 18a. Discrepancy Indication Spa        |   |                                  |   |   |                              |
|                   | тра, різстерансу інцісаціон эра                        | Quantity  | Гуре                             | Residue                                   | Partial Rejection                       | Full Rejection               |
| <u> </u>          | 40h Aharat [- 28 / A                                   | - tool  |                                  | Shipping Document Tracking Num            |   |                              |
|                   | 18b. Alternate Facility (or Genera                     | ator)   |                                  |   | U.S. EPA ID Number                      |                              |
| F                 | Facility's Phone:                                      |   |                                  |   | 1                                       |                              |
| IGNATED FACILITY  | 18c. Signature of Alternate Facili                     | ty (or Generator)   |                                  |   |   | Month Day Year               |
| 중                 | 19. Report Management Method                           | Codes (i.e., codes for treatment, disposal, and recycl  | ng systems)                      |   |   |                              |
| - 1               | 2.   | 2.  | 3.                               |   | 4.                                      |                              |
| 1                 |  |   |                                  |   |   |                              |
|                   | 20. Designated Facility Owner or<br>Printed/Typed Name | r Operator: Certification of receipt of shipment except   | as noted in Item 18a<br>Signatur | Te  |   | Month Day Year               |
|                   |  |   |                                  |   |   |                              |



| 1                     | SH   | HIPPING 1. Generator ID Number   | 2. Page 1 of 3. Emerge   |  | one                        | 4. Shipping                               | Document 1  | racking Number   |
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|                       | 7. Tra   | ransporter 2 Company Name  |  |  |                            | U.S. EPA ID N                             | umber   |  |
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|                       | Facili   | ility's Phone:   |  |  |                            |   |   | ·  |
|                       | 9a.  | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number  |  | 10. Containers   |                            | 11. Total                                 | 12. Unit  |  |
|                       | HM   | and Packing Group (if any))  | ·  |  |                            | Quantity                                  | Wt./Vol.  | 13. Codes  |
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| <b> </b>          | SHIPPING  | Generator ID Number  |   | B. Emergency Response Phone              | 4. Shipping Document Tra             | cking Number                |  |  |  |
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|                   | DOCUMENT  | 37   |   |  | I ZZ U                               | 323784                      |  |  |  |
| 1 ]               | 5. Generator's Name and Maili                                     | ing Address  Septimize the second of the sec | G<br>Marie de la Carte  enerator's Site Address (if different i  | han mailing address)                 |                             |  |  |  |
|                   | Generator's Phone:  |  | . 1   | ners of the first more                   |                                      |                             |  |  |  |
| $\prod$           | 6. Transporter 1 Company Nan                                      | ne   |   |  | U.S. EPA ID Number                   |                             |  |  |  |
|                   | PARAMETER TWO   |  |   |  |                                      | , 0 - 8-h                   |  |  |  |
|                   | 7. Transporter 2 Company Nan                                      |  |   |  | U.S. EPA ID Number                   |                             |  |  |  |
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| 1                 |   | s and Additional Information ( ) 18 ( | William Committee Committee Committee Committee Committee Committee Committee Committee Committee Committee Co  | atmo, ami debmo e*                       | moses alones a surface of the        | 1.3                         |  |  |  |
| 11                | 1. 12.123 No. 4.000   | D-7624   |   |  |                                      |                             |  |  |  |
|                   | HAN PROBAL FROM   | d the entire control of the control of   | HILL WELL LOW THE   | 1 Salar                                  |                                      |                             |  |  |  |
|                   |   | R S CERTIFICATION: I hereby declare that the redd, and are in all respects in proper condition   |   |  |                                      | d are classified, packaged, |  |  |  |
|                   | marked and leadered place   | ded, and are in an respects in proper condition  | or transport according to applicable  | e internasional and majorial governm     | ientai reginations.                  |                             |  |  |  |
|                   | Generator's/Offeror's Printed/Ty                                  | ped Name   | Signat  | Me V \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | THE MEET T                           | · Month Day Year            |  |  |  |
|                   | ROBERT PAPALLY, O   | ACHEROL BEING HE   | · Ka  | THE TAKE                                 | DE THO ZE                            | 105123113                   |  |  |  |
| T'L               | 16. International Shipments                                       | Import to U.S.   | Export from U.S.  | Port of entry/exit:                      |                                      |                             |  |  |  |
| <u>≅</u>          | Transporter signature (for expor                                  | rts only):   |   | Date leaving U.S.:                       |                                      |                             |  |  |  |
| TER               | 17. Transporter Acknowledgment<br>Transporter 1 Printed/Typed Nar |  | Signate   | lre                                      |                                      | Month Day Year              |  |  |  |
| TRANSPORTER INT'L |   |  | 1   |  |                                      | WEID413                     |  |  |  |
| ANS               | Transporter 2 Printed/Typed Nar                                   | me   | Signafi   | Jre                                      |                                      | Month Day Year              |  |  |  |
| TR                |   |  | <u></u>   | ·  |                                      |                             |  |  |  |
| 1                 | 18. Discrepancy   |  |   |  |                                      |                             |  |  |  |
|                   | 18a. Discrepancy Indication Spa                                   | ce Quantity  | Type  | Residue                                  | Partial Rejection                    | Full Rejection              |  |  |  |
|                   |   |  |   | Shipping Document Tracking Nu            | mher:                                |                             |  |  |  |
| בׁן               | 18b. Alternate Facility (or Genera                                | ator)  |   |  | U.S. EPA ID Number                   |                             |  |  |  |
| Š                 |   |  |   |  | 1                                    |                             |  |  |  |
| D F,              | Facility's Phone;<br>18c. Signature of Alternate Facili           | hy (or Generator)  |   |  |                                      | Month Day Year              |  |  |  |
| ATE               | Too. Orginatoro or Allernate Fasin                                | ty (b) denotation  |   |  |                                      | l l l                       |  |  |  |
| JIGNATED FACILITY | 19. Report Management Method                                      | Codes (i.e., codes for treatment, disposal, and  | recycling systems)  | **************************************   |                                      |                             |  |  |  |
|                   | 1.  | 2.   | 3,  |  | 4.                                   |                             |  |  |  |
|                   | 00 0 1 15 0   | 0  |   |  |                                      |                             |  |  |  |
|                   | 20. Designated Facility Owner or<br>Printed/Typed Name            | r Operator: Certification of receipt of shipment e   | xcept as noted in Item 18a<br>Signati   | ire .                                    |                                      | Month Day Year              |  |  |  |
| $\downarrow$      | ** **   |  |   |  |                                      |                             |  |  |  |



| 1           |           | PPING<br>CUMENT  | 1. Generator<br>M.A.D | ID Number<br>9. 0 2 9 7 4                                      | 0 9 3   | 2. Page 1 of                        | (800)          | ency Response                       |                            | Z   | Z 0               | 0318785                        | 5            |
|-------------|-----------|--|-----------------------|--|---|-------------------------------------|----------------|-------------------------------------|----------------------------|---|-------------------|--------------------------------|--------------|
|             |           | nerator's Name and Mail                                |                       | CENERAL ELB<br>ATTN MATT C.<br>159 PLASTICS .<br>PITTSFIELD, M | ALACONE<br>AVE  | - 1                                 | 159 PL         | ASTICS AT                           | VE.                        | nan mailing pridres                       | E IN              | E [ V E ] ]                    |              |
| 11          | 6. Tra    | rator's Phone:<br>insporter 1 Company Na<br>E ETC 1140 |                       |  |   |                                     |                |                                     |                            | U.S. EP UL                                | umber             | 696994                         | 7            |
| 11          |           | nsporter 2 Company Na                                  | me                    |  |   |                                     |                |                                     |                            | U.S. EPA IBN                              | umbar             |                                | -            |
|             | 8 De      | signaled Facility Name a                               | and Site Address      | S/Drw 1A PW (1D  | PENTREE LANDS   | TI I                                |                |                                     |                            | U.S. EPA ID N                             | umber             |                                |              |
|             | 91,20     | angitation is something the same in                    |                       | 685 TOBY ROA   |   | 2200                                |                |                                     |                            |   |                   |                                |              |
|             | Facili    | ty's Phone: 814 26                                     | 5-1744                | KERSEY, PA. 1  | 5846  |                                     |                |                                     |                            | NOT                                       | F.                | E Q 7 7                        | 3            |
|             | 9a.<br>HM | 9b U.S. DOT Descrip<br>and Packing Group (i            | fany))                |  | Hazard Class, ID Number                                   | ,                                   |                | 10 Contail                          | ners<br>Type               | 11. Total<br>Quantity                     | 12 Unit<br>Wt.Not | 13 Codes                       |              |
| GENERATOR - |           | H. MON REGUL   | ATED MA               | TERIAL   |   |                                     |                |                                     | DI                         | 22 080                                    | К                 | NONE                           |              |
| - GENEF     |           | 2  |                       |  |   |                                     |                |                                     |                            |   |                   |                                |              |
|             |           | 3  |                       |  |   |                                     |                |                                     |                            |   |                   |                                |              |
|             | _         | 4.   |                       |  |   |                                     |                |                                     |                            |   |                   |                                |              |
|             |           |  |                       |  |   |                                     |                |                                     |                            |   |                   |                                |              |
|             |           | GENERATOR S/OFFER                                      | ROR S CERTIF          | ICATION: I hereby dec  | clare that the contents of the condition for transport as | nis consignment<br>coording to appl | t are fully an | d accurately de<br>national and nat | escribed abortional govern | ve by the proper sh<br>mental regulations | ipping dami       | e, and are classified, package | ed Year      |
| ļ           | RO        | BERT PAPALLO   | (AGENT F              | OR GEI   |   | 18                                  |                | tood                                | la                         | CADS F                                    | al c              | \$ 105123                      | 113          |
| INTL        |           | nternational Shipments<br>sporter signature (for ex    |                       | nport to U.S.  |   | Export from                         | U.S.           | Port of er<br>Date leav             |                            |   |                   |                                |              |
| RTER        |           | ransporter Acknowledgm<br>sporter 1 Printedal yped N   |                       | of Shipment  |   | Si                                  | ignature       | , _                                 |                            |   |                   | Month Day                      | Year         |
| TRANSPORTER |           | sporter 2 Printed/Typed I                              | W F                   | ELM  |   |                                     | ignature       | 1                                   |                            | -   |                   | IOSIZ3<br>Month Day            | 13<br>  Year |
| 上十          | 18. D     | Discrepancy  |                       |  |   |                                     |                |                                     |                            |   |                   |                                |              |
|             | 18a.      | Discrepancy Indication S                               | Space                 | Quantity   | Туре  |                                     |                | Residue                             | 14                         | Partial Rej                               | ection            | Full Reject                    | ion          |
| FACILITY    | 18b.      | Alternate Facility (or Ger                             | nerator)              |  |   |                                     | Shi            | pping Documer                       | nt Tracking N              | U.S. EPA ID 1                             | Vumber            |                                |              |
| IATED FA    |           | ity's Phone.<br>Signature of Alternate F.              | acility (or Gener     | rator)   |   |                                     |                |                                     |                            | 1   |                   | Month Day                      | Year         |
| DESIGNATED  | 4         | Report Management Met                                  | hod Codes (i.e.,      | codes for treatment, d   | isposal, and recycling syst                               | lems)                               |                | V                                   | 7 ,                        | 4,  |                   |                                |              |
|             |           | Designated Facility Owne<br>ed/Typed Name              | er or Operator; C     | Certification of receipt o                                     | f shipment except as noted                                |                                     | Signature      | 1                                   |                            | 1   | )4                | Month Day                      | Year         |
| +           |           |  |                       |  |   |                                     |                | -1                                  | /                          | 1   | 1                 |                                |              |



| SHIPPING<br>DOCUMENT  | 1. Generator ID Number   |  | of 3. Emergency Respon       |                       | Z                     | <b>Z</b> 00          | ocking Number          | 90          |
|---|--|--|------------------------------|-----------------------|-----------------------|----------------------|------------------------|-------------|
| 5. Generator's Name and   | d Mailing Address  |  | Generator's Site Addre       | ess (if different tha | n mailing addres      | s)                   |                        |             |
| Generator's Phone. 6. Transporter 1 Compar                                    | N. Norma   |  | ĺ                            |                       | 110 554 15 1          | Last se              |                        |             |
| PAGE HTC , INC  |  |  |                              |                       | U.S. EPA ID N         |                      | 5 6 8 0                | 1 7         |
| 7. Transporter 2 Compan   | ny Name  |  |                              |                       | U.S. EPAID N          | lumber               |                        |             |
|   | ame and Site Address ROLLA ES OR 635 TOPY ROA NEESTY HA  | D  |                              |                       | U.S. EPA ID N         | łumber               |                        |             |
| no 95 U.S. DOT De   | ascription (including Proper Shipping Name,<br>oup (if any))   | Hazard Class, ID Number,                 | 10. Con<br>No.               | ntainers Type         | 11. Total<br>Quantity | 12. Unit<br>Wt./Vol. | 13 Codes               |             |
|   | Regulated Mate   | rial.                                    |                              | 12                    | 21,780                | R-                   | 14.04.2                |             |
| 2.  |  |  |                              |                       |                       |                      |                        |             |
| 3.  |  |  |                              |                       |                       |                      |                        |             |
| 4.  |  |  |                              |                       |                       |                      |                        |             |
| TRAILER NU  | D-7629   | 1.8                                      | BLAMEN                       |                       | E Z.A.                | 100                  |                        |             |
| 15. GENERATOR S/OF  | FROM SILVER LAKE PROVE;<br>FFEROR'S CERTIFICATION: I hereby dec<br>liplacarded, and are in all respects in prope | clare that the contents of this consignm | ent are fully and accurately |                       |                       | ipping name. a       | and are classified, pa | ackaged,    |
| Generator's/Offeror's Property PAPAL  | ntedTyped Name   | G  | Signature                    | DARINI                | YEA                   | CHOT                 | Month 0                | 9   V       |
| <ol> <li>International Shipmer</li> <li>Transporter signature (for</li> </ol> | L1 Import to U.S.  | Export fro                               |                              | f entry/exit          |                       |                      |                        |             |
|   | edgment of Receipt of Shipment   |  | Signature                    |                       |                       |                      | Month D                | ay Ye       |
| Transporter 2 Printed/Ty  | ped Name   |  | Signature                    |                       | -                     |                      | Month D                | 9   \3      |
| 18. Discrepancy   |  |  |                              |                       |                       |                      |                        |             |
| 18a. Discrepancy Indical  | tion Space Quantity  | Туре                                     | Residue                      |                       | Partial Rej           | ection               | Full F                 | and and and |
| 18b. Alternate Facility (o  | r Generator)   |  | Shipping Docum               | nent Tracking Nun     | U.S. EPA ID I         | Number               |                        | rejection   |
|   |  |  |                              |                       |                       |                      |                        | rejection   |
| Facility's Phone:<br>18c. Signature of Alterna                                | ate Facility (or Generator)  |  |                              | -                     | Ĭ                     |                      | Month                  |             |
| 18c. Signature of Alterna   | ate Facility (or Generator)  Method Codes (i.e., codes for treatment, d  | lisposal, and recycling systems)         |                              | -                     |                       |                      | Month                  |             |
| 18c. Signature of Alterna   |  | lisposal, and recycling systems)         | 3.                           | 7                     | 4                     |                      | Month                  |             |
| 18c. Signature of Alterna<br>19. Report Management<br>1.                      |  |  |                              |                       | 4                     |                      |                        |             |



| SHIPPING  | 1. Generator ID Number   |                                     | of 3. Emergency Response Ph         | Z  | Z 003              | Number<br>1879     | 31       |
|---|--|-------------------------------------|-------------------------------------|--|--------------------|--------------------|----------|
| 5. Generator's Name an  | o Mailing Address  |                                     | Generator's Site Address (if        | urrerent than mailing addres                             | s)                 |                    |          |
| Generator's Phone   |  |                                     |                                     |  |                    |                    |          |
| 6 Transporter 1 Compa   | ny Name  |                                     |                                     | U.S EPAID N  | lumber             |                    |          |
| 7. Transporter 2 Compa  | iny Name   |                                     |                                     | U.S. EPA ID N  | umber              |                    |          |
| 8 Designated Facility N   | ame and Site Address/gratia ES GREE  | SPECIFIC AND THE                    |                                     | U.S EPAID N  | lumber             |                    |          |
|   | ASS TORY ROAD  | W. REB DALVEPUL                     |                                     | 0.0-0.410  |                    |                    |          |
| Facility's Phone: ST  | NEPSEY PA 1994   | 6                                   |                                     | INGT   | EEQ                |                    |          |
|   | Description (including Proper Shipping Name, Haz.  | ard Class, ID Number.               | 10. Container                       |  | 12. Unit           |                    |          |
| HM and Packing G  | oup (if any))  |                                     | No.                                 | Type Queguty AT  | Wt./Vol.           | 13 Codes           |          |
| 2   | HIT FIED MATERIAL  |                                     | 0 1                                 | 22,820   | No.                | VE.                | H        |
| 2   |  |                                     |                                     |  |                    |                    |          |
|   |  |                                     |                                     |  |                    |                    |          |
| 3.  |  |                                     |                                     |  |                    |                    | 1        |
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| 4   |  |                                     |                                     |  |                    |                    | 1        |
|   |  |                                     |                                     |  |                    | -                  | +-       |
| 15. GENERATOR S/C   | FROM SIL VEH LAKE PROJECT  FFEROR'S CERTIFICATION: I hereby declare to diplacarded, and are in all respects in proper continuous con | that the contents of this consignm  | ent are fully and accurately descri | ibed above by the proper shall governmental regulations. | ipping name, and a | re classified, pac | ckaged,  |
| Generator's/Offeror's Pr<br>RUBERT PAPAL  | I.O. AGENT FOR GE  | 9                                   | Signature                           | JARCADIS SE  | REFUT              | Month Da           |          |
| 16. International Shipme  | Import to U.S.   | Export fro                          | m U.S. Port of entry                |  |                    |                    |          |
|   |  |                                     | Date leaving                        | U.S.,  | -                  |                    | -        |
| 17. Transporter Acknown Transporter 1 Printed/Ty Transporter 2 Printed/Ty                           |  |                                     | Signature                           |  |                    | Month Da           | y Yea    |
| Transporter 2 Printed/Ty  | roed Name  |                                     | Signature                           |  |                    | Month Da           | Yes      |
| Transporter 2 + Transa 1  | pod Hallio   |                                     | 3,221                               |  |                    | 1 1                |          |
| 18. Discrepancy   |  |                                     |                                     |  |                    |                    |          |
| 18a. Discrepancy Indica   | tion Space Quantity  | Type                                | Residue                             | Partial Rej  | ection             | Full Re            | ejection |
|   |  |                                     | Shipping Document T                 |  |                    |                    |          |
| 18b. Alternate Facility (d  | or Generator)  |                                     |                                     | U.S. EPA ID  | Number             |                    |          |
| Facility's Phone:   |  |                                     |                                     | 1_   |                    |                    |          |
| 18c. Signature of Altern  | ate Facility (or Generator)  |                                     |                                     |  |                    | Month D            | ay Ye    |
| 18b. Alternate Facility (c<br>Facility's Phone:<br>18c. Signature of Altern<br>19. Report Managemen | t Method Codes (i.e., codes for treatment, dispos  | sal, and recycling systems)         |                                     |  |                    | 1 1                |          |
| 1   | 2.   |                                     | 3.                                  | 4  |                    |                    |          |
| 20 Decimpated Familie   | Owner or Operator: Certification of receipt of ship  | omant except as poled in the 10-    |                                     |  |                    |                    |          |
| Printed/Typed Name  | Owner or Operator: Octuireaudit of receipt of ship   | Arrest except as noted in item) 188 | Signature                           |  |                    | Month Da           | y Yea    |
|   |  |                                     |                                     |  |                    |                    | -1-      |



| 1                 | SHIPPING<br>DOCUMENT                                 | 1, Generator D Number                                       | 2. Pag                                    | e 1 of 3. Emergency Response Phone                  | 4. Shipping Document Tra         | oking Number<br>0318792      |
|-------------------|--|---|---|---|----------------------------------|------------------------------|
| 6                 | 5 Generator's Name an                                | nd Mailing Address  |   | Generator's Site Address if different               | ent than mailing address)        |                              |
| 1                 | Generator's Phone.                                   |   |   | 1   |                                  |                              |
|                   | 6. Transporter 1 Compa<br>PAGE BTC., INC             | ny Name   |   |   | U.S. EPA ID Number               | 0. 6 8 8 1 5                 |
|                   | 7. Transporter 2 Compa                               |   |   |   | U.S. EPA ID Number               |                              |
|                   | 8. Designated Facility N                             | lame and Site Address / EOLIA EB G                          | REENTREE LANDFILL                         |   | U.S. EPA ID Number               |                              |
|                   | Facility's Phone:                                    | NEW YORK SERBEY, P.S.                                       | 17846                                     |   | N I F F                          | ÷ //                         |
|                   | 9a 9b U.S. DOTD<br>And Packing Gr                    | description (including Proper Shipping Nan<br>oup (if any)) | ne, Hazard Class, ID Number,              | 10. Containers<br>No. Typ                           |                                  | 13. Codes                    |
| GENERATOR -       |  | 200   |   | 1 0.1   | 19,930                           |                              |
| - GENE            | 2  |   |   |   |                                  |                              |
| 1                 | 3  |   | _   |   |                                  |                              |
|                   |  |   |   |   |                                  |                              |
|                   | 4  |   |   |   |                                  |                              |
| 1                 |  | structions and Additional Information                       | halm                                      | r Amadicans   | ADDRESSAL MANAGED THE            | rī ag                        |
| 7                 |  | MEERO604<br>FROM SILVER LAKE PROJE                          | (ii)))                                    | Welmani.  |                                  |                              |
|                   | 15. GENERATOR S/O                                    | FFEROR S CERTIFICATION: I hereby d                          | declare that the contents of this consign | ment are fully and accurately described a           |                                  | nd are classified, packaged, |
|                   |  |   | per condition for transport according to  | p applicable international and national gov         | ernmental regulations.           |                              |
| 1                 |  | LO (AGENT FOR DE  |   | Signature   | PLANE HER CE                     | Month Day Year   05 29 13    |
| INT'L             | 16. International Shipme<br>Transporter signature (f | for exports only):  | Export                                    | from U.S. Port of entry/exit:<br>Date leaving U.S.: |                                  | - 4.3 4.1 6.                 |
| TRANSPORTER       | 17. Transporter Acknowle<br>Transpo r 1 Printed/Ty   | edgment of Receipt of Shipment<br>ped Name                  |   | Signature   |                                  | M B Y                        |
| SANSP             | Transporter 2 Printed/Ty                             | ped Name  |   | Signature   |                                  | Month Day Year               |
| 1                 | 18 Discrepancy                                       |   |   |   |                                  |                              |
|                   | 18a. Discrepancy Indica                              | dion Space Quantity   | Туре                                      | Residue   | Partial Rejection                | Full Rejection               |
| 1                 | 18b. Alternate Facility (o                           | or Generator)   |   | Shipping Document Tracking                          | ng Number:<br>U.S. EPA ID Number |                              |
| SIGNATED FACILITY | Facility's Phone:                                    |   |   |   | 1                                |                              |
| NATED             | 18c. Signature of Alterna                            | ate Facility (or Generator)                                 |   |   |                                  | Month Day Year               |
| 199               | 19. Report Management                                | t Method Codes (i.e., codes for treatment                   | t, disposal, and recycling systems)       | 3.  | 4                                |                              |
| I                 | 20 Designated Facility                               | Owner or Operator: Certification of receip                  | at of shinment excent as nated in them    | 18a   |                                  |                              |
|                   | Printed/Typed Name                                   | ormal of Operator, Octobrough of recelp                     | у от этринет см. сру ва посеи и пет       | Signature   |                                  | Month Day Year               |
| +                 |  |   |   |   |                                  |                              |



| 5 Generator's Name a   | MADFOCOR 16   |                                   | of 3 Emergency Response F                                      |         | Z                     | Z  | rack ng Num     | ber                        |
|--|---|-----------------------------------|--|---------|-----------------------|--|-----------------|----------------------------|
|  |   |                                   | 4  |         |                       |  |                 |                            |
| Generator's Phone 6 Transporter 1 Comp   | any Name  |                                   |  |         | U.S. EPAID N          |  | -               |                            |
| PAGE ETC. INC  |   |                                   |  |         |                       |  | B B 6           | 9.9.7                      |
| 7. Transporter 2 Comp  | any Name  |                                   |  |         | U.S. EPA ID N         | lumber   |                 |                            |
| 8 Designated Facility I  | Name and Site Address   |                                   |  |         | U.S EPA ID N          | lumber   |                 |                            |
| Facility's Phone   |   |                                   |  |         |                       |  |                 |                            |
| HM and Packing G   |   | azard Class, ID Number,           | 10. Containe<br>No.  | Type    | 11. Total<br>Quantity | 12. Unit<br>Wt/Vol.  | 13. C           | odes                       |
| 1 NON PE   | GUL ATEO MATERIAL   |                                   |  | n o     | 3,980                 | K  | NONE            |                            |
| 2.   |   |                                   |  |         |                       |  |                 |                            |
| 3.   |   |                                   |  |         |                       |  |                 |                            |
| 4  |   |                                   |  |         |                       |  |                 |                            |
|  | estructions and Additional Information  |                                   |  |         |                       |  |                 |                            |
|  | FROM SELVER LAKE PROJECT DFFEROR S CERTIFICATION: I hereby declar   |                                   | ent are fully and accurately desc                              |         |                       |  | , and are class | ified, packaged            |
|  |   |                                   | Signature  | 1/      | \AC                   | ASE .  | Mont            |                            |
| marked and labeled   | rinted/Typed Name   | G                                 | Signature  | -       | JE JAS                | AC 201   | N 1 1           |                            |
| marked and labeled Generator's/Offeror's P HOBERT PAPA  16. International Shipm Transporter signature  | ninted/Typed Name  LLO (ACJENT FOR CIE)  ents Import to U.S. (for exports only):  | □ Export fr                       | Signature  | y/exit: | . VAS                 | AC 201   | N 1 1           | h Day                      |
| Generator's/Offeror's P<br>#/2BERT PAPA<br>16. International Shipm<br>Transporter signature  | rinted/Typed Name  LLO (ACJENT FOR CIE)  ents Import to U.S. (for exports only):  | □ Export for                      | Signature  Om U.S. Port of entr                                | y/exit: | . VAS                 | AC 201   | N 1 1           | n Day<br>5 29   N          |
| Generator's/Offeror's P<br>K/2BERT PAPA<br>16. International Shipm<br>Transporter signature<br>17. Transporter Acknow  | ents Import to U.S.  (for exports only):  dedgment of Receipt of Shipment  lyped Name   | □ Export fr                       | Signature  Dom U.S. Port of entr  Date leavin                  | y/exit: | . VAS                 | AC 201   | 0:              | n Day<br>5 29   N          |
| Generator's/Offeror's P. KOBSET PAPA  16. International Shipm Transporter signature 17. Transporter Acknow Transporter 1 Printed/T   | ents Import to U.S.  (for exports only):  dedgment of Receipt of Shipment  lyped Name   | □ Export for                      | Signature  Port of entr Date leavin  Signature                 | y/exit: | . VAS                 | AC 201   | 0:              | n Day<br>5 29   N          |
| Generator's/Offeror's P  ***COBSET PAPA**  16. International Shipm  Transporter signature  17. Transporter Acknow  Transporter 1 Printed/Transporter 1 Pri | inited/Typed Name  LLO (ACTENT FOR CIE)  ents   | ☐ Export fr                       | Signature  Port of entr Date leavin  Signature                 | y/exit: | . VAS                 |  | 0:              | n Day<br>5 29   N          |
| Generator's/Offeror's P  ***X/DESET_PAPA**  16. International Shipm  Transporter signature 17. Transporter Acknow  Transporter 1 Printed/T  Transporter 2 Printed/T  18. Discrepancy   | ents Import to U.S.  (for exports only):  dedgment of Receipt of Shipment  yped Name  ation Space Quantity  |                                   | Signature  Port of entr Date leavin  Signature                 | y/exit: | Partial Rej           | ACC CONTROL CO | 0:              | Day Day Day Day            |
| Generator's/Offeror's P  10 BERT PAPA  16 International Shipm  Transporter signature of the | innted/Typed Name  LLO AGENT FOR GE  ents   |                                   | Signature  Port of entr Date leaving  Signature  Residue       | y/exit: | Partal Reju           | ACC CONTROL CO | 0:              | Day Day Day Day            |
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| SHIPPING   | 1. Generator   | ID Number  | in e.g.   |  | 3 Emergency Respons   |                      | Z  | <b>Z</b> 0          | Tracking Nu    | 880           | 1                                  |
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| 5. Generator's Name an   |  | PENERA ELE<br>ATIN'M STO<br>150 PLASTICE   | AVE   | (  | Senerator's Site Addres   | s (if different      | than mailing addres                        | ss)                 |                |               |                                    |
| Generator's Phone:   |  | PITTERIELDA  | AA (01001)  |  |   |                      | II o FDA ID A                              | L - L               |                |               |                                    |
| transporter 1 Compa  | my name  |  |   |  |   |                      | U.S EPAID                                  | Number              |                |               |                                    |
| 7. Transporter 2 Compa   | ny Name  |  |   | _  |   | _                    | U.S. EPA ID N                              | lumber              | _              | _             | _                                  |
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| 8 Designated Facility N  |  | S. CALL S  |   |  |   |                      | U.S EPAID                                  | Number              |                |               |                                    |
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| SHIPPING<br>DOCUMENT  | 1. Generafor ID Nu  | 208409   | 1 3  | 2. Page 1 of                                      | 3. Emergency Respon<br>(900) 424-9300  | se Phone   | 4. Shipping                                 | Document<br>7        | Tracking Nur<br>0031 | RR    | 17         |
|---|---|--|--|---|--|--|---|----------------------|----------------------|-------|------------|
| 5. Generator's Name and N   | Mailing Address  CHEN ATT  159  | eral blectr<br>n:Matt cala<br>plastics ave<br>repield, ma o  | IC CO<br>CONE  | y.  | Generator's Site Address GENERAL BLE/ 159 PLASTICS / PITTSFIELD, M.  | TRIC O   | than malling address                        | 33)                  | ,001                 | 00.   |            |
| 6. Transporter 1 Company I  | Name  |  |  |   |  |  | U.S. EPA ID A                               |                      | 6 9 6                |       | , .        |
| PAGE ETC., INC<br>7. Transporter 2 Company I  | Name  |  |  |   |  |  | U.S. EPA ID N                               |                      | 0 9 0                | 9 9   | 4 ,        |
|   |   | .0   |  |   |  |  |   |                      |                      |       |            |
| 8. Designated Facility Name   | KUM<br>690  | DLIA ES GREEN<br>TOBY ROAD<br>LSEY, PA 15846   |  | TLL   |  |  | U.S. EPAIDA                                 |                      | E Q                  |       | 7          |
| OF US BOTE  | 265-1744<br>cription (including Proper  | Chlorina Nama Hazan  | d Class ID Numb  | ar.   | 10. Cont   | alnam  |   |                      |                      | •     |            |
| 9a. 9b. U.S. DOT Desc<br>and Packing Group  |   | Shipping Name, nazar   | a Class, ID Numb                                       | roi,  | No.  | Type   | 11. Total<br>Quantity                       | 12. Unit<br>Wt./Vol. | 13.                  | Codes |            |
| 1. NON REGU   | LATED MATERI  | AL   |  |   | 1  | D T  | Estranete                                   | K                    | NONE                 |       | F          |
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| Generator's Name and Mailing Address GENI ATTI 159 P   | 2084093   | 1 1                        | 3. Emergency Response<br>(900) 424-9300   | .,                               | 4. Shipping t         | 7 0        | 031            | QQ           | Q                                      |
|--|---|----------------------------|---|----------------------------------|-----------------------|------------|----------------|--------------|--|
| and the second s | ERAL ELECTRIC CO<br>N'MATT CALACONE<br>PLASTICS AVE                   |                            | Generator's Site Address GHNERAL HIEC 159 PLASTICS A  | TRIC CO                          | han mailing address   |            | 031            | .00          | 00                                     |
| Generator's Phone: 413 494-5358 PITT   | SPIELD, MA CI2CI  | 1                          | PITTEFIELD, MA  | 01201                            |                       |            |                |              |  |
| Transporter I Company Name   |   |                            |   |                                  | U.S. EPAID N          | 477-51     |                |              |  |
| AND STC., INC.   |   |                            |   |                                  | U.S. EPAID N          |            | 6 9 6          | 9 9          | 4 7                                    |
| , manaporter 2 Company Name  |   |                            |   |                                  | 1 U.S. ETAIDN         | moei       |                |              |  |
| . Designated Facility Name and Site Address  | TA DU ADTENTOUR LA  | men r                      |   | -                                | U.S. EPA ID N         | umber      | _              |              |  |
| 7 (26  | COBY ROAD<br>BHY, PA 15846  | thrui.                     |   |                                  |                       | R          | Rq             |              | 7 4                                    |
| acility's Phone: 814 265-1744  a. 9b. U.S. DOT Description (including Proper S and Packing Group (if any))   | shipping Name, Hazard Class, ID Num                                   | nber,                      | 10. Contai  | iners<br>Type                    | 11. Total<br>Quantity | 12. Unit   |                | Codes        |  |
| 1. NON REGULATED MATERIA   | AI.   |                            | 110.  | Туро                             | Estimate              |            | NONE           |              | T                                      |
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| 5. GENERATOR S/OFFEROR S CERTIFICATION   |   |                            | ere fully and accurately de   | escribed above                   | e by the proper ship  | oping name | e, and are cla | assified, pa | ckeged,                                |
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| 5. Transporter 1 Company ) PACE ETC., INC.   | Vame   |  |  |  |  |  | U.S. EPAIDN  | 7. 10. 11.          | 6 9 6           | 9 9           | 4 7   |
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| Facility's Phone: 214  | 265_1744   | KERBIY, PA 15  | 846  |  | - 4  |  | INOT   | R                   | EQ              | 1             | 7 :   |
| 9b. U.S. DOT Desc<br>and Packing Group   |  | Proper Shipping Name, I  | Hazard Class, ID Num   | nber,  | 10. Co   | ntainers<br>Type   | 11. Total<br>Quantity  | 12. Unit<br>WL/Vol. |                 | Codes         |       |
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| DOCUMENT   | MAD002034093   |  | 100) 424-9300  | or ne  | Z  |                      | 031            | 894   | <u> </u>                   |
| 5. Generator's Name and M  | GENERAL ELECTRIC<br>ATTN:MATT CALACO<br>159 PLASTICS AVE   | CO GI  | inerator's Site Addres<br>INERAL ELEC<br>PPLASTICS A<br>PTSFIELD, MA | TRIC CO  |  | (8)                  |                |   |                            |
| <ol><li>Transporter 1 Company I</li></ol>  | Varne  |  | -  | _  | U.S. EPA ID N                                |                      |                | ~ ^   |                            |
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| Facility's Phone: 814 2  | 65-1744 REPORT, PA 13840   |  |  |  | NOI  | R                    | EQ             | ī   | 7 5                        |
| 9a. 9b. U.S. DOT Desc<br>HM and Packing Group  | ription (including Proper Shipping Name, Hazard (<br>(if any))   | Class, ID Number,  | 10. Cont   | ainers<br>Type   | 11. Total<br>Quantity                        | 12. Unit<br>Wt./Vol. | 13.            | Codes   |                            |
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| Generator's Name and Mailing Address CENNERAL ELECTRIC CO. ATTN MATT CALADOMS 15 JAA-1262 PTTSFTELD, IAA 01301  Transporter I Company Name VIET JAA-1262 PTTSFTELD, IAA 01301  Transporter I Company Name VIET STOCK JAC Transporter I Company Name Designated Facility Name and Site Address A.D. CARSENCYRKIK LANDIFFL.  635 TYLEY ROAD  NO I R E Q I  Citive Phone:  Fit 365-1244  SERRIER, DA 15846  RERIER, DA 15846  SERRIER, DA 15846  NO I R E Q I  Container  11 Total  12 Link No. Type PHEND Number  13 Codes  NO I R E Q I  Container  15 TABLES NO. RECHELATED IN ATSREAL  1 D T 20,1000 X    | SHIPPING<br>DOCUMENT   |                                    | or ID Number<br>2002040           | 93                       | 2. Page 1 of  | 3. Emergency Respons<br>(\$00) 424 9300 |                        | 4. Shipping   | z o      | Tracking Nun | 892        | 5      |
|--|--|------------------------------------|-----------------------------------|--------------------------|---------------|---|------------------------|---------------|----------|--------------|------------|--------|
| Transporter Z Company Name  US. SPAID Number  US   |  |                                    | ATTN MATT CAL                     | LACKINE<br>VE            |               | GENERAL SLET<br>159 PLASTICE A          | VE<br>VE               |               |          |              |            |        |
| Designated Facility Name and Size Address a.1.9. GREENEY SES 3AND FELL .  ASS YYLD Y ECOLO .  SERVEY, PA 15846  NO. 17 R. E. Q. 1  SERVEY, PA 15846  NO. 17 R. E. Q. 1  SERVEY, PA 15846  NO. 17 R. E. Q. 1  SERVEY, PA 15846  NO. 17 R. E. Q. 1  NO. 17 R. E. Q. 1  SERVEY, PA 15846  NO. 17 R. E. Q. 1  SERVEY       |  | ny Name                            |                                   |                          |               |   |                        | U.S. EPA ID N | lumber a | 6 9 6        | 9 9        | 4 7    |
| ASS TOLENT SCHAD  SURVEY, PA. 15845  See US DOT Description (producting Proper Shipping Name, Hazard Class, ID Number, 10, Containers 11, Total 12, Unit 13, Codes and Packing Control (pd. 2011).  I. NO. Total 12, Unit 13, Codes 11, Total 12, Unit 13, Codes (Property Class of Codes (Property Clas   | 7. Transporter 2 Compa   | ny Name                            |                                   |                          |               |   |                        | U.S. EPA ID N | umber    |              |            |        |
| Special Handling Institutions and Additional Information   EX Service Country-ted by (SENEPAL ELECTRIC CO)   No. NO. NO.   |  |                                    | 635 TUBY ROAD                     |                          |               |   |                        | 2.7.2.2.      |          | V            | 7          | ~9 at  |
| 1. N/CN REGULATED MATSRIAL  2. D. T. 30,100 K  3  3  4  5. Secial Handling Instructions and Additional Information BR. Service Contracted by GENERAL SLECTRIC CO   | a. 9b. U.S. DOT  | Description (including             |                                   | -                        | ),            | 10. Conta                               | ainers                 | 1             |          |              |            | k 2    |
| Special Handling Instructions and Additional Information EXI Service Contrasted by GENERAL SLECTRIC CO \$ \$6.794.92501 9.ATEO SCVID. SEDIMARINT, AND DEBRUS APPROVAL NUMBER 239949  TRAILER NÜRBER  GENERATOR SIGFEROR'S CERTIFICATION: Thereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packs and the state of the second of the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packs are advised placed of the second of |  | 2,12                               | ATERIAL                           |                          |               | No.                                     | Туре                   | STANA         | Wt./Vol. | //3          | Joues      | 1      |
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| Special Handling Instructions and Additional Information   | 3,   |                                    |                                   |                          |               |   |                        |               |          |              |            |        |
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| Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a  | acility's Phone:<br>8c. Signature of Altern  |                                    | erator)                           |                          |               |   |                        | U.S. EPA ID N | lumber   | Mo           | nth Da     |        |
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| DOCUMENT                                     |  | 0000000000  | 1                 | (800) 424-9300   | tir ne         | Z                     |                      | 1031         | 036      | O     |
| 5. Generator's Name a Generator's Phone: 4   |  | GENERAL ELECTRIC OF<br>ATTN MATT CALACOM<br>159 PLASTICS AVE<br>PITTEFIELD, MA. 01201 |                   | Generator's Site Address OFFICE ALL FLEC 159 PLASTICS A DITTSFIELD, MA | TPIC OD        |                       | ss)                  |              |          |       |
| <ol><li>Transporter 1 Comp</li></ol>         | any Name   |   |                   |  |                | U.S. EPA ID N         | Vumber               |              |          |       |
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| 7. Transporter 2 Comp                        | any Name   |   |                   |  |                | U.S. EPA ID N         | lumber               |              |          |       |
| B. Designated Facility                       | Variation Address  |   |                   |  |                | U.S. EPA ID N         | book on              |              |          |       |
| b. Designated Facility                       | varrie and Site Addre  | ADS - GREENTREE LAN<br>635 TOBY ROAD  | THRL              |  |                | U.S. EPAID            | umber                |              |          |       |
| Facility's Phone: §1                         | 4 265_1744   | KERSEY, PA. 15846   |                   |  |                | MOI                   | 泉                    | E V          | 4        | 1     |
|  | Description (including   | Proper Shipping Name, Hazard Class,   | ID Number,        | 10. Conta  | Туре           | 11. Total<br>Quantity | 12. Unit<br>Wt./Vol. | 13,          | Codes    |       |
| 1. NOW RE                                    | GULATED M  | ATERIAL   |                   |  | E              | SIMALE                | -                    | MITTE        |          |       |
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| marked and label<br>Generator's/Offeror's P  |  | e in all respects in proper condition for   |                   | nature   | tional governi | mental regulations.   | SAG                  | Mor          | nth Day  | ,     |
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| 6. International Shipm                       | ents   | mport to U.S.   | Export from L     | .s. Port of e  | ntry/evit      | 710                   |                      |              |          | _     |
| ransporter signature                         |  | import to 0.5.  | Export from c     | Date leav  |                |                       |                      |              |          |       |
| 7. Transporter Acknow                        | Called St. Development of the Control of the Contro | of Shipment   |                   | 1  | 1              | 1                     |                      | -            |          |       |
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| 8. Discrepancy                               |  |   |                   |  |                |                       |                      |              |          |       |
| 8a. Discrepancy Indic                        | ation Space  | Quantity  | Туре              | Residue  |                | Partial Reje          | ection               |              | Full Rej | ectio |
|  |  | o transfer  | - 3               |  |                |                       |                      |              |          |       |
| Ob Altered to Provide                        | as Canat-ul  |   |                   | Shipping Docume  | nt Tracking N  |                       | tromb                |              |          |       |
| 8b. Alternate Facility (                     | or Generator)  |   |                   |  |                | U.S. EPA ID N         | umber                |              |          |       |
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| acility's Phone:                             | ata Faciliti 7   |   |                   |  |                |                       |                      |              |          |       |
| 8c. Signature of Alterr                      | ate Facility (or Gene  | rator)  |                   |  |                |                       |                      | Mo           | onth Da  | у .   |
|  |  |   |                   |  |                |                       |                      |              |          |       |
| 9. Report Managemen                          | nt Method Codes (i.e   | ., codes for treatment, disposal, and rec   |                   |  |                | 12                    |                      |              |          |       |
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| 0. Designated Facility<br>Printed/Typed Name | Owner or Operator:   | Certification of receipt of shipment exce   |                   | natura   |                |                       |                      | - 12         | nih D    |       |
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|---|--|--|----------------------------|--|-----------------|-----------------------|----------|------------------------|---------------------|
| Generator's Phone:  | and Mailing Address  | GENERAL ELECTRIC CO<br>ATTN MATT CALACONE<br>159 PLASTICS AVE<br>PITTSPIELD, MA 01201  |                            | Generator's Site Address CIENCE AL ELEC 159 PLASTICS A PRESENTAL MA  | TRIC CO<br>VE   |                       | s)       |                        |                     |
| 6. Transporter 1 Com  | npany Name   |  |                            |  |                 | U.S. EPAID N          |          | 5 9 6 9                | 9 4 5               |
| 7. Transporter 2 Com  |  |  |                            |  |                 | U.S. EPAID N          |          | 2 2 11 12              | ~ 4                 |
|   |  |  |                            |  |                 |                       |          |                        |                     |
|   | y Name and Site Addr   | essade Greentree Land<br>635 Toby Boad<br>Kersey, da 15646   | FILL                       |  |                 | U.S. EPAID N          |          | ÇE                     | ž 7                 |
| 9b. U.S. DO   |  | g Proper Shipping Name, Hazard Class, IC   | Number,                    | 10. Conta  | iners<br>Type   | 11. Total<br>Quantiby | 12, Unit | 13. Code               |                     |
|   | egulated m   | ATERIAL  |                            |  | 7               | MILLAN . 06           |          | NONE                   |                     |
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|   |  | tional Information TR Service Con  |                            |  |                 |                       |          |                        |                     |
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| ransporter 2 Printed  | (Men   | OCarmot  | 1                          | m U  | m               |                       |          | 108                    | 101                 |
| ransporter 2 Printed  | (Me A<br>I/Typed Name  |  | 1                          | m U  | m               | Partial Reje          | ection   | I OS<br>Month          | 101                 |
| ransporter 2 Printed  8. Discrepancy  8a. Discrepancy Ind   | I/Typed Name   |  | Sig                        | nature   | nt Tracking Num |                       |          | I OS<br>Month          | Day                 |
| ransporter 2 Printed  8. Discrepancy  8a. Discrepancy Ind  8b. Alternate Facility  acility's Phone:   | I/Typed Name   | Quantity   | Sig                        | nature Residue   | nt Tracking Num | ber:                  |          | I OS<br>Month          | Day                 |
| ransporter 2 Printed  8. Discrepancy  8a. Discrepancy Ind  8b. Alternate Facility  acility's Phone:  8c. Signature of Alternate Alternate Alternate Indianature         | i/Typed Name  dication Space  y (or Generator)   | Quantity   | Sig                        | nature Residue   | nt Tracking Num | ber:                  |          | Month                  | Day                 |
| ransporter 2 Printed  8. Discrepancy  8a. Discrepancy Ind  8b. Alternate Facility  acility's Phone:  8c. Signature of Alternate Alternate Alternate Indianature         | i/Typed Name  dication Space  y (or Generator)   | Quantity   | Sig                        | nature Residue   | nt Tracking Num | ber:                  |          | Month                  | Day                 |
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| ransporter 2 Printed  8. Discrepancy  8a. Discrepancy Ind  8b. Alternate Facility  Facility's Phone:  8c. Signature of Alte   | I/Typed Name  dication Space  y (or Generator)  ernate Facility (or Generator Method Codes (i.e. | Quantity erator) e., codes for treatment, disposal, and recycles.  | Type  Cling systems)  3.   | nature Residue   | nt Tracking Num | ber:<br>U.S. EPA ID N |          | Month                  | Day                 |



|           | HIPPING<br>OCUMENT  | 1. Generate      | or ID Number  | 093   | 2. Page 1 of     | 3. Emergency Respor<br>(800) 424 9300                                  |                            | 4. Shipping           | Z 0                  | Tracking Num | 892       | 8                  |
|-----------|---|------------------|---|---|------------------|--|----------------------------|-----------------------|----------------------|--------------|-----------|--------------------|
| li<br>li  | Senerator's Name and Ma   | iling Address    | CONCRAL ELE<br>ATTN MATT C<br>159 PLASTICS .<br>PITTSPIELD, M | ALACONE<br>AVE  |                  | Generator's Site Addre<br>GENERAL ELE<br>150 DI ASTICE<br>DICTAFIELD M | CTRIC CO<br>AVE            |                       | s)                   |              |           |                    |
| 6. T      | ransporter 1 Company N  | ame              |   |   |                  |  |                            | U.S. EPA ID N         |                      |              | _         |                    |
|           | of etc., inc  |                  |   |   |                  |  |                            | NYD                   | 9 3                  | 6 9 6        | 9 9 1     | 1 7                |
| 7. T      | ransporter 2 Company Na   | ame              |   |   |                  |  |                            | U.S. EPAID N          | umber                |              |           |                    |
|           | Designated English Name   | and Cita Addra   |   |   |                  |  |                            | U.S. EPA ID N         | luma basa            |              |           |                    |
|           | Designated Facility Name  |                  | "ADS - GREENT<br>635 TORY ROW<br>KERSFY, PA 18                | D   |                  |  |                            |                       |                      |              |           |                    |
| Fac       | ility's Phone: 🏻 🗓 🕽  |                  |   |   |                  |  |                            | NOT                   | R                    | E 4          | 1         | 18                 |
| 9a.<br>HM | and Packing Group (   | if any))         |   | Hazard Class, ID Number                                   | 1                | 10. Con<br>No.   | Туре                       | 11. Total<br>Quantity | 12. Unit<br>Wt./Vol. | 13. (        | Codes     |                    |
| GENERALOR | 1. NON REGUL  | ated Ma          | Temal   |   |                  | \$   | DT                         | 21,890                |                      | NIME         |           |                    |
| GEN       | 3.  |                  |   |   |                  |  |                            |                       |                      |              |           |                    |
| R         |   | Typed Name       | o in all respects in proper                                   | are that the contents of th<br>condition for transport ac | cording to appli | cable international and r  | mational govern            |                       | ACCE!                | OT Mon       |           | Year               |
| E Tra     | nsporter signature (for ex  |                  | nport to U.S.   |   | Export from      |  | entry/exit:<br>aving U.S.: |                       |                      |              |           |                    |
| 17.       | Transporter Acknowledgm   | ent of Receipt   | of Shipment   |   |                  |  |                            |                       |                      |              |           |                    |
| 2         | nsporter 1 Printed Typed N<br>, , , , , , , , , , , , , , , , , , , | m1 1             | KEZM  |   | 1                | nature   |                            |                       |                      | Mon<br>Mon   | Blok      | Year<br>13<br>Year |
| 18.       | Discrepancy   |                  |   |   |                  |  |                            |                       |                      |              |           |                    |
| 18a       | . Discrepancy Indication S  | Space            | Quantity  | Туре  |                  | Residue  | ont Tracking               | Partial Reje          | ection               |              | Full Reje | ction              |
|           | . Alternate Facility (or Ger  | nerator)         |   |   |                  | Shipping Docum   | THE HALKING                | U.S. EPA ID N         | umber                |              |           |                    |
| Faci      | ility's Phone:  |                  |   |   |                  |  |                            | 1                     |                      |              |           |                    |
|           | . Signature of Alternate Fa   | acility (or Gene | rator)  |   |                  |  |                            |                       |                      | Mo           | nth Day   | Year               |
| 19.1      | Report Management Met   | nod Codes (i.e.  | , codes for treatment, dis                                    | posal, and recycling syste                                | ems)             |  |                            |                       |                      |              |           |                    |
| 1         |   | 1000             | 2.  |   | 3.               |  |                            | 4.                    |                      |              |           |                    |
| 20.       | Designated Facility Owne  | r or Operator;   | Certification of receipt of                                   | shipment except as noted                                  | l in Item 18a    |  |                            |                       |                      |              |           |                    |
| 100       | ited/Typed Name   |                  |   |   |                  | gnature  |                            |                       |                      | Mor          | nth Day   | Year               |
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| SHIPPING<br>DOCUMENT   | 1. Generato   | ID Number                                 | 093  | 2. Page 1 of   | 3. Emergency Res<br>(300) 424 9. | ponse Phon                       | e   | 4. Shipping           | Z 0                  | Tracking Num     | 892       | 9      |
|--|---|---|--|----------------|----------------------------------|----------------------------------|-----|-----------------------|----------------------|------------------|-----------|--------|
| 5, Generator's Name and  |   | GENERAL ELL<br>ATTNMATT (<br>159 PLASTICS | ALACCINE<br>AVE  |                | Generator's Site Ad              | SAVE                             |     | nailing addres        | s)                   | 2052             |           |        |
| Generator's Phone:   | 494 3338  | PITTSFIELD, L                             | AA 01201   |                | PITTSFIELD                       | , MA (1)                         | *** |                       |                      |                  |           |        |
| 6. Transporter 1 Company   | Name  |   |  |                |                                  |                                  | · · | J.S. EPA ID N         | lumber<br>9 8        | \$ 0 5           |           | 4 7    |
| 7. Transporter 2 Company   | Name  |   |  |                |                                  |                                  | - 1 | J.S. EPA ID N         | lumber               |                  |           | -      |
|  |   |   |  |                |                                  |                                  |     |                       |                      |                  |           |        |
| 8. Designated Facility Nar   | ne and Site Addres                                  | 635 TORY ROA                              | D  |                |                                  |                                  | +1  | J.S. EPA ID N         | lumber               |                  |           |        |
| Facility's Phone: 第章   | 365-1744  | KERMIN, PA 1                              | igas   |                |                                  |                                  | -1  | TOK                   | R                    | E Q              | Ě         | 7 )    |
| 9a. 9b. U.S. DOT Des<br>and Packing Grou                                       | ıp (if any))  |   | Hazard Class, ID Number                                    | er,            | 10. No.                          | Containers                       |     | 11. Total<br>Quantity | 12. Unit<br>Wt./Vol. | 13. (            | Codes     |        |
| 1. NON REG   | .T.ATED MA  | TERIAL                                    |  |                |                                  | 1 D                              | T 2 | 0,150                 | K                    | NOME             |           |        |
| 2.   |   | 14  |  |                |                                  |                                  |     |                       |                      |                  | , a, u    |        |
| 3,   |   |   |  | +              |                                  |                                  |     |                       |                      |                  | i         |        |
| 4.   |   |   |  |                |                                  |                                  |     |                       |                      |                  |           |        |
| 4. Special Handling Instri   |   |   |  |                |                                  |                                  |     |                       |                      |                  |           |        |
| marked and labeled/<br>Generator's/Offeror's Print<br>ROBERT PAPALL            | placarded, and are<br>ed/Typed Name<br>-C) (AGENT F | in all respects in prope                  | lare that the contents of t<br>r condition for transport a |                |                                  |                                  |     | al regulations.       | pping name           | e, and are class | ith Day   | aged,  |
| <ol> <li>International Shipment</li> <li>Fransporter signature (for</li> </ol> | L Im  | port to U.S.                              |  | Export from    |                                  | t of entry/exit<br>e leaving U.S |     |                       |                      |                  |           |        |
| 7. Transporter Acknowled   |   | Shipment                                  |  |                | ()                               | /\                               |     |                       |                      |                  |           |        |
| Transporter 1 Printed/Type Transporter 2 Printed/Type                          | 2211  | en Ja                                     |  | 1              | hature                           | Zel                              | lef | den ;                 |                      | Mon<br>Mon       | 8101      | ΙŢ     |
| 8. Discrepancy   |   |   |  |                |                                  |                                  | _   |                       | _                    |                  |           |        |
| 8a. Discrepancy Indication   | n Space   | Quantity                                  | Туре   |                | Residu                           | )                                | Ē   | Partial Reje          | ection               |                  | Full Reje | ection |
| 8b. Alternate Facility (or 0   | Generator)  |   |  |                | Shipping Do                      | cument Track                     |     | r.<br>J.S. EPA ID N   | lumber               |                  |           | -      |
| Facility's Phone:  |   |   |  |                |                                  |                                  | ĺ   |                       |                      |                  |           |        |
| 18c. Signature of Alternate  | Facility (or Genera                                 | itor)                                     |  |                |                                  |                                  |     |                       |                      | Mo               | nth Day   | 1      |
| 19. Report Management M  | lethod Codes (i.e.,                                 |   | sposal, and recycling sys                                  |                |                                  |                                  |     |                       |                      |                  |           |        |
|  |   | 2.  |  | 3.             |                                  |                                  |     | 4.                    |                      |                  |           |        |
| 20. Designated Facility Ov   | ner or Operator: C                                  | ertification of receipt of                | shipment except as note                                    | ed in Item 18a |                                  |                                  | _   |                       |                      |                  | _         | -      |
| Printed/Typed Name   | орыны. О  |   | pp oncope do noto  |                | nature                           |                                  |     | -                     | -                    | Мо               | nth Day   | ,      |
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| SHIPPING  | 1. Generator ID Number   | 2. Page 1 of   | 3. Emergency Response Phon  | e 4. Shipping I   | Document 7           | 0318930                       |
|---|--|--|---|---|----------------------|-------------------------------|
| DOCUMENT  | Mabunganana  | 1  | (900) 434-9300  |   | <u> </u>             | 0218320                       |
| 5. Generator's Name and Ma  | OFNERAL BLECTRIC<br>ATTWINIATT CALACO<br>159 PLASTICS AVE  | NE   | Generator's Site Address (if diff<br>GENERAL ELECTRIC<br>159 PLASTICS A VE<br>PUTSFIELD, MA DIS | 2.00  | s)                   |                               |
| Generator's Phone: 413<br>6. Transporter 1 Company N                              |  | -  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   | U.S. EPA ID N   | lumber               | _                             |
| PAGE STC.,INC   |  |  |   | NYD   | 9 5                  | 6 9 6 9 9 4                   |
| 7. Transporter 2 Company N  | ame  |  |   | U.S. EPA ID N   | umber                |                               |
|   |  |  |   |   |                      |                               |
| 8. Designated Facility Name   | and Site Address ADS - ORBENTRIE LA 633 TOBY ROAD  | MDFILL   |   | U.S. EPA ID N   | umber                |                               |
| Facility's Phone: Pta 9   | KERSET, PA 15846   |  |   | NOT   | R                    | E a A T                       |
|   | iption (including Proper Shipping Name, Hazard Cla   | ass, ID Number,  | 10. Containers<br>No. 7   | 11. Total<br>Cype Quantity                              | 12. Unit<br>Wt./Vol. | 13. Codes                     |
| 1. New recut  | LATED MATERIAL   |  | α ι   | 2.00  |                      | NONE                          |
| 2.  |  |  |   |   |                      |                               |
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| 4.  |  |  |   |   |                      |                               |
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| marked and labeled/pla  | ROR S CERTIFICATION: 1 hereby declare that the<br>acarded, and are in all respects in proper condition | e contents of this consignment<br>for transport according to appli | are fully and accurately describe icable international and national of                          | ed above by the proper shi<br>governmental regulations. | ipping name          | , and are classified, package |
| Generator's/Offeror's Printed<br>ROBERT PAPALL                                    | I/Typed Name<br>O (ACHENT FOR CIE)   | ( to   | analyse Al  | AKADE) FR   | ACE!                 | Month Day   0.5               |
| <ol> <li>International Shipments</li> <li>Transporter signature (for e</li> </ol> |  | Export from  | U.S. Port of entrylex Date leaving U.   | kit:  |                      |                               |
| 17. Transporter Acknowledge<br>Transporter 1 Printed/Typed                        |  | Si   | gnature   |   | -                    | Month Day                     |
| Transporter 2 Printed/Typed   | a Court  |  | gnature   | 2//   |                      | 108 05 <br>Month Day          |
| 18. Discrepancy   |  |  |   |   |                      |                               |
| 18a. Discrepancy Indication   | Space Quantity   | Туре   | Residue   | Partial Rej   | ection               | Full Rejecti                  |
|   |  |  | Shipping Document Trac  |   |                      |                               |
| 18b. Alternate Facility (or Go  | enerator)  |  |   | U.S. EPA ID N   | Number               |                               |
| Facility's Phone:<br>18c. Signature of Alternate F                                | Facility (or Ganerator)  |  |   |   |                      | Month Day                     |
| 100. Signature of Alternate I   | aumy (or Generator)  |  |   |   |                      | Month Day                     |
| 19 Report Management Ma   | ethod Codes (i.e., codes for treatment, disposal, an   | d recycling eveteme)   |   |   |                      |                               |
| 15. Report Management Me  | ernod Codes (i.e., codes for treatment, disposal, an<br>2.   | d recycling systems)  3.   |   | 14.   | _                    |                               |
|   |  |  |   | 100   |                      |                               |
| 20. Designated Facility Own   | ner or Operator: Certification of receipt of shipment  | except as noted in Item 18a  |   |   |                      |                               |
| Printed/Typed Name  | - Carrier School And Assalts of sultimont  |  | ignature  |   |                      | Month Day                     |
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|---|--|--|---------------------------|--------------------|---|----------------------------|--------------------------|----------|-------------|-----------|--------------|
| 5. Generator's                                    | Name and Mailing Address   |  | TRIC CO<br>LACONE         | CEN                | tor's Site Address<br>RAL ELEC<br>LASTICS A | TRIC CO                    | than mailing addres      |          |             |           |              |
| Generator's Ph                                    | one:413 494 5358   | PUTSFIELD, MA  |                           | PITT               | FIELD, MA                                   | 1 01201                    |                          |          |             |           |              |
| 6. Transporter                                    | Company Name   |  |                           |                    |   |                            | U.S. EPA ID N            |          |             |           |              |
| PACE HTC  |  |  |                           |                    |   |                            | NAD                      |          | , 9 4       | 4 9 4     | 1            |
| 7. Transporter 2                                  | Company Name   |  |                           |                    |   |                            | U.S. EPA ID N            | umber    |             |           |              |
| 8. Designated F                                   | acility Name and Site Add  | Iress<br>ADS - GREENTR<br>ASS TORY ROAD                        | EB LANDFILL               |                    |   |                            | U.S. EPA ID N            | lumber   |             |           |              |
| Encilit to Dhone                                  | 814 265-1744   | KERSEY, MA 150   | 145                       |                    |   |                            | INOF                     | RE       | 0 0         | - A       | 3            |
|   |  | ng Proper Shipping Name, H                                     | lazard Class, ID Number,  |                    | 10. Conta                                   | ainers                     | 11. Total                | 12. Unit |             |           |              |
| HM and Pa   | cking Group (if any))  |  |                           |                    | No.   | Туре                       | S WAY                    | Wt./Vol. | 13. 0       | Codes     |              |
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| 1771  |  |  |                           |                    |   |                            |                          |          |             |           |              |
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| marked ar   |  | rIFICATION: I hereby decla<br>are in all respects in proper of |                           |                    |   | ational govern             | nmental regulations.     | SAG      | ST Mon      | th Day    | Year         |
| ROBERT P  | APALLO (AGENT  | FOR CE)  |                           | 1866               | at 15                                       | dela                       | ARCADIS)                 | FORE     | 至10         | 8 05      | 5/13         |
|   | Shipments nature (for exports only):   | Import to U.S.   | - [                       | Export from U.S.   |   | entry/exit:<br>iving U.S.: |                          |          |             |           |              |
| 17. Transporter                                   | Acknowledgment of Recei  | ot of Shipment   |                           | Signature          | ()  | ΑΛ                         | Λ                        |          | Mon         | th Day    | Van          |
| Hob   | rinted/Typed Name  A 2 a rinted/Typed Name   | ller m   |                           | Signature          | Kos   | Sell                       | ent                      |          | Mon         | 3/05      | Year<br>Year |
|   | -  |  | 1184                      |                    |   |                            |                          |          |             |           |              |
| 18. Discrepanc                                    |  |  |                           |                    |   |                            |                          |          |             |           |              |
| 18a, Discrepan                                    | cy Indication Space  | Quantity   | Туре                      |                    | Residue                                     |                            | Partial Reju             | ection   |             | Full Reje | ection       |
| 18b. Alternate F                                  | acility (or Generator)   |  |                           |                    | Shipping Docume                             | ent Tracking I             | Number:<br>U.S. EPA ID N | lumber   |             | -         |              |
| Facility's Phone                                  |  |  |                           |                    |   |                            | 1                        |          |             |           |              |
| 18c. Signature                                    | of Alternate Facility (or Ge   | nerator)   |                           |                    |   |                            |                          |          | Mo          | nth Day   | Yea          |
| Facility's Phone 18c. Signature 19. Report Man 1, | agement Method Codes (   | .e., codes for treatment, disp                                 | osal, and recycling syste | ems)               |   |                            |                          |          |             |           | _            |
| 1.  |  | 2.   |                           | 3.                 |   |                            | 4.                       |          |             |           |              |
|   | The state of the s | r: Certification of receipt of s                               | hipment except as noted   |                    |   |                            |                          |          |             |           |              |
| Printed/Typed N                                   | lame   |  |                           | Signature          |   |                            |                          |          | Mor         | nth Day   | Year         |
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| DOCUMENT  | 1. Generator ID Number  MADOGIOSIOS  | TO 1 1 TO 1 TO 1 TO 1 TO 1 TO 1 TO 1 TO   | 3. Emergency Response Phone<br>(300) 424-9300  | 4. Shipping Docum  | 00318908  |
|---|--|---|--|--|---|
| 5. Generator's Name and Mailir Generator's Phone: 413 49  | GENERAL ELECTRIC C<br>ATTINMATT CALACON<br>159 PLASTICS AVE<br>14-3338 PHTSFIELD, MA. 01.301   | O G   | Senerator's Site Address (if different<br>SENTIPAL BLECTRIC CO<br>SO DILARTICE AVE   | than mailing address)  |   |
| 6. Transporter 1 Company Nam<br>PAGE ETC., INC  | ne   |   |  | U.S. EPA ID Numbe  | 8 6 6 6 9 6 4 7   |
| 7. Transporter 2 Company Nam  | ne   |   |  | U.S. EPA ID Number   |   |
| Designated Facility Name an   | nd Site Address ADS - GREENTRES LAY<br>635 TOBY ROAD   | NDFILL  |  | U.S. EPA ID Number   | T.  |
| Facility's Phone: 914 265   | 5-1744 KERSEY, PA 15846  |   |  | NOT  | REQ 175   |
| 9a. 9b. U.S. DOT Description  | ion (including Proper Shipping Name, Hazard Clasany))  | ss, ID Number,  | 10. Containers<br>No. Type   | 11. Total 12. I<br>Quantity Wt./   |   |
| 1. NOW REQUILA  | TED MATERIAL   |   | 1 10 T   | 22,660 K   | NORTH   |
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| MATERIAL FROM  5. GENERATOR S/OFFERO marked and labeled/placa   | M SILVER LAKE PROJECT. CAD IN<br>OR S CERTIFICATION: I hereby declare that the<br>orded, and are in all respects in proper condition for   | CEQUIRED PO#11117   | 기와생<br>e fully and accurately described abo  | ve by the proper shipping  | name, and are classified, packaged,   |
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| MATERIAL FROM  5. GENERATOR S/OFFERO marked and labeled/placa  Generator's/Offeror's Printed/Ty  COBRET PAPALLO ( 6. International Shipments  Transporter signature (for expo  7. Transporter Acknowledgment ransporter 1 Printed/Typed Na  Parameter 1 Printed/Typed Na  R. Discrepancy  8. Discrepancy Indication Spi  8b. Alternate Facility (or General Facility's Phone:   | M SILVER LAKE PROJECT C/D I OR S CERTIFICATION: I hereby declare that the orded, and are in all respects in proper condition for open Name ACKENT FOR (H5)  Import to U.S. onts only): Int of Receipt of Shipment lame  C C C T are  Quantity  rator)  | CEQUIRED PO# 11117 contents of this consignment are or transport according to applicat  Export from U.S.  Signa             | e fully and accurately described about the international and national governments.  Port of entry/exit: Date leaving U.S.: | ve by the proper shipping mental regulations.  C'ADE Partial Rejection lumber: | Month Day Y  Month Day Y  Month Day Y  Full Rejection                           |
| MATERIAL FROM 5. GENERATOR S/OFFERO marked and labeled/placate Senerator's/Offeror's Printed/Ty ROBERT PAPALLO ( 6. International Shipments Transporter signature (for expo 7. Transporter Acknowledgmen transporter 1 Printed/Typed Nat Paramsporter 2 Printed/Typed Nat R. Discrepancy Ra. Discrepancy Indication Special Ra. Discrepancy Indication Special Ra. Discrepancy Indication Special Ra. Discrepancy Indication Special Ra. Discrepancy Indication Special Ra. Discrepancy Indication Special Ra. Signature of Alternate Facility's Phone: Ra. Signature of Alternate Facility | M SILVER LAKE PROJECT. CAD IN  | CECUTED PO# 11117 contents of this consignment are or transport according to applicat  Signa  Export from U.S  Signa  Signa | e fully and accurately described about the international and national governments.  Port of entry/exit: Date leaving U.S.: | ve by the proper shipping mental regulations.  C'ADE Partial Rejection lumber: | Month Day Y  Month Day Y  Month Day Y  Full Rejection                           |
| MATERIAL FROM 5. GENERATOR S/OFFERO marked and labeled/placate Senerator's/Offeror's Printed/Ty ROBERT PAPALLO ( 6. International Shipments Transporter signature (for expo 7. Transporter Acknowledgmen transporter 1 Printed/Typed Nat Paramsporter 2 Printed/Typed Nat R. Discrepancy Ra. Discrepancy Indication Special Ra. Discrepancy Indication Special Ra. Discrepancy Indication Special Ra. Discrepancy Indication Special Ra. Discrepancy Indication Special Ra. Discrepancy Indication Special Ra. Signature of Alternate Facility's Phone: Ra. Signature of Alternate Facility | M SILVER LAKE PROJECT C/D I OR S CERTIFICATION: I hereby declare that the orded, and are in all respects in proper condition for open Name ACKENT FOR (H5)  Import to U.S. onts only): Int of Receipt of Shipment lame  C C C T are  Quantity  rator)  | CECUTED PO# 11117 contents of this consignment are or transport according to applicat  Signa  Export from U.S  Signa  Signa | e fully and accurately described about the international and national governments.  Port of entry/exit: Date leaving U.S.: | ve by the proper shipping mental regulations.  C'ADE Partial Rejection lumber: | Month Day Y  Month Day Y  Month Day Y  Full Rejection                           |



| SHIPPING<br>DOCUMENT<br>5. Generator's Name a                     | 1. Generator ID Number                         | 24033  | 2. Page 1 of 3. Eme | 424.0300                           |                          | 4. Shipping Z            | Z 0      | Tracking Number | 892  |
|---|--|--|---------------------|------------------------------------|--------------------------|--------------------------|----------|-----------------|--|
|   | GENERAL<br>ATTIVIMAT<br>159 PLAST              | ELECTRIC CO<br>T CALACUNE<br>ICS AVE<br>D. MA. 01301 | GENE<br>159 P       | RAL ELEC<br>LASTICS A<br>FIELD, MA | TRIC CO                  |                          | 3)       |                 |  |
| Generator's Phone: ♣7<br>6. Transporter 1 Comp                    | any Name                                       | is, were what  | 2114                | A STATE OF LAND                    | 1 193 2,614              | U.S. EPA ID N            | lumber   |                 |  |
| PAGE ETC.,INC   |  |  |                     |                                    |                          | NYD                      | 9 8      | 6 9 6 9         | 9 4 7  |
| 7. Transporter 2 Comp   | any Name                                       |  |                     |                                    |                          | U.S. EPAID N             | lumber   |                 |  |
|   |  |  |                     |                                    |                          |                          |          |                 |  |
| 8. Designated Facility  | Name and Site Address<br>ADS - GRE<br>635 TOBY | ENTREE LANDFILL<br>ROAD                              |                     |                                    |                          | U.S. EPA ID N            | lumber   |                 |  |
| Facility's Phone: 181   | 4 265-1744 KERSEY P                            | A 15946  |                     |                                    |                          | NOT                      | R        | E Q             | 173  |
|   | Description (including Proper Shipping I       | Name, Hazard Class, ID Number,                       |                     | 10. Conta                          | iners                    | 11. Total                | 12. Unit |                 |  |
| HM and Packing G  | roup (if any))                                 |  |                     | No.                                | Туре                     | Quantity                 | Wt./Vol. | 13. Code        | S  |
| 1. NON RE   | OLLATED MATERIAL                               |  |                     | i                                  | рт                       | 21,250                   | E<br>K   | NOME            | The second secon |
| 2.  |  |  |                     |                                    |                          |                          |          |                 |  |
| 3.  |  |  |                     |                                    |                          |                          |          |                 |  |
|   |  |  |                     |                                    |                          |                          |          |                 |  |
| 4.  |  |  |                     |                                    |                          |                          |          |                 |  |
|   |  |  |                     |                                    |                          |                          |          | -               |  |
| marked and label<br>Generator's/Offeror's P                       |  |  |                     |                                    | itional govern           | nmental regulations.     |          | Month           | Day  |
|   | LLO (AGENT FOR GE)                             |  | THE                 | 21th                               | el da                    | SCADE) FI                | 26       | Z 108           | 05   |
| 6. International Shipm<br>Transporter signature                   | Import to U.S. (for exports only):             |  | Export from U.S.    | Port of e                          | ntry/exit:<br>ving U.S.: |                          |          |                 |  |
| 17. Transporter Acknow<br>Fransporter 1 Printed                   | rledgment of Receipt of Shipment               |  | Signature           |                                    |                          |                          |          | Month           | Day  |
| Transporter 2 Printed/T   | IAM KEZ  | 4  | Signature           | 2-                                 | _                        | - Harris                 |          | IGS<br>Month    | 05 1   |
| 8. Discrepancy  |  |  |                     |                                    |                          |                          |          |                 |  |
| 8a. Discrepancy Indic   | ation Space Quantity                           | Туре   |                     | Residue                            |                          | Partial Reje             | ection   | .□F             | ull Rejection  |
| 8b. Alternate Facility (  | or Generator)                                  |  | 18                  | hipping Docume                     | nt Tracking N            | Number:<br>U.S. EPA ID N | lumber   |                 |  |
| Coellib/o Dhann   |  |  |                     |                                    |                          | 1                        |          |                 |  |
| Facility's Phone: 18c. Signature of Altern 19. Report Management. | nate Facility (or Generator)                   |  |                     |                                    |                          |                          |          | Month           | Day  |
| 19. Report Manageme   | nt Method Codes (i.e., codes for treatm        | ent, disposal, and recycling system                  |                     |                                    |                          |                          |          |                 |  |
| l.  | 2.   |  | 3.                  |                                    |                          | 4.                       |          |                 |  |
|   | Owner or Operator: Certification of rec        | eipt of shipment except as noted i                   |                     |                                    |                          |                          |          |                 |  |
| Printed/Typed Name  |  |  | Signature           |                                    |                          |                          |          | Month           | Day  |
|   |  |  |                     |                                    |                          |                          |          | - 1             |  |

75,783



| D         | HIPPING<br>OCUMENT                                   | 1. Generator ID Number MAD 0 0 2 0 8 1 0 9 3  | 2. Page 1 of                   | 3. Emergency Response Phone (800) 424-9300                  | 4. Shipping  | Z 0                  | Tracking Number 03188     | 33          |
|-----------|--|---|--------------------------------|---|--|----------------------|---------------------------|-------------|
| 11.       | Generator's Name and Mai                             | OENERAL ELECTRIC<br>ATTN MATT CALACO<br>159 PLASTICS AVE  | NE                             | Generator's Site Address (if difference of the PLASTICS AVE | 0  | s)                   |                           |             |
| 6. 7      | Fransporter 1 Company Na<br>GB BTC TMC               | ame   |                                |   | U.S. EPAID N   |                      | 5 9 5 9 E                 | 4 7         |
| 1         | Fransporter 2 Company Na                             | ame   |                                |   | U.S. EPA ID N  | umber                |                           |             |
| 8.0       | Designated Facility Name a                           | and Site Address  |                                |   | U.S. EPA ID N  | lumber               |                           |             |
|           | ,              | ALW - ORBENTRAE LA<br>625 TOBY ROAD<br>KERSEY, PA 15846   | ND-ILI.                        |   |  |                      |                           |             |
|           | cility's Phone: 814 26                               | 25-1744   | In the state of                | 40 0  | NOT  | 100000               | E Q i                     | 7 3         |
| 9a.<br>HM |  | otion (including Proper Shipping Name, Hazard Cl<br>f any))   | ass, ID Number,                | 10. Containers No. Typ                                      |  | 12. Unit<br>Wt./Vol. | 13. Codes                 |             |
| GENERATOR | 1. NON REGUL.  | ATED MATERIAL   |                                | 1 5 7   | 21120  | ж                    | NONE                      | Add no many |
| CEN       | 2.   |   |                                |   |  |                      |                           |             |
| r         | 3.   |   |                                |   |  |                      |                           |             |
| -         | 4.   |   |                                |   | +  |                      |                           |             |
|           | 1  |   |                                |   |  |                      |                           | +           |
| 15.       | GENERATOR S/OFFER                                    | M SILVER LAKE PROJECT C/D RORS CERTIFICATION: I hereby declare that the parded, and are in all respects in proper condition | e contents of this consignment | are fully and accurately described a                        |  | pping name           | , and are classified, pad | kaged,      |
| R/        | DEERT PAPALLO  |   | (38)                           | CODY TOOL   | (ADCHOK) A   | 26                   | E 10810                   | 5 13        |
| ₹ Tra     | International Shipments ansporter signature (for exp | Import to U.S. ports only): ent of Receipt of Shipment  | Export from                    | U.S. Port of entry/exit:<br>Date leaving U.S.:              |  |                      |                           |             |
| Tra       | nsporter Printed/Typed                               | ame/ Nec  | 1/11/1                         | gnature   | 2/   | Va                   | Month Da                  | 5 13        |
| ¥ "       | nsporter 2 Printed/Typed N                           | value   | 1                              | griature  | A STATE OF THE PARTY OF THE PAR |                      | 1 1                       | ly lear     |
|           | Discrepancy  |   |                                |   |  |                      |                           |             |
| 188       | a. Discrepancy Indication S                          | Space Quantity  | Туре                           | Residue   | Partial Reje   | ection               | Full R                    | ejection    |
| 181       | o. Alternate Facility (or Gen                        | nerator)  |                                | Shipping Document Trackin                                   | g Number:<br>U.S. EPA ID N   | lumber               |                           |             |
|           | cility's Phone:<br>c. Signature of Alternate Fa      | scility (or Generator)  |                                |   | _1   |                      | Month D                   | ay Year     |
| 19.       | Report Management Meth                               | nod Codes (i.e., codes for treatment, disposal, and 2.  | d recycling systems) 3.        |   | 4.   |                      |                           |             |
|           |  | r or Operator: Certification of receipt of shipment   | except as noted in Item 18a    |   |  |                      |                           |             |
| Pri       | nted/Typed Name                                      |   | Si                             | ignature  |  |                      | Month Da                  | y Year      |



| SHIPPING<br>DOCUMENT                         | MAD   | or ID Number *   | 5/ 3                   | 2. Page 1 o        | (800) 42                       | 1-9300           |               | 4. Shipping I            | z = 0                | Tracking Nur<br>031 | 889<br>889    | 4      |
|--|---|--|------------------------|--------------------|--------------------------------|------------------|---------------|--------------------------|----------------------|---------------------|---------------|--------|
| 5. Generator's Name  Generator's Phone: 4    |   | GENERAL ELEC<br>ATTW MATT CA<br>159 PLASTICS A<br>PITTEFIELD, MA             | LACONE<br>VE           |                    | GENERA<br>159 PLAS             | L BLEC<br>TICH A | AE<br>LEIC CO | than mailing addres      | s)                   |                     |               | (a)    |
| 6. Transporter 1 Com                         |   | to a since continue y some   | ,                      |                    |                                |                  | 200           | U.S. EPA ID N            | umber                |                     |               | _      |
| PAGE ETC., INC                               |   |  |                        |                    |                                |                  |               | NYD                      | 9 8                  | 5 9 6               | 0 9           | 4 7    |
| 7. Transporter 2 Com                         | pany Name                                   |  |                        |                    |                                |                  |               | U.S. EPA ID N            | umber                |                     |               |        |
|  |   |  |                        |                    |                                |                  |               |                          |                      |                     |               |        |
| 8. Designated Facility                       | Name and Site Addre                         | SS<br>ADS - GREENTR<br>635 TOBY ROAD   |                        |                    |                                |                  |               | U.S. EPA ID N            | umber                |                     |               |        |
| Facility's Phone:                            | 4 265,1744                                  | KERSEY, PA 151   | )de                    |                    |                                |                  |               | NOT                      | R                    | E Q                 | ī             | 7 3    |
| 9a. 9b. U.S. DOT                             | The second second second                    | Proper Shipping Name, H  | azard Class, ID Num    | ber,               |                                | 10. Conta        | Туре          | 11. Total<br>Quantity    | 12. Unit<br>Wt./Vol. | 13.                 | Codes         |        |
| 1. NON RI                                    | AM CETALUD                                  | TERIAL   |                        |                    |                                | 1                | DT            | 21820                    |                      | NUNE                |               |        |
| 2.   |   |  |                        |                    |                                |                  | <i>L</i> .    | 70                       | JA.                  |                     |               |        |
| 3.   |   |  |                        |                    |                                |                  |               |                          |                      |                     |               | ,      |
| 4.   |   |  |                        |                    |                                |                  |               |                          |                      |                     |               |        |
|  |   | onal Information   Nr  |                        |                    |                                |                  |               |                          |                      |                     |               |        |
| 15. GENERATOR S                              | /OFFEROR S CERTIF<br>eled/placarded, and an | R LAKE PROJECT<br>FICATION: I hereby decla<br>e in all respects in proper of | re that the contents o | of this consignmen | nt are fully and a             |                  |               |                          | pping name           | and are class       | ssified, pack |        |
| ROBERT PAPA<br>16. International Ships       | LLO (AGENT I                                |  |                        | 1                  | A TOWN                         | MA               | -             | ANE CO                   | PE                   | EO                  | 80            | 5115   |
| Transporter signature                        | (for exports only):                         | nport to U.S.  |                        | Export from        | u.s.                           | Port of ea       |               |                          |                      |                     |               |        |
| 17. Transporter Acknormansporter 1 Printed/  | Typed Name<br>Poul A270                     |  |                        | 1                  | ignature<br>Koluul<br>ignature | P                | 16            | ٥                        |                      | Mor<br>Mor          | 8/03          | 5/13   |
| 18. Discrepancy                              |   |  |                        |                    |                                |                  |               |                          |                      |                     |               | 1      |
| 18a. Discrepancy Indi                        | cation Space                                | Quantity   | Туре                   |                    | □R                             | esidue           |               | Partial Reje             | ection               |                     | Full Rej      | ection |
| 18b. Alternate Facility                      | (or Generator)                              |  |                        |                    | Shippir                        | ng Documer       | nt Tracking N | lumber:<br>U.S. EPA ID N | umber                |                     |               |        |
| Facility's Phone:                            | mata Easiliby ( Carre                       | rator)   |                        |                    |                                |                  |               | 1                        |                      |                     | onth 5        |        |
| 18c. Signature of Alte                       |   |  |                        |                    |                                |                  |               |                          |                      | Mo                  | onth Da       | y Ye   |
| 19. Report Management                        | ent Method Codes (i.e.                      | , codes for treatment, disp<br>2.  | osal, and recycling s  | ystems)            |                                |                  |               | 4.                       |                      |                     |               |        |
| 20. Designated Facilit<br>Printed/Typed Name | y Owner or Operator:                        | Certification of receipt of s  | nipment except as no   |                    | Signature                      |                  |               |                          |                      | Ma                  | onth Day      | / Yea  |
| . Annous Typod Haine                         |   |  |                        | 1                  | g.maile                        |                  |               |                          |                      | I                   | ann Day       | 102    |



| SHIPPING   | 1. Generator ID Number   | 1   | 2. Page 1 of  | f 3. Emergency Respo   | nse Phone       | 4. Shipping                              | Document             | Tracking Nu    | mber               | 15                                    |
|--|--|---|---|--|-----------------|--|----------------------|----------------|--------------------|---------------------------------------|
| DOCUMENT   | MADOOZOS   | 4093  | 1   | (800) 434-9300   | er væ           |  |                      | 031            | 003                | 10                                    |
| 5. Generator's Name and Generator's Phone: 473   | GENERAL E<br>ATTN MATT<br>159 PLASTIC  | CALACONE<br>SAVE  |   | GENERAL ILE LES PLASTICS  PITTSFIELD M   | A VE            | nan mailing addres                       | s)                   |                |                    |                                       |
| 5. Transporter 1 Company   | Name   |   |   |  |                 | U.S. EPA ID N                            |                      |                | 2 4                | 1 -                                   |
| AGE ETC., INC.  7. Transporter 2 Company   | Name   |   |   |  |                 | U.S. EPA ID N                            |                      | * 5 4          | 3 4                | 4 7                                   |
| r, transporter 2 Company   | Name   |   |   |  |                 | U.S. EFAID N                             | umber                |                |                    |                                       |
| 8. Designated Facility Nar   | me and Site Address  | CONTRACTOR A SECURITY I   |   |  |                 | U.S. EPA ID N                            | lumber               |                |                    | -                                     |
|  | 935 J.C. 43 K. W.C.  | .VALI   |   |  |                 |  |                      |                |                    |                                       |
| Facility's Phone: 814  | 265-1744 KERSEY, PA  | 17070   |   |  |                 | TOK                                      | £.                   | EQ             | 1                  | 1 5                                   |
| HM and Packing Grou  | 4.00   | me, Hazard Class, ID Numb   | oer,  | 10. Cor<br>No.   | tainers<br>Type | 11. Total<br>Quantity                    | 12. Unit<br>Wt./Vol. | 13.            | Codes              | 1                                     |
| 1. NON RECK  | LATED MATERIAL   |   |   | 1  | n r             | 20,050                                   | К                    | HYCM           |                    | -                                     |
| 2.   |  |   |   |  |                 |  |                      |                |                    | -                                     |
| 3.   |  |   |   |  |                 |  |                      |                |                    |                                       |
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|  |  |   |   |  | -               | 4  |                      |                |                    | T                                     |
| TRAILER NUM MATERIAL FI  | MEER GO 48  ROM SIL VER LAKE PROJECTION: Thereby   | declare that the contents of  | ED PO#111   | 171926<br>It are fully and accurately  | described abo   | ve by the proper shi                     |                      |                | l<br>essified, pac | kaged                                 |
| TRAILER NOT  MATERIAL FI  15. GENERATOR S/OFF marked and labeled/ Generator's/Offeror's Print  | ROM SILVER LAKE PRODUCTION: I hereby placarded, and are in all respects in productions.  | (-1) ECT OAD REQUIR declare that the contents of                              | ED PO#111   | 171926<br>It are fully and accurately  | described abo   | ve by the proper shi                     |                      | e, and are cla | nssified, pac      | у                                     |
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| TRAILER NOT  MATERIAL FI  15. GENERATOR S/OFF marked and labeled/ Generator's/Offeror's Print ROBERT PAPALL  16. International Shipment Transporter signature (for 17. Transporter Acknowled   | POM SIL VER LAKE PROTE FEROR S CERTIFICATION: I hereby placarded, and are in all respects in proceedings of the company of the | ECT CAD REQUIR declare that the contents of oper condition for transport      | FD PO#111 fithis consignmen according to app          | that are fully and accurately licable international and onature.   | described abo   | ve by the proper shi                     |                      | e, and are cla | nth Da             | 7                                     |
| MATERIAL FI  MATERIAL FI  15. GENERATOR S/OFF marked and labeled/ Generator's/Offeror's Print ROBERT PAPALL  16. International Shipment Transporter signature (for 17. Transporter Acknowled   | ROM SIL VER LAKE PROJECTION: I hereby placarded, and are in all respects in production of the project of the pr | ECT CAD REQUIR declare that the contents of oper condition for transport      | f this consignment according to app                   | t are fully and accurately licable international and onature  U.S. Port of Date in   | described abo   | ve by the proper shi                     |                      | e, and are cla | nth Da             | y<br>7 <sub>1</sub>                   |
| TRAILER NOT  MATERIAL FI  15. GENERATOR S/OFF marked and labeled/ Generator's/Offeror's Print ROBERT PAPALL  16. International Shipment Transporter signature (for 17. Transporter Acknowled Transporter 1 Printed/Type  | ROM SIL VER LAKE PROJECTION: I hereby placarded, and are in all respects in production of the project of the pr | ECT CAD REQUIR declare that the contents of oper condition for transport      | f this consignment according to app                   | t are fully and accurately licable international and ignature  U.S. Port of Date in the property of the proper | described abo   | ve by the proper shi                     |                      | e, and are cla | nth Da             | y<br>71                               |
| MATERIAL FI  MATERIAL FI  15. GENERATOR S/OFF marked and labeled/ Generator's/Offeror's Print ROBERT PAPALL  16. International Shipment Transporter signature (for 17. Transporter Acknowled Transporter 1 Printed/Type Transporter 2 Printed/Type   | ROM SIL VER LAKE PROD FEROR S CERTIFICATION: I hereby placarded, and are in all respects in produced/Typed Name (AGENT FOR GE) Is Import to U.S. exports only): Igment of Receipt of Shipment and Name  AGENT FOR GE)  | ECT CAD REQUIR declare that the contents of oper condition for transport      | f this consignment according to app                   | t are fully and accurately licable international and licable international and U.S. Port of Date in Ignature Residue   | described abo   | ve by the proper shimental regulations.  | ipping name          | e, and are cla | nth Da             | y<br>Y<br>Y<br>Y                      |
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| 4                 | SHI       | IPPING   | N- 21 S1141-34   | or ID Number  |                            | 2. Page 1 of  | 3. Emergency Respor  | se Phone        | 4. Shipping              | Document             | Tracking Nur | nber      | 0           |
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| П                 | -         | CUMENT   | The Market of the Control of the Con | 0 0 2 0 2 0 0   | 9 3                        | ž             | (1000) 424 9300  | nr nw           | _ L                      | Z U                  | UJI          | 863       | 0           |
| 1                 | Gener     | nerator's Name and Mail  | P4-5338  | GENERAL BLEC<br>ATTN MATT CAI<br>159 PLASTICS A<br>PITTSFIELD, MA | LACONE                     |               | Generator's Site Addre<br>CENERAL ELSO<br>159 PLASTICS A<br>PITTSFIELD M | CTRIC CO<br>AVE |                          |                      |              |           |             |
| П                 |           | insporter 1 Company Na   | me   |   |                            |               |  |                 | U.S. EPA ID N            |                      |              | 4.5       |             |
|                   |           | E ETC., INC<br>Insporter 2 Company Na  | M-   |   |                            |               |  |                 | U.S. EPAID N             |                      | 4 9 6        | g a 6     | 7           |
| П                 | /. Ita    | insporter 2 Company Na   | ne.  |   |                            |               |  |                 | U.S. EFAID N             | umber                |              |           |             |
| Н                 | 8. Des    | signated Facility Name a   | nd Site Addre  | SS  | = 00.1=0.190               | -             |  |                 | U.S. EPA ID N            | umber                |              |           | -           |
|                   |           |  |  | ADS - GREENTRI<br>(35 TORY ROAD                                   |                            |               |  |                 |                          |                      |              |           |             |
| П                 | Facilit   | ty's Phone: wid 26   |  | KERSEY, PA 158  |                            |               |  |                 | LON                      | R.                   | B Q          | 1         | 1 2         |
|                   | 9a.<br>HM | and Packing Group (if  | any))  | Proper Shipping Name, H   | azard Class, ID Number,    |               | 10. Con<br>No.   | Туре            | 11. Total<br>Quantity    | 12. Unit<br>Wt./Vol. | 13.          | Codes     |             |
| GENERATOR         |           | 1. NOW REGULA  | ATED MA  | TERIAL  |                            |               | *  | n T             | 20 720                   | K                    | NONE         |           |             |
| GENE              |           | 2.   |  |   |                            |               |  |                 |                          |                      |              |           |             |
|                   |           | 3.   |  |   |                            |               |  |                 |                          |                      |              |           |             |
|                   |           | 4.   |  |   |                            |               |  |                 |                          |                      |              |           |             |
| П                 |           |  |  |   |                            |               |  |                 |                          |                      |              | -         |             |
| П                 |           | pecial Handling Instruction  |  |   |                            |               |  |                 |                          |                      |              |           |             |
| П                 | Gener     | marked and labeled/place<br>rator's/Offeror's Printed/T  | arded, and are   | FICATION: I hereby declar<br>e in all respects in proper c        |                            |               |  | national govern | mental regulations.      | poing name           | OT Mor       | nth Day   | Year        |
|                   |           | SERT PAPALLO (<br>ternational Shipments  | AGENT I  | OR GE)  | -                          | 1             | total Total  | VE-             | 'AUS FR                  | DE                   | = 0          | 307       | 113         |
| Z                 |           |  | lr   | nport to U.S.   |                            | Export from I |  | entry/exit:     |                          | _                    |              |           |             |
| ×                 |           | sporter signature (for exp<br>ansporter Acknowledgme   |  | of Shipment   |                            |               | Date le  | aving U.S.:     |                          | _                    |              |           | -           |
|                   |           | porter 1 Printed/Typed Na  | ame  | ,   |                            | Sig           | nature   | 211             | er .                     |                      | Mor          | ith Day   | Year        |
| IKANSPORIEK INI   | Transp    | porter 2 Printed/Typed N   | ame (  | onnut   |                            | Sig           | nature   | 1/              |                          |                      | Mor          | Blo Day   | 113<br>Year |
|                   | 18 Di     | screpancy  | -  |   |                            |               |  |                 |                          |                      |              |           |             |
|                   |           | Discrepancy Indication Sp  | pace   | Quantity  | Туре                       |               | Residue  |                 | Partial Reje             | ection               | 1            | Full Reje | ection      |
|                   | 18b. A    | Alternate Facility (or Gene  | erator)  |   |                            |               | Shipping Docum   | ent Tracking N  | lumber:<br>U.S. EPA ID N | umber                |              |           |             |
| K                 | Facilit   | y's Phone:   |  |   |                            |               |  |                 | 1                        |                      |              |           |             |
| SIGNALED FACILITY |           | Signature of Alternate Fac   | cility (or Gene  | rator)  |                            |               |  |                 |                          |                      | Mo           | inth Day  | Year        |
| 5                 | 19. Re    | eport Management Metho   | od Codes (i.e.   | , codes for treatment, dispe                                      | osal, and recycling system | ms)           |  |                 |                          |                      |              |           |             |
| 11                |           |  |  | 2.  |                            | 3.            |  |                 | 4.                       |                      |              |           |             |
| 1                 |           | The second of th | or Operator:   | Certification of receipt of sh                                    | nipment except as noted i  | in Item 18a   |  |                 |                          |                      |              |           |             |
|                   | Printed   | d/Typed Name   |  |   |                            | Sig           | gnature  |                 |                          |                      | Mo           | nth Day   | Year        |
| +                 |           |  |  |   |                            |               |  |                 |                          |                      |              |           |             |



| 4                 | SH        | IPPING  | 1. Generator ID Number   |  | 2. Page 1 of  | 3. Emergency Response  | e Phone        | 4. Shipping I         |                      |                |            | -              |
|-------------------|-----------|---|--|--|---------------|--|----------------|-----------------------|----------------------|----------------|------------|----------------|
|                   | 700       | CUMENT  | MAD0020840   | 9 3                                    | 1             | (800) 424-9300   |                | Z                     |                      | 031            | <u>889</u> |                |
| 1                 | Gene      | enerator's Name and Maili<br>erator's Phone: 413 45   | GENERAL FLECT<br>ATTN MATT CAL<br>159 PLASTICS AV<br>PITTSFIELD, MA                                    | ACONE<br>E                             |               | Generator's Site Address<br>GENERAL ELECT<br>159 PLASTICS AV<br>PITTSFIELD, MA | TRIC CO<br>VB  |                       |                      |                |            |                |
|                   | 6. Tra    | ansporter 1 Company Nar                               | me   |  |               |  |                | U.S. EPA ID N         |                      | 5 5 3          |            |                |
|                   | 1         | EETC,INC  |  |  |               |  |                | NYD                   |                      | 606            | 3 3 4      | 7              |
|                   | 7. 1ra    | ansporter 2 Company Nar                               | пе   |  |               |  |                | U.S. EPA ID N         | umber                |                |            |                |
|                   | 8. De     | esignated Facility Name a                             | nd Site Address  |  |               |  |                | U.S. EPA ID N         | umber                | _              | -          |                |
|                   | ŀ.        |   | KEPRET DA KA   |  |               |  |                | 1.0                   |                      |                |            |                |
| Т                 | Facili    | ty's Phone: 814 25:                                   | 5-1744   |  |               | T a war a  |                | NOT                   | Ŀ                    | E Q            | i          | 2              |
|                   | 9a.<br>HM | and Packing Group (if                                 |  | zard Class, ID Number,                 |               | 10. Contai<br>No.  |                | 11. Total<br>Quaptity | 12. Unit<br>Wt./Vol. | 13. 0          | Codes      |                |
| GENERATOR -       |           | 1. NON REGULA   | ATED MATERIAL  |  |               | i  | D T            | 21,570                | K                    | NONE           |            |                |
| - GENE            |           | 2.  |  |  |               |  |                | 1                     |                      |                |            |                |
| Ì                 |           | 3.  |  |  |               |  |                |                       |                      |                |            |                |
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|                   | 15.       | MATERIAL FROM   | M SILVER LAKE PROJECT OR S CERTIFICATION: I hereby declare arded, and are in all respects in proper co | CVD REQUIRED that the contents of this | consignment   | are fully and accurately de  |                |                       | oping name           | , and are clas |            | eged,<br>Year  |
| 1                 | ROI       | BERT PAPALLO (  | ACENT FOR CEL  |  | 199           | ADD Tools  | MARCI          | ADE) FOR              | GE                   | - 10           | 8 07       | 113            |
| 77                | 16. ln    | iternational Shipments                                | Import to U.S.   |  | Export from U | J.S. Port of er  | ntry/exit:     |                       |                      |                |            |                |
| 2                 | _         | sporter signature (for exp                            |  |  |               | Date leav  | ring U.S.:     |                       |                      |                |            |                |
| 出                 |           | ransporter Acknowledgme<br>sporter 1 Printed/Typed Na |  |  | Sig           | nature' /  |                | -                     |                      | Mon            | th Day     | Year           |
| TRANSPORTER INT'I | )         | sporter 2 Printed/Typed Na                            | 2 ellen sh   |  | H             | nature 31  | (Col)          |                       |                      | Mon            | 810        | 7 13<br>  Year |
| 1                 | 18. D     | iscrepancy  |  |  |               |  |                |                       | -                    |                | -          |                |
|                   | 18a.      | Discrepancy Indication Sp                             | pace Quantity  | Туре                                   |               | Residue  | at Tanakina Ni | Partial Reje          | etion                |                | Full Reje  | ection         |
| TITY.             | 18b.      | Alternate Facility (or Gene                           | erator)  |  |               | Shipping Documer   | nt Tracking Ni | U.S. EPA ID N         | umber                |                |            |                |
| FAC               | Facili    | ty's Phone:   |  |  |               |  |                |                       |                      |                |            |                |
| SIGNATED FACILITY | 18c.      | Signature of Alternate Fac                            | ility (or Generator)   |  |               |  |                |                       |                      | Mo             | nth Day    | Year           |
| DIS               | 19. R     | eport Management Metho                                | od Codes (i.e., codes for treatment, dispo   | sal, and recycling system              | ms)           |  |                | 4.                    |                      |                |            |                |
| 1                 | 20.0      | asignated English Owner                               | or Operator: Cortification of receipt of the   | amont avenue as held I                 | n Itam 10-    |  |                |                       |                      |                |            |                |
|                   |           | ed/Typed Name   | or Operator: Certification of receipt of shi   | prinerit except as noted t             |               | nature   |                |                       | -                    | Moi            | nth Day    | Year           |
| ¥                 |           |   |  |  | 1             |  |                |                       |                      |                | 11         |                |



|               | DOC          | PPING<br>UMENT                                      | MAD                         | or ID Number<br>이 이 의 의 의 의 제 세 (                                | 0 9 3                        | 2. Page 1 of    | 3. Emergency Res<br>(809) 4:24-936                  | 90                                  | Z                      | Z C                  | Tracking Num<br>1031 | 889<br>888    | 8                    |
|---------------|--------------|---|-----------------------------|--|------------------------------|-----------------|---|-------------------------------------|------------------------|----------------------|----------------------|---------------|----------------------|
| 11            | Genera       | erator's Name and Mailin                            | 4-5958                      | GENERAL ELEC<br>ATTN MATT CA<br>159 PLASTICS A<br>PITTSFIELD, MA | LACTINE                      |                 | Generator's Site Ad<br>GENER AL SIL<br>159 PLASTICE | ECTRIC O                            |                        | ss)                  |                      |               |                      |
|               | 5. Tran      | sporter 1 Company Nan                               | ie.                         |  |                              |                 |   |                                     | U.S. EPA ID            |                      |                      |               |                      |
|               |              | I ETC . INC<br>sporter 2 Company Nam                | 10                          |  |                              |                 |   |                                     | U.S. EPA ID            |                      | 6 3 "                | 9 14 1        | 1 7                  |
| П             | , Ilaii      | sporter 2 company ivan                              | 10                          |  |                              |                 |   |                                     | 1                      | Namber               |                      |               |                      |
| lb            | 3. Desi      | gnated Facility Name an                             | d Site Addre                | ess  |                              |                 |   |                                     | U.S. EPA ID            | Number               |                      | -             |                      |
|               |              |   |                             | ADS - GREENIE<br>635 TODY ROAL<br>KERSEY PA 15                   | 0                            |                 |   |                                     | las a m                | r                    | 2 73                 | 9. :          |                      |
| 11            | acility      | 's Phone: 814 265                                   |                             |  |                              |                 | 1   |                                     | NOI                    |                      | EQ                   | å             | 7                    |
|               | a.<br>IM     | and Packing Group (if                               | any))                       | Proper Shipping Name, H  | Hazard Class, ID Numbe       | Ç.              | 10. C<br>No.  | ontainers<br>Type                   |                        | 12. Unit<br>Wt./Vol. | 13.                  | Codes         |                      |
| GENERATOR -   |              | 1. MON REQUIA                                       | am cet                      | TERIAL   |                              |                 |   | DT                                  | 20.580                 | K                    | NOME                 |               |                      |
| GENE          |              | 2.  |                             |  |                              |                 |   |                                     | 1                      |                      |                      |               |                      |
| ŀ             |              | 3.  |                             |  |                              |                 |   |                                     |                        |                      |                      |               |                      |
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|               | 15. <b>G</b> | ENERATOR S/OFFERO<br>arked and labeled/placa        | OR S CERTIF<br>rded, and an | FICATION: I hereby declar<br>e in all respects in proper         | are that the contents of the | nis consignment | are fully and accurate                              |                                     |                        |                      | e, and are cla       | ssified, pack | aged,                |
|               |              | tor's/Offeror's Printed/Ty                          |                             |  |                              | ( LS)           | gature 1  | 14/6                                | M. YE                  | AGE                  | SUT MO               |               |                      |
| 1             |              | FRT PAPALLO ( ernational Shipments                  |                             |  | -                            | _ \DX           | FAN FULL  |                                     | KOADE) H               | ZG                   | = 0                  | 80            | 113                  |
| N             |              |   |                             | mport to U.S.  | Ĺ                            | Export from     |   | of entry/exit: _<br>e leaving U.S.: |                        | -                    |                      |               |                      |
| 2             |              | orter signature (for expo<br>nsporter Acknowledgmer |                             | of Shipment  |                              |                 | Date  | leaving U.S                         |                        | -                    |                      |               |                      |
| 2             | 1            | orter 1 Printed/Typed Na                            | ELC                         | oct  |                              |                 | nature  | My                                  |                        |                      | Moi<br>Mo            | nth Day       | Year<br>1113<br>Year |
| $\overline{}$ | 18. Dis      | crepancy  |                             |  |                              |                 |   |                                     |                        | _                    |                      |               |                      |
| 1 -           | _            | screpancy Indication Sp                             | ace                         | Quantity   | Туре                         |                 | Residue   |                                     | Partiai Re             | jection              |                      | Full Rej      | ection               |
| YII.          | 18b. Al      | ternate Facility (or Gene                           | rator)                      |  |                              |                 | Shipping Doo  | ument Tracking                      | Number:<br>U.S. EPA ID | Number               |                      |               |                      |
| ¥.            | acility      | 's Phone:   |                             |  |                              |                 |   |                                     | 1                      |                      |                      |               |                      |
|               |              | gnature of Alternate Fac                            | lity (or Gene               | erator)  |                              |                 |   |                                     |                        |                      | M                    | onth Da       | y Year               |
| ᇙᅡ            | 19. Rep      | oort Management Metho                               | d Codes (i.e.               | ., codes for treatment, dis                                      | posal, and recycling syst    | ems)            |   |                                     |                        |                      |                      |               |                      |
| 174           |              |   |                             | 2.   |                              | 3.              |   |                                     | 4.                     |                      | -                    |               |                      |
|               | 20 Dos       | signated Easility Owner                             |                             |  |                              |                 |   |                                     |                        |                      |                      |               |                      |
|               | Lu. Des      | signated Facility Owner                             | or Operator:                | Certification of receipt of s                                    | shipment except as note      | in Item 18a     |   |                                     |                        |                      |                      |               |                      |



| SHIPPING  | 1. Generator ID Number   | 2. Page 1 of 3.  | Emergency Response Phone   | 4. Shipping              |                      | Tracking Number |        |
|---|--|--|--|--------------------------|----------------------|-----------------|--------|
| DOCUMENT  | MAD002084093   |  | 00) 434-9300   | Z                        |                      | 031889          | 19     |
| 5. Generator's Name and<br>Generator's Phone: 413                             | GENERAL ELECTRIC CO<br>ATTN MATT CALACUNE<br>159 PLASTICS AVE  | 98<br>150  | erator's Site Address (if different<br>NERAL SLECTRIC CO<br>PLASTICS AVE<br>TSFIELL MA DIZOI |                          | ss)                  |                 |        |
| 5. Transporter 1 Compar   | y Name   |  |  | U.S. EPA ID N            |                      |                 |        |
| AUDETC,INC  |  |  |  |                          |                      | 4 9 6 9 9       | 4 1    |
| , Transporter 2 Compan  | y Name   |  |  | U.S. EPA ID N            | lumber               |                 |        |
| B. Designated Facility Na   | me and Site Address  | 43743 9  |  | U.S. EPA ID N            | lumber               |                 |        |
|   | 635 TOBY ROAD KERSEY PA 15846  | SK Riberha   |  |                          |                      |                 |        |
| Facility's Phone: 814   | 262-1744   |  |  | NOT                      | P.                   | 6 0 1           | 1 1    |
| 9a. 9b. U.S. DOT De<br>and Packing Gro  | scription (including Proper Shipping Name, Hazard Class,<br>up (if any))   | ID Number,   | 10. Containers  No. Type   | 11. Total<br>Quantity    | 12. Unit<br>Wt./Vol. | 13. Codes       |        |
| 1. MON REG  | ULATED MATERIAL  |  | i Di   | 21,880                   | K                    | MANE            |        |
| 2.  |  |  |  |                          | T TY                 |                 |        |
| 3.  |  |  |  |                          |                      |                 |        |
|   |  |  |  |                          |                      |                 |        |
| 4.  |  |  |  |                          |                      |                 |        |
|   |  |  | 11/  |                          | 9                    |                 | +      |
|   | FEROR S CERTIFICATION: I hereby declare that the co<br>/placarded, and are in all respects in proper condition for the<br>ted/Typed Name |  |  |                          |                      | Month Da        | у      |
|   | LO (ACENT FOR GE)  | The  | the Houle  | PAC'ADE                  | HODE                 | E 108 15        | 1      |
| <ol> <li>International Shipmer</li> <li>Transporter signature (for</li> </ol> | import to U.S.   | Export from U.S.   | Port of entry/exit:<br>Date leaving U.S.:  |                          |                      |                 |        |
| 17. Transporter Acknowle  | dgment of Receipt of Shipment  | 8  |  |                          |                      |                 |        |
| Transporter 1 Printed/Typ   | ed Name  | Signatu  | 2  |                          |                      | Month Da        | 7 11   |
| Transporter 2 Printed/Typ   | ed Name  | Signatu  | re   | Witnessel                |                      | Month Da        | -      |
| 18. Discrepancy   |  |  |  |                          |                      |                 |        |
| 18a. Discrepancy Indicat  | on Space Quantity  | Туре   | Residue  | Partial Rej              | ection               | Full Re         | jectio |
| 18b. Alternate Facility (or   | Concertor  |  | Shipping Document Tracking N   | lumber:<br>U.S. EPA ID N | lumber               |                 |        |
| 100. Alternate Pacifity (Of   | Consider   |  |  | U.G. EPAID               | TUITIDE!             |                 |        |
| Facility's Phone:<br>18c. Signature of Alterna                                | e Facility (or Generator)  |  |  |                          |                      | Month D         | av     |
| our organization of Mileting  | o i worky (vi Generator)   |  |  |                          |                      | I I             | ay     |
| 19. Report Management   | Method Codes (i.e., codes for treatment, disposal, and rec   | cycling systems)   |  |                          |                      |                 | _      |
|   | 2.   | 3.   |  | 4.                       |                      |                 |        |
| 20 Design 1 4 5 W. S  | Operator Codification Code   | all and a district of the state |  |                          |                      |                 |        |
| <ol> <li>Designated Facility C</li> <li>Printed/Typed Name</li> </ol>         | wner or Operator: Certification of receipt of shipment exce  | pt as noted in Item 18a<br>Signatu   | re   |                          |                      | Month Da        | ٧      |
| A CONTRACTOR  |  | 1  |  |                          |                      | 1 1             | 1      |



| SHIPPING                                    | 1. Generator ID Number  |   | 2. Page 1 of   | 3. Emerger  | cy Respons          | se Phone      | 4. Shipping            | Document             | Tracking Nu | mber     | 0      |
|---|---|---|--|-------------|---------------------|---------------|------------------------|----------------------|-------------|----------|--------|
| DOCUMENT                                    | MAD09301  | 14093   | *  | (900) 43    |                     | 712 1120      | Z                      |                      | 031         | 831      | IU     |
| 5. Generator's Name a                       | ATIN MAI<br>159 PLAST   | ELECTRIC CO<br>TI CALACONE<br>ICS AVE<br>D, MA. 01301 |  | Generator's | L IILEC<br>STIC'S A | TRIC OC<br>VE | than mailing addre     | ss)                  |             |          |        |
| 6. Transporter 1 Comp                       |   |   |  |             |                     |               | U.S. EPA ID            | Number               |             |          |        |
| AGE BTC, INC                                |   |   |  |             |                     |               | NYD                    |                      | 6 9 6       | g c      | 1 7    |
| . Transporter 2 Comp                        | any Name  |   |  |             |                     |               | U.S. EPA ID            | Number               |             |          |        |
| B. Designated Facility                      | Name and Site Address   |   |  |             | -                   |               | U.S. EPA ID            | Number               |             |          |        |
|   | ADS - GRE<br>635 TORY S                                       |   |  |             |                     |               | YE OF                  |                      |             |          |        |
| acility's Phone: 81                         |   |   | -  |             |                     | -             | NO                     | F                    | E Q         | Ť        | 7 :    |
| 9b. U.S. DOT<br>and Packing C               | Description (including Proper Shipping I<br>iroup (if any))   | Name, Hazard Class, ID Numbe                          | r,   | 1           | 10. Conta           | Type          | 11. Total<br>Quantity  | 12. Unit<br>Wt./Vol. | 13.         | Codes    |        |
| " NON RE                                    | GULATED MATERIAL  |   |  | 1           | t                   | p r           | 20850                  | K                    | NONE        |          |        |
| 2.  |   |   |  |             |                     |               |                        |                      |             |          | -      |
| 3.  |   |   |  |             |                     |               |                        |                      |             | 10       | 19.8   |
|   |   | <b>V</b>  |  |             |                     |               |                        |                      |             |          |        |
| 4.  |   |   |  |             |                     |               |                        |                      |             |          |        |
|   |   | 30  |  |             |                     |               |                        |                      |             |          | -      |
| marked and label<br>Generator's/Offeror's P | ed/placarded, and are in all respects in<br>rinted/Typed Name | proper condition for transport ad                     | Signal Si | nature      | onal and na         | ational gover | nmental regulations    | . Note               | Мо          | nth Day  |        |
| ROBERT PAPA                                 | LLO (AGENT FOR GE)  |   | 1  | int.        | Had                 | 1/A           | CALLS) FF              | DE                   | E h         | ah       | 7 1    |
| 6. International Shipm                      | ents Import to U.S.   |   | Export from  | U.S.        | Port of e           | entry/exit:   |                        |                      |             |          |        |
| Transporter signature                       |   |   |  |             | Date lea            | ving U.S.:    |                        |                      |             |          |        |
| ransporter 1 Printed/T                      | rledgment of Receipt of Shipment<br>viped Name                |   | Sic  | gnature )   |                     | 1             | 1                      |                      | Moi         | nth Day  |        |
| Robert Transporter 2 Printed/               | Paglinzzo   |   |  | gnature     | Ken                 | 19            | 6                      |                      |             | 36       | 1      |
| 8. Discrepancy                              |   |   | 1  |             |                     |               |                        |                      |             | 1_       | 1      |
| 18a, Discrepancy Indic                      | ation Space Quantity  | Туре  |  |             | Residue             | . 5 - 5 - 5   | Partial Re             | jection              |             | Full Re  | ection |
| 18b. Alternate Facility (                   | or Generator)   |   |  | Shipp       | ing Docume          | ent Tracking  | Number:<br>U.S. EPA ID | Number               |             |          |        |
| Facility's Phone:                           |   |   |  |             |                     |               |                        |                      |             |          |        |
|   | nate Facility (or Generator)                                  |   |  |             |                     |               |                        |                      | Me          | onth Da  | y<br>  |
| 19. Report Managemen                        | nt Method Codes (i.e., codes for treatm                       | ent, disposal, and recycling syst                     |  |             |                     |               |                        |                      |             |          |        |
|   | 2.  |   | 3.   |             |                     |               | 4.                     |                      |             |          |        |
| 20 Designated Excitit                       | Owner or Operator: Certification of rec                       | aint of chiamant avecat or note:                      | d in Itom 10a  |             |                     |               |                        |                      |             |          | _      |
| Printed/Typed Name                          | owner or Operator: Certification of rec                       | eipi or snipinent except as noted                     | and the same   | gnature     | -                   | -             |                        |                      | Mo          | onth Day | ,      |
| 3 400 7 700000                              |   |   | 1  |             |                     |               |                        |                      | 1           | 1        | 1      |
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| SHIPPING   | 1. General   | tor ID Number  |   | 2. Page 1 of         | 3. Emergency Response   | Phone         | 4. Shipping         |                | racking Num     |               |       |
|--|--|--|---|----------------------|---|---------------|---------------------|----------------|-----------------|---------------|-------|
| DOCUMENT ;   | MAI  | 0002084  | 093   | 1                    | (800) 424-9300  |               | MA LACOTTO          |                | 031             | 888           | 7     |
| 5. Generator's Name an Generator's Phone: 413  | a C  | CENERAL BLE<br>ATTNMATT C<br>159 PLASTICS<br>PITTSPIELD, L | ALACONE   |                      | Generator's Site Address GENERAL BLECT 159 PLASTICS AT PITTSFIELD, MA | TRIC CO       | Carlotte Control    | ss)            |                 | w.            |       |
| 6. Transporter 1 Compa   |  | 784  | 6.2   |                      |   |               | U.S. EPAID          |                | 75.             | a. 15         |       |
| PAGE BTC.,INC  |  | 1  | 740   | 100                  | 10  |               | A PROPERTY OF       | 100000         | 5 9 6           | 9 9 4         | 401   |
| 7. Transporter 2 Compa   | ny Name  | - (F) - 1  |   |                      |   | ALL           | U.S. EPA ID I       | Number         | 10 W            |               | T.    |
| 8. Designated Facility N   | ame and Site Addr  | ess.   | , J   |                      | 8 1-1   | CIC'S.        | U.S. EPA ID         | Number         |                 | 20.00         | -     |
| Facility's Phone: 814  | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  | 635 TOBY ROV   | <b>v</b>  |                      |   |               | INOT                |                | 8 0             | 1 7           | ,     |
| 9a. 9b. U.S. DOT D   | escription (includin   | g Proper Shipping Name                                     | e, Hazard Class, ID Number                              | er,                  | 10. Contai  |               | 11. Total           | 12. Unit       | 13. 0           |               |       |
| The state of the s | ULATED M   | TEDIAL   |   | _                    | No.   | Туре          | Sugney .            | Wt./Vol.       | NONE            |               |       |
| ē  | VLM1ID RE  | · iakiru   |   |                      | 1   | DT            | 20,35               | S <sub>k</sub> | T-NACE          |               | 10    |
| 2.   | 1  |  | 19  |                      |   |               | P                   |                |                 | <i>0</i>      |       |
|  | Ye   | A  |   |                      |   |               |                     | ý.             | 4, -            |               |       |
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| V  | 1  |  | *   | 2                    |   |               | -                   |                |                 |               | -     |
| 15. GENERATOR S/O  | FROM SILVE   | FICATION: I hereby de                                      | (4-1)<br>CT. C/D REQUERI<br>cleare that the contents of | this consignment a   | re fully and accurately de  |               |                     |                | , and are class | sified, packa | aged  |
| 7  |  | re in all respects in prop                                 | er condition for transport a                            | according to applica | able international and na   | tional govern | nmental regulations |                |                 |               |       |
| Generator's/Offeror's Pri  |  | FOR GE)  | 20  | 12                   | MAT TI  | 0)4           | CANE                | S CE           | SI Mon          | Day           | 51    |
| 16. International Shipme   | nts 🗀  | mport to U.S.  |   | Export from U        | S. Port of e  | ntry/exit     |                     |                | 07              | 05            | #     |
| Transporter signature (fo  | or exports only):  |  |   |                      | Date leav   |               |                     |                |                 |               |       |
| 17. Transporter Acknowle Transporter 1 Printed/Typ   | and the second s | of Shipment  |   | Sign                 | ature 0   |               |                     |                | Mont            | h Day         | 5     |
|  | Sean   | Kaiser   |   | Jugar                | Sean  | Ka            | usan                | i.             | 10              | AIO F         | 7     |
| Transporter 2 Printed/Ty   |  | 1000   |   | Sign                 | nature  |               |                     |                | C Mon           | Say           | 1     |
| 18. Discrepancy  | -16  |  |   |                      |   |               |                     |                | _               |               | _     |
| 18a. Discrepancy Indicat   | ion Space  | Quantity   | Туре  |                      | Residue   |               | Partial Re          | jection        | ],              | Full Reje     | ectio |
|  |  |  |   |                      | Shipping Docume   | nt tracking f | U.S. EPA ID         | Number         |                 |               |       |
| 18b. Alternate Facility (or  | Generator)   |  |   |                      |   |               | 4                   |                |                 |               |       |

3.

20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a Printed/Typed Name

Month

Day

| SHIPPING   | 1. Generator ID Number   |  | The second secon |  |                            | 4. Shipping I   |                      |                 |                              | -              |
|--|--|--|--|--|----------------------------|---|----------------------|-----------------|------------------------------|----------------|
| DOCUMENT   | MADOGIOS   | 4093   |  | 434-9300   | 10 mg                      | Z   | Z                    | <u> 1031</u>    | 888                          | 9              |
| Generator's Name and M   | GENERAL ES<br>ATTN:MATT<br>159 PLASTEC<br>494-5358 PITTSFIELD,   |  | GENE<br>159 P  | tor's Site Address<br>RAL HILBO<br>LASTICE A'<br>IFIBLII, MA   | VE<br>PROC CO              | 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |                      |                 | W                            |                |
| 5. Transporter 1 Company N   | Name   | 36 - No. 1   |  | T Rike   |                            | U.S. EPAID N  |                      | 696             | 9 9                          | 1 7            |
| Transporter 2 Company N  | Name   |  |  | A STATE OF THE STA | 63                         | U.S. EPA ID N   |                      | 11/1            |                              | Ji. Co.        |
| Designated Facility Name   | and Oth Address  | A CONTRACTOR   | Car San  | -1310  | 4                          | U.S. EPA ID N   | A PARTY              | 100             | -                            | -              |
| ), Designateu i aumy mini  | e and Site Address - CREEK<br>635 TOBY RO  | CALL.  |  |  |                            |   | umoei                | i.              |                              | F.             |
| Facility's Phone: #14 2  |  |  | . 0  |  | 1                          | NOT   | A CONTRACTOR         | R Q             | 1                            | 1 5            |
| 9a. 9b. U.S. DOT Descr<br>AM and Packing Group   | cription (including Proper Shipping Na<br>(if any))  | ime, Hazard Class, ID Numb   | Xer,   | 10. Conta  | iners<br>Type              | 11. Total   | 12. Unit<br>Wt./Vol. | 1.3             | Codes                        |                |
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| TRAILER NOTA  MATERIAL FRO  15. GENERATOR S/OFFE marked and labeled/pk  Generator's/Offeror's Printed  ROBERT PAPALLO  16. International Shipments  Transporter signature (for et 17. Transporter Acknowledger Transporter 1 Printed/Typed  Transporter 2 Printed/Typed  18. Discrepancy  18a. Discrepancy Indication  18b. Alternate Facility (or Ge Facility's Phone:  18c. Signature of Alternate F  19. Report Management Met  | ERER D-5713  COM SIZ VER LAKE PROVIDEROR S CERTIFICATION: I hereby acarded, and are in all respects in production of the provider of the provi | ECT. CAD REQUER declare that the contents of roper condition for transport.  Type  | this consignment are fully according to applicable interest according to according | and accurately de ernational and national an | escribed aboutional govern | Partial Reje  | ASSESSION NO.        | Mo Mo           | onth Day  Onth Day  Onth Day | 5 L            |

## ENVIRONMENTAL SERVICES

| 4                          | SH        | HIPPING  | 1. Generator ID Number  | 2.                    | Page 1 of    | 3. Emergency Response  | Phone       | 4. Shipping I           |                      |                |                  |           |
|----------------------------|-----------|--|---|-----------------------|--------------|--|-------------|-------------------------|----------------------|----------------|------------------|-----------|
| П                          |           | CUMENT   | MADOGGGGGG  |                       | 1            | (800) 424-9300   |             | Z                       | Z 0                  | 031            | 889              | 0         |
|                            |           | ienerator's Name and Maili                             | GENERAL ELECTRIC<br>ATTN:MATT CALACO<br>159 PLASTICS AVE  | NE                    |              | Generator's Site Address (<br>OENERAL ELECT<br>159 PLASTICS AV<br>PITTSFIELD, MA | E<br>BIC CO | nan mailing address     | s)                   |                |                  |           |
| П                          |           | ransporter 1 Company Nar                               |   |                       |              |  |             | U.S. EPA ID N           | umber                |                |                  |           |
| П                          | PAC       | JE ETC.,INC  |   |                       |              |  |             | NYD                     | 9 8                  | 5 9 6          | 9 9              | 4 7       |
| 11                         | 7. Tr     | ransporter 2 Company Nan                               | me  |                       |              |  |             | U.S. EPAID N            | umber                |                |                  |           |
| Ш                          | 8 D       | esignated Facility Name ar                             | nd Site Address   |                       | _            |  | _           | U.S. EPA ID N           | imher                |                |                  |           |
|                            |           |  | ADS - GREENTREE LA  | NOFILL                |              |  |             |                         |                      |                |                  |           |
| П                          |           | lity's Phone: 114 26                                   | 5.1744  |                       |              | - T - # 2-13   |             | NOI                     | - 3                  | EQ             | 1                | 7 5       |
| 11                         | 9a.<br>HM | 9b. U.S. DOT Descript<br>and Packing Group (if         | tion (including Proper Shipping Name, Hazard Cla<br>any))   | ass, ID Number,       |              | 10. Contain<br>No.   | Type        | 11. Total<br>Quantity   | 12. Unit<br>Wt./Vol. | 13.            | Codes            |           |
| ATOR -                     | li        | 1. NON REGULA  | ATED MATERIAL   |                       |              |  | DT          | 2158a                   |                      | NONE           |                  |           |
| GENERATOR                  | H         | 2.   |   |                       |              |  | DI          | 047-80                  | K                    |                | 6                |           |
|                            | _         | 3.   |   |                       |              |  |             |                         |                      |                | 152              |           |
|                            |           |  |   |                       |              |  |             |                         |                      | L.             |                  |           |
| П                          |           | 4.   |   |                       |              | - 7  |             |                         |                      |                | 7.5              |           |
| П                          |           |  |   |                       |              |  |             |                         |                      |                |                  |           |
| Ш                          | 14. 8     | Special Handling Instruction                           | ns and Additional Information   |                       |              | DIMENT, AND DEE  |             |                         |                      | 100 10         |                  | -         |
| 1                          |           | MATERIAL FROM  | ER D-5413 + 1) M STLVER LAKE PROJECT, C/D   | REQUIRED.             | PO#1111      | 171925   |             |                         |                      |                |                  |           |
|                            | 15.       |  | DR S CERTIFICATION: I hereby declare that the<br>arded, and are in all respects in proper condition |                       |              |  |             |                         | pping name           | e, and are cla | ssified, pack    | raged,    |
|                            | 174       | erator's/Offeror's Printed/Ty<br>BERT PAPALLO (        |   |                       | Sign         | neture 1   | YAD         | ADE TE                  | ACE                  | OT Moi         | oth Day          | Year      |
| 늗                          | 16 1      | nternational Shipments                                 |   | П                     | xport from U | .s. Polt of ent  |             | HUS) IC                 |                      |                | 76-              | 1112      |
| Z                          | Tran      | nsporter signature (for expo                           | orts only):   |                       | Aport iron o | Date leavin  |             |                         |                      |                | 1                |           |
| 띪                          | 17. T     | ransporter Acknowledgmer<br>sporter 1 Printed/Typed Na |   |                       | Sie          | nature   |             | 1                       |                      | Mor            | th Day           | Van       |
| TRANSPORTER INT'           | Italia    | CA ( ) (   | 1(1(6))   |                       | Sigi         | C-C  | 216         | Lich                    | c.h                  | 1 b            | 1th Day<br>9 2.5 | Year 5113 |
| RAN                        | Trans     | sporter 2 Printed/Typed Na                             | ame   |                       | Sign         | nature   |             |                         |                      | Moi            | nth Day          | Year      |
| 1                          | _         | Discrepancy  |   |                       | -            |  |             |                         |                      | _              | -                | 4         |
|                            | 18a.      | Discrepancy Indication Sp                              | Quantity  | Туре                  |              | Residue  |             | Partial Reje            | ection               |                | Full Rej         | ection    |
| L AI                       | 18b.      | Alternate Facility (or Gene                            | erator)   |                       |              | Shipping Document  | Tracking Nu | umber:<br>U.S. EPA ID N | umber                |                |                  |           |
| ACIL                       |           |  |   |                       |              |  |             | 1                       |                      |                |                  |           |
| <b>PESIGNATED FACILITY</b> |           | ity's Phone:<br>Signature of Alternate Faci            | ility (or Generator)  | *****                 |              |  |             |                         |                      | Mo             | nth Da           | y Year    |
| SIGN                       | 19, R     | Report Management Metho                                | d Codes (i.e., codes for treatment, disposal, and   | recycling systems)    |              |  | -           |                         | -                    |                |                  | 4         |
| DE                         | )         |  | 2.  |                       | 3.           |  |             | 4.                      |                      |                |                  |           |
| 1                          | 00.5      | 77.23  |   |                       |              |  |             |                         |                      |                |                  |           |
|                            |           | Designated Facility Owner of<br>ed/Typed Name          | or Operator: Certification of receipt of shipment e   | except as noted in It |              | nature   |             |                         |                      | Mo             | nth Day          | Year      |
| 1                          |           |  |   |                       | J            |  |             |                         |                      | 1              |                  | .,,,,,    |

| ↑ SHIPPING   | 1. Generator ID Number  | 2, Page 1 of 3. Em                 | ergency Response Phone  | 4. Shipping                                  | Document            | Tracking Number      | 004                |
|--|---|------------------------------------|---|--|---------------------|----------------------|--------------------|
| DOCUMENT   | MAD001084093  |                                    | 0 424 9306  | Z  |                     | 0318                 | 891                |
| 5. Generator's Name an   | CENERAL ELECTRIC CO<br>ATTINMATT CALACONE<br>159 PLASTICS AVE   | GEN<br>159 P                       | stor's Site Address (if different<br>ERAL ELECTRIC CO<br>LARTICS A VE<br>SFIELD, MA 0120) |  | ss)                 | 2,125,5              |                    |
| 6. Transporter 1 Compa   |   |                                    |   | U.S. EPA ID N                                | Number              |                      |                    |
| PAGE ETC., INC   |   |                                    |   | NAD  |                     | 6050                 | 9 4 7              |
| 7, Transporter 2 Compa   |   |                                    |   | U.S. EPA ID N                                | lumber              |                      |                    |
| 8. Designated Facility N   | ame and Site Address Top - GREENTRIE LANDS A35 TOP Y ROAD   | TLL                                |   | U.S. EPA ID N                                |                     |                      |                    |
| Facility's Phone: 114  |   |                                    |   | I C K  | R                   | g Q                  | 1 7 5              |
| 9a. 9b. U.S. DOT D<br>and Packing Gr   | escription (including Proper Shipping Name, Hazard Class, ID<br>oup (if any))   | Number,                            | 10. Containers No. Type   | 11. Total<br>Quantity                        | 12. Unit<br>WL/Vol. | 13. Cod              | es                 |
| 1. NCW REG   | PLATED MATERIAL   |                                    | ) DT  | 19250  | К                   | MUNE                 |                    |
| 2.<br>S.<br>3.   |   |                                    |   |  |                     |                      |                    |
| 4.   | tructions and Additional Information ・ !  |                                    |   |  |                     |                      |                    |
| 15. GENERATOR S/O  | FROM SILVER LAKE PROJECT C/D REC<br>FFEROR'S CERTIFICATION: I hereby declare that the cont<br>d/placarded, and are in all respects in proper condition for tra  | ents of this consignment are fully | and accurately described abo  | ove by the proper sh<br>nmental regulations. | ipping namo         | e, and are classifie | ed, packaged,      |
| *  | LO (AGENT FOR GE)   | Signature                          | Hall area   | S FEE  | CE                  | Month (S)            | Day Year<br> 25 13 |
| 16. International Shipme Transporter signature (f                            | import to U.S.  | Export from U.S.                   | Port of entry/exit:<br>Date leaving U.S.:   |  |                     |                      |                    |
| 17. Transporter Acknowle   | edgment of Receipt of Shipment  |                                    | -1  | -  | 1                   |                      |                    |
| 17. Transporter Acknowled Transporter 1 Printed/Ty Transporter 2 Printed/Ty  | Cadella   | Signature                          |   | X  | *                   | Month<br>ICS         | 25 B               |
| Transporter 2 Printed/Ty   | ped Name  | Signature                          |   |  |                     | Month                | Day Year           |
| 18. Discrepancy  |   |                                    |   |  | _                   |                      |                    |
| 18a. Discrepancy Indica  | tion Space Quantity   | Туре                               | Residue   | Partial Rej                                  | ection              |                      | Full Rejection     |
| 18b. Alternate Facility (o   | r Generator)  |                                    | Shipping Document Tracking I  | U.S. EPA ID N                                | Number              | -                    |                    |
| Facility's Phone:  |   |                                    | -   | 1  |                     |                      |                    |
| 18b. Alternate Facility (o<br>Facility's Phone:<br>18c. Signature of Alterna | te Facility (or Generator)  |                                    |   |  |                     | Month                | Day Year           |
| 10 Report Management   | Method Codes (i.e., codes for treatment, disposal, and recycle)  2.   | oling systems)                     |   | 4.   |                     |                      |                    |
| 20 Designated Section 5  | Number of Consider Conference of the Conference | on noted in them 40c               |   |  | -                   |                      |                    |
| 20. Designated Facility C<br>Printed/Typed Name                              | Owner or Operator: Certification of receipt of shipment except  | as noted in Item 18a<br>Signature  |   |  |                     | Month                | Day Year           |
|  |   |                                    |   |  |                     |                      |                    |

| SHIPPING<br>DOCUMENT  | M A  | erator ID Number   | 093  | 2. Page 1 of<br>1  | 3. Emergency Respon<br>(800) 424-9300  |   | 4. Shipping                               | z $c$               | Tracking Nu<br>1031 | .890    | )2                                      |
|---|--|--|--|--|--|---|---|---------------------|---------------------|---------|---|
| 5. Generator's Name Generator's Phone:4   | 13 494-5358  | GENERAL ELEC<br>ATTN MATT CA<br>159 PLASTICS A   | alacone<br>ave   |  | Generator's Site Address GENERAL ELECT 159 PLASTICS A PITTSFIELD, MA   | TRIC CO<br>VE   |   |                     |                     |         |   |
| 6. Transporter 1 Com  | pany Name  |  | 7  |  |  |   | U.S. EPA ID I                             |                     | 6 9 6               | 9 9     | 4 7                                     |
| 7. Transporter 2 Com  |  |  |  |  |  | -   | U.S. EPA ID I                             |                     |                     |         |   |
| 100   |  |  |  |  |  |   | 1   |                     |                     |         |   |
| Designated Facility   | Name and Site A  | ADS - GREENTS<br>635 TOBY ROAL<br>KERSEY, PA 15  | ш  |  |  |   | U.S. EPA ID I                             |                     | <b>7</b> . 6        |         | 7 6                                     |
| Facility's Phone: 81  |  |  |  |  | 1  |   | TOK                                       | _                   | EQ                  | 1       | 7 5                                     |
| 9a. 9b. U.S. DOT<br>and Packing   | Description (inclu<br>Group (if any))  | uding Proper Shipping Name,  | , Hazard Class, ID Numbe   | er,  | 10. Cont<br>No.  | Type_   | 11. Total<br>Quantity                     | 12. Unit<br>WL/Vol. | 13.                 | Codes   |   |
| 1. NON RE   | GULATED) I   | MATERIAL   |  |  | 1  | DI  | 19580                                     |                     | NONE                |         |   |
| 2.  |  |  |  |  |  |   |   |                     |                     |         |   |
| 3.  |  |  |  |  |  |   |   |                     |                     |         |   |
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| 4.  |  |  |  | 7  |  |   | 10  |                     |                     |         | -                                       |
|   |  |  |  |  |  |   |   |                     |                     |         |   |
| TRAILER MATERIAL  | UMBER_C  | Odditional Information -)- NO DATAB  VER LAKE PROJECT  | 4-1)<br>et. cad require  | ED PO#111  | 171926   |   |   |                     |                     |         |   |
| MATERIAI  15. GENERATOR S marked and labe  Generator's/Offeror's labe   | L FROM SIL- 6/OFFEROR'S CE eled/placarded, an  | VSR LAKE PROJECT RTIFICATION: I hereby decided are in all respects in proper me  | - - !)  T. C/D REQUIRE clare that the contents of i  | ED PO#111 this consignment   | 171926<br>t are fully and accurately   | described abor  | ve by the proper st                       | sipping nam         | e, and are cla      | onth Da | y Year                                  |
| TRAILER 1  MATERIAI  15. GENERATOR S marked and labe  Generator's/Offeror's    ROBERT PAPA  | L FROM SIL- 1/OFFEROR S CE eled/placarded, an Printed/Typed Nar LLLO (AGEN   | VER LAKE PROJECT RETIFICATION: I hereby decided are in all respects in proper me   | - - !)  T. C/D REQUIRE clare that the contents of i  | ED PO# 111 this consignment according to appl  | 171926<br>t are fully and accurately<br>licable international and n  | described aborational govern                          | ve by the proper st                       | sipping nam         | e, and are cla      |         | y Year                                  |
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| SHIPPING<br>DOCUMENT                                     | 1. Generator ID Number MAD0020000000000000000000000000000000000  | 2. Page 1 of 3. En               | nergency Respons<br>0) 424-9300                                | e Phone       | 4. Shipping           |                     | racking Num |           | 3        |
|--|--|----------------------------------|--|---------------|-----------------------|---------------------|-------------|-----------|----------|
| 5. Generator's Name and Generator's Phone: 413           | GENERAL ELECTRIC CO<br>ATTNIMATT CALACONE<br>159 PLASTICS AVE  | 0EN<br>1591                      | ator's Site Address<br>EPAL ELEC<br>PLASTIC'S A'<br>SPIELD, MA | rric co<br>Ve | han mailing addres    |                     |             |           |          |
| 6. Transporter 1 Company<br>PACH FITC., INC              | Name   |                                  |  |               | U.S. EPAID N          |                     | 5 5 6       | g 8 4     | 1 7      |
| 7. Transporter 2 Company                                 | Name   |                                  |  |               | U.S. EPA ID N         | lumber              |             |           |          |
| 8. Designated Facility Nan                               | ne and Site Addresalis _ OPEENTRES LANDFII 635 TOBY ROAD   | ш                                |  |               | U.S. EPA ID N         | Number              |             |           |          |
| Facility's Phone: 314                                    | 265_1744 <b>XERSEY</b> , PA 15846  |                                  |  |               | nor                   | RI                  | 3 Q         | 3 3       | 1 5      |
|  | cription (including Proper Shipping Name, Hazard Class, ID N   | lumber,                          | 10. Conta  | iners<br>Type | 11. Total<br>Quantity | 12. Unit<br>WL/Vol. | 13. 0       | Codes     |          |
| 1. NON REGU  | LATED MATERIAL   |                                  | i  | DI            | 21076                 | ĸ                   | NONE        |           |          |
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| 4.   |  |                                  | +  |               |                       |                     |             |           |          |
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| marked and labeled/p                                     | FEROR'S CERTIFICATION: I hereby declare that the content placarded, and are in all respects in proper condition for transed/Typed Name  C (AGENT FOR GE) |                                  |  | tional govern |                       |                     | Mon Mon     | th Day    |          |
| 16. International Shipment<br>Transporter signature (for | Import to U.S.   | Export from U.S.                 | Port of e  |               | US TOE                |                     |             | 2 6.00    | 2 1~     |
| 17. Transporter Acknowled<br>Transporter 1 Printed/Type  |  | \$Ignature                       | ho3  | ell           | 1                     |                     | Mon         | th Day    | Yea 5/13 |
| Transporter 2 Printed/Type                               | d Name   | Signature                        |  |               | Ū                     |                     | Mon         | th Day    | Yea      |
| 18. Discrepancy<br>18a. Discrepancy Indicatio            | n Space Quantity   | rne.                             | Residue  |               | Partial Rej           | action              | -           | Full Reje | ection   |
|  |  | ,,,,                             | Shipping Docume  | nt Tracking N | umber:                |                     |             |           | reacht   |
| 18b. Alternate Facility (or G                            | Senerator)   |                                  |  |               | U.S. EPA ID N         | Vumber              |             |           |          |
| Facility's Phone:<br>18c. Signature of Alternate         | Facility (or Generator)  |                                  |  | _             | +                     |                     | Moi         | nth Day   | y Ye     |
| Report Management M                                      | ethod Codes (i.e., codes for treatment, disposal, and recyclin   |                                  |  |               | - 12                  |                     |             |           | _        |
|  | 2.   | 3.                               |  |               | 4.                    |                     |             |           |          |
| 20. Designated Facility Ow<br>Printed/Typed Name         | ner or Operator: Certification of receipt of shipment except as  | s noted in Item 18a<br>Signature |  |               |                       |                     | Mor         | nth Day   | Year     |
|  |  | Signature                        |  |               |                       |                     | I           | l Day     | 1        |

| SHIPPING<br>DOCUMENT   | 1. Generator ID Number MADOOS   | 1093                        | 2. Page 1 of | (809) 424-9300   | se Phone                   | 4. Shipping            | Z 0                 | racking Nur<br>031 | 890      | )4      |
|--|---|-----------------------------|--------------|--|----------------------------|------------------------|---------------------|--------------------|----------|---------|
| Generator's Name and Generator's Phone: 413  | Mailing Address GENERAL SI ATTN MATT 159 PLASTIC 494-3358 PITTBFIELD, | CALACONE<br>8 AVE           |              | Generator's Site Address<br>GENERAL ELEC<br>159 PLASTICE A<br>PUPT SETELD MA | VE                         | than mailing addre     | ss)                 |                    |          |         |
| Transporter 1 Company  | Name  |                             | 71           |  |                            | U.S. EPAID             |                     | 9 6                | 9 9      | 4 7     |
| . Transporter 2 Company  | Name  |                             |              |  |                            | U.S. EPA ID I          | Number              |                    |          | -       |
| . Designated Facility Nan  | ne and Site Address DS - GREEN  | TREE LANDELL                | L            |  |                            | U.S. EPA ID I          | Number              |                    |          | -       |
| acility's Phone: 🐉 🗗   | 695 TORY RO   | DAD                         |              |  |                            | INOT                   | R E                 | Q Q                | 1 1      | 7 5     |
|  | cription (including Proper Shipping Na                                | me, Hazard Class, ID Nur    | mber,        | 10. Conta  | ainers                     | 11. Total<br>Quantity  | 12. Unit<br>Wt/Vol. | 13.                | Codes    |         |
|  | LATED MATERIAL  |                             |              | 1  |                            | 20300                  | -                   | NONE               |          |         |
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| 4.   |   |                             |              | -  |                            |                        |                     |                    |          |         |
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| Generator's/Offeror's Printe   | O (AGENT FOR GE)  | oper continuori for Barispe |              |  | DARC                       | ADE E                  | NEE                 | OT Mor             |          | 51      |
| Transporter signature (for   | exports only):  |                             | Export from  |  | entry/exit:<br>aving U.S.: |                        |                     |                    |          |         |
| 7. Transporter Acknowledge<br>transporter 1 Printed/Type<br>transporter 2 Printed/Type | Kittler   |                             | - 1          | gnature  | Ri                         | ble                    | /                   | Mon                | 9/2!     | 51      |
| 8. Discrepancy   |   |                             |              |  |                            |                        |                     |                    | _1_      |         |
| 8a. Discrepancy Indication   | n Space Quantity  | Тур                         | ne e         | Residue  |                            | Partial Re             | ection              | [                  | Full Rej | jection |
| 8b. Alternate Facility (or G   | Generator)  |                             |              | Shipping Docume  | ent Tracking N             | lumber:<br>U.S. EPA ID | Number              |                    | ====     | -       |
| facility's Phone:  |   |                             |              |  |                            | 1                      |                     |                    |          |         |
| 8c. Signature of Alternate   | Facility (or Generator)   |                             |              |  |                            |                        |                     | Mo                 | nth Day  | ay '    |
| Report Management M  | ethod Codes (i.e., codes for treatment                                | t, disposal, and recycling  | systems)     |  |                            | 14.                    |                     |                    |          |         |
|  |   |                             | J.           |  |                            | 7.                     |                     |                    |          |         |
| 20. Designated Facility Ow   |   |                             |              |  |                            |                        |                     |                    |          |         |
| Printed/Typed Name   | ner or Operator. Certification of receip                              | nt of shipment except as r  |              | ignature   |                            |                        |                     | Moi                | nth Day  | y \     |

| ENVIRONMENTA | L SERVICES |
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| Scientific Name and Melling Advances  OENDRAL ELECTRIC CO ATT'N MATT CAL ACKNOW INSPERIOR  OENDRAL ELECTRIC CO INSPERIOR AND OUT OF THE PROPERTY CAL ACKNOW INSPERIOR  OENDRAL ELECTRIC CO INSPERIOR AND OUT OF THE PROPERTY CAL ACKNOW INSPERIOR  OENDRAL ELECTRIC CO INSPERIOR AND OUT OF THE PROPERTY CAL ACKNOW INSPERIOR CALL ACKNOW INSPERIOR  | DOCUMENT   | 1. Generator ID Number MAD 0 0 3 0 8 4 0   |   | Page 1 of 3. Emergen (800) 42 |          | e Phone                | 4. Shipping C                   |         | racking Nun     |  | 5                    |
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| US ERA District.  N Y D 9 S 6 9 6 9 9 9 4 7  Triansporter 2 Company Name  US ERA District.  N Y D 9 S 6 9 6 9 9 9 9 4 7  Triansporter 2 Company Name  US ERA District.  Sat TCB Y KCAD  Sat TCB Y KCAD  Sat TCB Y KCAD  Sat TCB Y KCAD  Sat US DOT Description floating Proper Stopping Name, Hazard Class, D Number.  11. Total 12. Use!  1 N O T R R Q 1 7 3  3 SU US DOT Description floating Proper Stopping Name, Hazard Class, D Number.  1 N N REGULLATED MATERIAL  1 D T 20 90 K  1 N N N REGULLATED MATERIAL  1 D T 20 90 K  1 Septial Handling industrions and Additional Information + NCN REGULLATED SOIL, SEDDMENT, AND DESCRUS, APPROVAL NUMBER 7:58949  TRAILER NUMBER D - 7 (23) 2 + 1)  MATERIAL PROMS SU VER LAKE PROJECT: CD REQUIRED POP 111171925  15. GENERATOR SOFFROR'S CERTIFICATION: Thereby doctors that the continue of this consignment are high and accuratily described above by the proper chipping name, and are classified, packaged, market and bioinforcer Perindicity year Name  Severation Clinical Symptoms   Import to US.  Description of Name and Signment   Import to US.  Signature   Partial Rejection   Partial Rejection   Partial Rejection   Partial Rejection   Partial Rejection   Partial Rejection   Import to US.  Signature   Partial Rejection   Partial Rejection   Import to US.  Signature   Partial Rejection   Import to US.  Signature   Partial Rejection   Import to US.  Signature   Partial Rejection    1  | GENERAL ELECTI<br>ATTN:MATT CAL<br>159 PLASTICS AV   | ACONE<br>E                              | GENERA<br>159 PLAS            | LELECT   | TRIC CO                | ar mailing address              |         |                 |  |                      |
| PAGE ETC., INC    N Y D 9  | Generator's Phone: 413   | 94L5358 PLTTSFEELD, MA.  | 01201                                   | PITISPIE                      | I.U. MA  | 01.501                 | II S EPA ID N                   | umbar   | -               | 72   | _                    |
| 8. Designated Facility Name and Site Address_NB_CRESENTRES_1_ANDER 1_  63. TCRY RCAD  REPSETY, PA 15.046   | PAGE ETC., INC   | ine /  |   |                               |          |                        |                                 |         | 9 6             | 9 9 4  | 7                    |
| Facility's Proces: \$14.3 \$5.1748   XERSETY, PA. 1.5465   N. O.T. K. E. Q. I. 7. 3  So. U.S. OT Description floratiding Proper Shipping Name, Hazard Class, ID Number, and Packing Group (f. any).  I. NCN REGUL A TEID MATERIAL  I. D. T. 20190 K. NNNE  14. Special Handling Instructions and Additional Information: 1. NCN REGULATED SCIL. SEDDLESHT, AND DEBRUS, APPROVAL NUMBER 13. Codes  NNNE  14. Special Handling Instructions and Additional Information: 1. NCN REGULATED SCIL. SEDDLESHT, AND DEBRUS, APPROVAL NUMBER 13.5849  TRAILER NUMBER D 7032 4 1)  MATERIAL PROM SILVER LAKE PROJECT. CID REQUIRED POR 111171925  15. GENERATOR SIGNERANGE CERTIFICATION: Thereby declare that the contents of this consignment law fully and accusably described above by the proper shipping nome, and are slassified, packaged, marked and labeled phistoard typed Name and are in all respects in proper condition for transport according to applicable informational Stignment  NORTH PARALLO (AGENT) FOR CEP  NORTH PARALLO (AGENT) FOR CEP  NORTH PROPER CENTRAL TO A CONTROL OF THE CONTROL OF   | 7. Transporter 2 Company Na  | ame  |   |                               | -        |                        | U.S. EPA ID N                   | umber   |                 |  | -                    |
| Facility's Proces: \$14.3 \$5.1748   XERSETY, PA. 1.5465   N. O.T. K. E. Q. I. 7. 3  So. U.S. OT Description floratiding Proper Shipping Name, Hazard Class, ID Number, and Packing Group (f. any).  I. NCN REGUL A TEID MATERIAL  I. D. T. 20190 K. NNNE  14. Special Handling Instructions and Additional Information: 1. NCN REGULATED SCIL. SEDDLESHT, AND DEBRUS, APPROVAL NUMBER 13. Codes  NNNE  14. Special Handling Instructions and Additional Information: 1. NCN REGULATED SCIL. SEDDLESHT, AND DEBRUS, APPROVAL NUMBER 13.5849  TRAILER NUMBER D 7032 4 1)  MATERIAL PROM SILVER LAKE PROJECT. CID REQUIRED POR 111171925  15. GENERATOR SIGNERANGE CERTIFICATION: Thereby declare that the contents of this consignment law fully and accusably described above by the proper shipping nome, and are slassified, packaged, marked and labeled phistoard typed Name and are in all respects in proper condition for transport according to applicable informational Stignment  NORTH PARALLO (AGENT) FOR CEP  NORTH PARALLO (AGENT) FOR CEP  NORTH PROPER CENTRAL TO A CONTROL OF THE CONTROL OF   |  |  |   |                               |          |                        |                                 |         |                 |  |                      |
| Facility Process 11 of Management Method Cides (i.e., codes for Invasional Properties (Spraule)   Facility Process   Facility   | 8. Designated Facility Name  | 635 TORY ROAD  |   |                               |          |                        | U.S. EPA ID N                   |         |                 |  |                      |
| 1. NON REGUL ATED MATERIAL  1. NON REGUL ATED MATERIAL  1. D. T. 20190 K.  1. NON-REGUL ATED MATERIAL  1. D. T. 20190 K.  1. D. | Facility's Phone: \$14 24  | IS-1744 REMERT, PA 1884  | 40                                      |                               |          |                        | NOT                             | RE      | 3 5             | 1 7  | 3                    |
| 1 D T 20190 K  3.  3.  3.  4. Special Harding Instructions and Additional Information NCN-REGULATED SCH_SEDIMENT, AND DEDRUS. APPROVAL NUMBER 258949  TRAILER NUMBER   | HM and Packing Group (   | if any))   | azard Class, ID Number,                 |                               |          | _                      |                                 | 3.00    | 13. (           | Codes  |                      |
| 14.  | 1. NON REGUL.  | ATEO MATERIAL  |   |                               | 1        | DT                     | 20190                           |         | NONE            |  |                      |
| 14. Special Handling Instructions and Additional Information     NON-REGULATED SOIL SEDIMENT, AND DEBRIS. APPROVAL NUMBER 258349   | 2.   |  |   |                               |          |                        | 1                               |         |                 |  |                      |
| TRAILER NUMBER D - 7 C332 (1-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED. PC# 11171925  15. GENERATOR SIOFFEROR'S CERTIFICATION: Thereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.  Generator's Offeror's Printed Typed Name  ROBERT PAPALLO (AGENT FOR CRE)  16. International Shipments   Import to U.S.   Export from U.S.   Port of entrylexit:   Date leaving U.S.:  17. Transporter algorithm of Reacipt of Shipment  17. Transporter algorithm of Reacipt of Shipment  17. Transporter Printed Typed Name  Robert Au   A 2 70   Signature  North Day  18. Discrepancy Indication Space   Quantity   Type   Residue   Partial Rejection   Full Rejection   Full Rejection   Import to U.S.   Partial Rejection   Partial Rejection   Day  18. Alternate Facility or Generator)  18. Signature of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  | 3.   |  |   |                               |          |                        | -                               |         |                 |  |                      |
| TRAILER NUMBER   -7   -7   -7   -7   -7   -7   -7   -  |  |  |   |                               | -        |                        |                                 |         |                 |  |                      |
| TRAILER NUMBER   - 7632   - 1)  MATERIAL FROM SILVER LAKE PROJECT. ON REQUIRED. PO#11171925  15. GENERATOR S/OFFEROR'S CERTIFICATION: Thereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.  Generator's/Offeror's Printed/Typed Name  ROBERT FAPALLO (AGENT FOR VE)  Inhorit to U.S.   Desport from U.S.   Port of entrylexit:   Date leaving U.S.:  Transporter signature (for exports only):  Transporter Sprinted/Typed Name  ROBERT FAPALLO (AGENT FOR VE)  Inhorit to U.S.   Date leaving U.S.:  Transporter 1 Printed/Typed Name  Signature  Month Day  Signature  Month Day  Signature  Month Day  Signature  Month Day  Signature  World Rejection   Full Rejection   Full Rejection   Prul Rejection   Prul Rejection   Prul Rejection   Day  Signature   Month Day  Month Day  Signature of Alternate Facility (or Generator)  Month Day  Signature of Alternate Facility (or Generator)  Month Day  Day  Day  Day  Day  Day  Day  Day   | 4.   |  |   |                               |          |                        |                                 |         |                 |  |                      |
| TRAILER NUMBER D - 7 C332 (1-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED. PC# 11171925  15. GENERATOR SIOFFEROR'S CERTIFICATION: Thereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.  Generator's Offeror's Printed Typed Name  ROBERT PAPALLO (AGENT FOR CRE)  16. International Shipments   Import to U.S.   Export from U.S.   Port of entrylexit:   Date leaving U.S.:  17. Transporter algorithm of Reacipt of Shipment  17. Transporter algorithm of Reacipt of Shipment  17. Transporter Printed Typed Name  Robert Au   A 2 70   Signature  North Day  18. Discrepancy Indication Space   Quantity   Type   Residue   Partial Rejection   Full Rejection   Full Rejection   Import to U.S.   Partial Rejection   Partial Rejection   Day  18. Alternate Facility or Generator)  18. Signature of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  18. Description of Alternate Facility (or Generator)  |  |  |   |                               |          |                        |                                 |         |                 | 1  |                      |
| 16. International Shipments   Import to U.S.   Export from U.S.   Port of entrylexit:   Transporter signature (for exports only):   Date leaving U.S.:  17. Transporter Acknowledgment of Receipt of Shipment Transporter 1 Printed Typed Name   Signature   Month Day   Signature   Partial Rejection   Full Rejection   Shipping Document Tracking Number:  18b. Alternate Fability (or Generator)   U.S. EPA ID Number   Signature of Alternate Facility (or Generator)   Month Day   M | marked and labeled/pla   | carded, and are in all respects in proper co   |   |                               |          | ational government     | nental regulations.             | AGAI    |                 |  | ageo,                |
| 17. Transporter Acknowledgment of Receipt of Shipment Transporter 1 Printed/Typed Name    Robert   Ack   270   Transporter 2 Printed/Typed Name   Signature   Shipping Document Tracking Number:    18b. Alternate Fability (or Generator)   U.S. EPAID Number   Signature of Alternate Fability (or Generator)   Month   Day   Signature of Alternate Fability (or Generator)   Signature   Sign |  |  |   |                               |          | VOW                    | The little                      | CD      | · M             |  |                      |
| Transporter 2 Printed/Typed Name  Signature  Signature  Signature  Signature  Signature  Nonth Day  18. Discrepancy  18a. Discrepancy Indication Space Quantity  Type Residue Partial Rejection  Shipping Document Tracking Number:  U.S. EPA ID Number  Facility's Phone:  18c. Signature of Alternate Facility (or Generator)  Month Day  Aca. Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  2. 3. 4.   |  | Import to U.S.   | Exp                                     | port from U.S.                |          | entry/exit:            | ADE FO                          | C       | <u> </u>        |  | 5 13                 |
| 18a. Discrepancy Indication Space Quantity Type Residue Partial Rejection Full Rejection  Shipping Document Tracking Number:  18b. Alternate Facility (or Generator)  Facility's Phone:  18c. Signature of Alternate Facility (or Generator)  Month Day  And Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  2. 3. 4.   | Transporter signature (for ex<br>17. Transporter Acknowledgm   | Import to U.S. ports only): ent of Receipt of Shipment   | Ex                                      |                               |          | entry/exit:            | )<br>NDE HO                     | ZG      |                 | 92   | 5/13                 |
| 18a. Discrepancy Indication Space Quantity Type Residue Partial Rejection Full Rejection  Shipping Document Tracking Number:  18b. Alternate Facility (or Generator)  Facility's Phone:  18c. Signature of Alternate Facility (or Generator)  Month Day  And Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  2. 3. 4.   | Transporter signature (for ex<br>17. Transporter Acknowledgm<br>Transporter 1 Printed/Typed 1  | Import to U.S. ports only): ent of Receipt of Shipment Name  | □ Exp                                   | Signature                     |          | entry/exit:            | ADS FO                          | S       | Mor             | 9 Z  | 5/13<br>5/13         |
| 18b. Alternate Facility (or Generator)  Facility's Phone:  18c. Signature of Alternate Facility (or Generator)  Month Day  A Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  2. 3. 4.  20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a  | Transporter signature (for ex 17. Transporter Acknowledgm Transporter 1 Printed/Typed 1 Transporter 2 Printed/Typed 1  | Import to U.S. ports only): ent of Receipt of Shipment Name  | □ Exp                                   | Signature                     |          | entry/exit:            | ADS FO                          | e e     | Mor             | 9 Z  | 5/13                 |
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| SHIPPING I. Generator ID Number 2. Page 1 of DOCUMENT 2. Page 1 of 1. Series 1 of | (200) 434-9300   |                                 | 4. Shipping I                               | Z C                  | Tracking Nur<br>031 | 890           | )6                  |
|--|--|---------------------------------|---|----------------------|---------------------|---------------|---------------------|
| 5. Generator's Name and Mailing Address OFMERAL BLECTRIC CO ATTM MATT CALACONE 159 PLASTICS AVE  | Generator's Site Addr<br>GENERAL HLE<br>159 PLASTICS   | AVE                             | han mailing addres                          | s)                   |                     |               |                     |
| Generator's Phone: 413 494-5358 PITTSFIELD, MA. 01201  | PITTSFIELD, N  | IA OLZOI                        |   |                      |                     |               |                     |
| 5. Transporter 1 Company Name ACIN ETC., INC   |  |                                 | U.S. EPAID N                                |                      |                     |               |                     |
| Transporter 2 Company Name   |  |                                 | U.S. EPA ID N                               |                      | 696                 | 9 9           | 4                   |
|  |  |                                 | U.S. EPAID N                                | umber                | •                   |               |                     |
| Designated Facility Name and Site Address DIB - GREENTRIE LANDIFTIL 635 TOBY ROAD  |  |                                 | U.S. EPA ID N                               | lumber               |                     |               |                     |
| acility's Phone: 814 265-1744 KERSEY, PA 15846   |  |                                 | NOT   | R                    | E Q"                | 1             | 7                   |
| a. 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))  | 10. Co<br>No.  | ntainers<br>Type                | 11. Total<br>Quantity                       | 12. Unit<br>Wt./Vol. | 13.                 | Codes         | 1)                  |
| 1. NOW REQULATED MATERIAL  | 110.   | 1,100                           | STANTE                                      |                      | NONE                |               | T                   |
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|  |  |                                 |   |                      | 1                   |               | -                   |
| TRAILER NUMBER 9474 (-1)   | 9  | DEBRIS AP                       | BEOMT MO                                    | MER                  | 258849              |               | 1_                  |
| TRAILER NUMBER 9474 (-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED. PO# 111   | 171926<br>are fully and accurately   | y described abov                | ve by the proper shi                        | ipping nam           |                     | ssified, pack | cage                |
| TRAILER NUMBER 9474 (-1)  MATERIAL FROM SILVER LAKE PROJECT. CD REQUIRED PO#11:  GENERATOR S/OFFEROR S CERTIFICATION; I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli  | 171925<br>are fully and accurately<br>icable international and   | y described above               | ve by the proper shi                        | ipping nam           |                     |               |                     |
| TRAILER NURARER 947 4 1-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED. PO# 111  5. GENERATOR S/OFFEROR S CERTIFICATION; I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to applienerator's/Offeror's Printed/Typed Name   | 171925<br>are fully and accurately<br>icable international and   | described above national govern | ve by the proper shi<br>mental regulations. | ipping nam           | e, and are clas     | ith Day       |                     |
| TRAILER NUMBER  9474 (-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED PO#111  GENERATOR S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to applienerator's/Offeror's Printed/Typed Name  OBERT PAPALLO (AGENT FOR OE)   | 171926<br>are fully and accurately<br>icable international and   | described above national govern | ve by the proper shi                        | ipping nam           | e, and are clas     | ith Day       |                     |
| TRAILER NUMBER  947 4 1-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED. PO# 111  5. GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli enerator's/Offeror's Printed/Typed Name  OBERT PAPALLO (AGENT FOR OE)  International Shipments   | 171926 are fully and accurately icable international and mature.  U.S. Port of   | described above national govern | ve by the proper shi<br>mental regulations. | ipping nam           | e, and are clas     | ith Day       |                     |
| TRAILER NUMBER  947 4 1-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED. PO# 111  5. GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli enerator's/Offeror's Printed/Typed Name  OBERT PAPALLO (AGENT FOR OE)  International Shipments   | 171926 are fully and accurately icable international and mature.  U.S. Port of Date I  | described above national govern | ve by the proper shi<br>mental regulations. | ipping nam           | e, and are clas     | ) 12          | 7.1                 |
| TRAILER NURARER 947 4 1-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED PO#111  GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to applicate and labeled/placarded, and are in all respects in proper condition for transport according to applicate and labeled/placarded, and are in all respects in proper condition for transport according to applicate application of the property of  | are fully and accurately icable international and mature.  U.S. Port of Date I   | y described abornational govern | ve by the proper shi<br>mental regulations. | ipping nam           | e, and are class    | th Day        | 7.1                 |
| TRAILER NURARER 947 4 1-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED PO#111  GENERATOR S/OFFEROR'S CERTIFICATION: 1 hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and are in all respects in proper condition for transport according to applience and labeled/placarded, and labeled/placarded, and labeled/placarded, and labeled/placarded, and | transport of the control of the cont | y described abornational govern | ve by the proper shi<br>mental regulations. | ipping nam           | e, and are clas     | th Day 12     | 7.1                 |
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| TRAILER NUMBER  947 4 1-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED. PO# 111  5. GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli enerator's/Offeror's Printed/Typed Name  OBERT PAPALLO (AGENT FOR OE)  International Shipments   | transport of the control of the cont | y described abornational govern | ve by the proper shi<br>mental regulations. | ipping nam           | e, and are class    | th Day 12     | 7.1                 |
| TRAILER NUMBER  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED. PON 111  GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli enerator's/Offeror's Printed/Typed Name  OBERT PAPALLO (AGENT FOR GE)  International Shipments Import to U.S. Export from U.S. ransporter signature (for exports only):  Transporter Acknowledgment of Receipt of Shipment ansporter 1 Printed/Typed Name  Signal Sporter 2 Printed/Typed Name  Signal Sporter 2 Printed/Typed Name  Signal Sporter 2 Printed/Typed Name  | transport of the control of the cont | y described abornational govern | ve by the proper shi<br>mental regulations. | ipping nam           | e, and are class    | th Day 12     | 71                  |
| TRAILER NURAMER 947 4 1-1)  MATERIAL FROM STLVER LAKE PROJECT. C/D REQUIRED PO# 111  5. GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli enerator's/Offeror's Printed/Typed Name  OBERT PAPALLO (AGENT FOR GE)  5. International Shipments   | 171926 tare fully and accurately icable international and mature  U.S. Port of Date I gnature  Residue   | y described abornational govern | Partial Reje                                | ection               | e, and are class    | th Day        | 71                  |
| TRAILER NURAMER  947 4 1-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED PO# 111  5. GENERATOR S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli enerator's/Offeror's Printed/Typed Name  COBERT PAPALLO (AGENT FOR GE)  6. International Shipments   | 171926 tare fully and accurately icable international and mature  U.S. Port of Date I gnature  Residue   | described above national govern | ve by the proper shimental regulations.     | ection               | e, and are class    | th Day        | 71                  |
| TRAILER NURABLER  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED. PO# 111  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED. PO# 111  GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli enerator's/Offeror's Printed/Typed Name  COBHRT PAPALLO (AGENT FOR OE)  International Shipments   | 171926 tare fully and accurately icable international and mature  U.S. Port of Date I gnature  Residue   | described above national govern | Partial Reje                                | ection               | Mon                 | th Day        | 7 1<br>7 1<br>7 - 1 |
| TRAILER NUMBER  474  1-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED. PO# 111  5. GENERATOR S/OFFEROR S CERTIFICATION: 1 hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli denerator's/Offeror's Printed/Typed Name  **COBHRT PAPALLO (AGENT FOR OE)  6. International Shipments   | 171926 tare fully and accurately icable international and mature  U.S. Port of Date I gnature  Residue   | described above national govern | Partial Reje                                | ection               | e, and are class    | th Day        | 7 1<br>7 1<br>7 - 1 |
| TRAILER NUMBER  9474 1 1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED PON 11:  6. GENERATOR S/OFFEROR S CERTIFICATION; I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to application of transport according to application of transport according to application of transporter signature (for exports only):  7. Transporter Acknowledgment of Receipt of Shipment ransporter 1 Printed/Typed Name  Signature 2 Printed/Typed Name  Signature 3 Printed/Typed Name  Signature 4 Printed/Typed Name  Signature 5 Printed/Typed Name  Signature 6 Alternate Facility (or Generator)  | 171926 tare fully and accurately icable international and mature  U.S. Port of Date I gnature  Residue   | described above national govern | Partial Reje                                | ection               | Mon                 | th Day        | 71<br>71<br>7-1     |
| TRAILER NUMBER  MATERIAL FROM SILVER LAKE PROJECT C/D REQUIRED POW 111  5. GENERATOR S/OFFEROR'S CERTIFICATION: 1 hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli senerator's/Offeror's Printed/Typed Name  COBERT PAPALLO (AGENT FOR OH)  6. International Shipments  | 171926 tare fully and accurately icable international and mature  U.S. Port of Date I gnature  Residue   | described above national govern | Partial Rejeumber:                          | ection               | Mon                 | th Day        | 71<br>71<br>7-1-    |
| TRAILER NUMBER  9474  1-1)  MATERIAL FROM SILVER LAKE PROJECT. C/D REQUIRED POW 11:  5. GENERATOR S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli interactions of the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli interactions of the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli interactions of the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli interactions of the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli interactions of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli interactions of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli interactions of this consignment marked and labeled/placarded, and are in all respects in proper condition for transport according to appli interactions of this consignment marked and labeled/placarded, and are in all respects in proper condition for transporter that the contents of this consignment marked and labeled/placarded, and are in all respects in proper condition for transporter condition for transpor | 171926 tare fully and accurately icable international and mature  U.S. Port of Date I gnature  Residue   | described above national govern | Partial Reje                                | ection               | Mon                 | th Day        | 71<br>71<br>7-1-    |



| D           | HIPPING 1. Generator ID Number OCUMENT MAID 0 0 2 0 8 4 0 7 3  Generator's Name and Mailing Address |  | 24 9300                         |  | 4. Shipping C          | z 0        | racking Nun    |           | 3      |
|-------------|---|--|---------------------------------|--|------------------------|------------|----------------|-----------|--------|
|             | GENERAL ELECTRIC CO<br>ATTN MATT CALACONE<br>159 PLASTICS AVE                                       | GENER<br>159 PLA                                     | AL ELECT<br>STICS AT<br>ELD, MA | rric co<br>Æ   | an mailing address     | 5)         |                |           |        |
| Ge<br>6.    | enerator's Phone: 413 494-5358 PITTSFIELD, I.A. 01201 Transporter 1 Company Name                    |  | 1000 (10, 10)                   | A65 6574   | U.S. EPA ID N          | umber      |                | _         |        |
| P/          | AGE ETC.,INC  |  |                                 |  | NYD                    | 9 8        | 5 9 6          | 9 9       | 4 7    |
| 7.1         | Transporter 2 Company Name  |  |                                 |  | U.S. EPA ID N          | umber      |                |           |        |
| 8.1         | Designated Facility Name and Site Address ALNS - CHCENTREE LANDFILL                                 |  |                                 |  | U.S. EPA ID N          | umber      |                | -         |        |
| Fac         | cilitys Phone: 814 265-1744 KERSEY, PA 15846  |  |                                 | χ.   | INOT                   | R          | E Q            | t         | 7 5    |
| 9a.         | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number,                  |  | 10. Contain                     |  | 11. Total              | 12. Unit   |                | Codes     |        |
| HM          | 1. NCN REGULATED MATERIAL   |  | No.                             | Туре   | Quantity               | Wt_Vol.    | NONE           |           | 1      |
| ATOR        |   |  | 1                               | Dr ]   | 21416                  | ĸ          | 1,22,00        |           |        |
| GENERATOR   | 2.  |  |                                 | 1  | HAR                    | (122       |                |           |        |
| ĭ           |   |  |                                 |  |                        |            | 1              |           |        |
|             | 3.  |  |                                 |  |                        |            |                |           |        |
|             | 14  |  |                                 |  |                        |            |                |           |        |
| П           |   |  |                                 |  |                        |            |                |           |        |
| L           | . Special Handling Instructions and Additional Information BR Service Contracted by                 |  |                                 |  |                        |            |                |           |        |
| 15.<br>Ger  | marked and labeled/placarded, and are in all respects in proper condition for transport accord      | onsignment are fully and ling to applicable internal | accurately desional and nation  | onal governm   | ental regulations.     | pping name | , and are clas |           | Year   |
| *           | OBERT PARALLO (AGENT FOR OE)  International Shipments   | (John )  | male                            | DECADA   | 5) FOR                 | Œ          | p              | 927       | 113    |
|             | ansporter signature (for exports only):   | xport from U.S.                                      | Port of en                      | of the later of th |                        |            |                |           |        |
| 17.         | Transporter Acknowledgment of Receipt of Shipment  insporter 1 Printed/Typed Name                   | Signature  | -1                              |  | 1                      |            | Mon            | th Day    | Year   |
| 2           | Gary Chuich   |  | 4/0                             | in (   | Iren                   | b)         | Ø              | 9127      | 1113   |
| Train Train | Insporter 2 Printed/Typed Name  | Signature  |                                 |  |                        |            | Mon            | ith Day   | Year   |
|             | Discrepancy   |  |                                 |  |                        |            |                |           | 1      |
| 18a         | a. Discrepancy Indication Space Quantity Type   |  | Residue                         |  | Partial Reje           | ection     | I              | Full Reje | ection |
| 18b         | b. Alternate Facility (or Generator)  | Shipp  | ing Document                    | Tracking Nu  | mber:<br>U.S. EPA ID N | lumber     |                | _         |        |
|             |   |  |                                 |  |                        |            |                |           |        |
|             | cility's Phone:<br>c. Signature of Alternate Facility (or Generator)                                |  |                                 |  | 1                      |            | Мо             | nth Day   | / Year |
| 19.         | Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)         | H = 5  |                                 |  |                        |            |                | -4-       | 1      |
|             | 2.  | 3.   |                                 |  | 4.                     |            |                |           |        |
|             | Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in It   |  |                                 |  |                        |            |                |           |        |
| Prin        | nted/Typed Name   | Signature<br>1                                       |                                 |  |                        | - 1        | Moi            | nth Day   | Year   |
|             |   |  |                                 |  |                        |            |                |           |        |



| SHIPPING<br>DOCUMENT   |   | feit (2) Whitupels & fe at                        |                       | 2. Page 1 c       | (44,603,474,    |                         |               |  | Z 0                  | O31   | 894      | 4           |
|--|---|---|-----------------------|-------------------|-----------------|-------------------------|---------------|--|----------------------|-------|----------|-------------|
| 5. Generator's Name ar   | 13 494 5358                             | ATTM MATT OF PLASTICS PITTSPIELD, L               | ALACTINE<br>AVE       |                   | 159 PLAST       | ICB A                   | VE            | han mailing addres   | is)                  |       |          |             |
| Generator's Phone:<br>6. Transporter 1 Compa   | ny Name                                 | -   |                       |                   |                 |                         | -             | U.S. EPAID N   | Number 9             | 606   | 9 9      | 4 7         |
| 7. Transporter 2 Compa   | ny Name                                 |   |                       |                   | _               | -                       | _             | U.S. EPA ID N  |                      |       | e =      | 7 3         |
|  |   |   |                       |                   |                 |                         |               | 1  |                      |       |          |             |
| 8. Designated Facility N   |   | esade - Oreeni<br>635 Toby Roa<br>Kersey, Pa      | /D                    | LL                |                 |                         |               | U.S. EPA ID N  |                      |       |          |             |
| 4 440 5055   | 4 265-1744                              |   |                       | 24.4              | 76.             | 0.0                     |               | NOT  |                      | E Q   | - 1      | 7 5         |
| 9a. 9b. U.S. DOT D<br>and Packing G  |   | g Proper Shipping Name,                           | Hazard Class, ID N    | umber,            |                 | 0. Contai<br>Io.        | Type          | 11. Total<br>Quantity  | 12. Unit<br>Wt./Vol. | 13.   | Codes    |             |
| 1. NOW RE  | M CETALUD                               | AYERIAL   |                       |                   |                 | ,                       | DT            | Stimate<br>20700   | K<br>S               | NONE  |          |             |
| 2.   |   |   |                       |                   |                 | П                       |               | ,  |                      |       |          |             |
| 3.   |   |   |                       |                   |                 | 7                       |               |  |                      |       |          |             |
| 4  |   |   |                       |                   |                 |                         |               |  |                      |       |          |             |
|  |   |   |                       |                   |                 |                         |               |  |                      |       |          |             |
| 14. Special Handling In:   | atmostiana and Addit                    | ional Information                                 |                       | No. 44 College    |                 | 4 4 1 1 1 1 1 1         | 100           | THE RESERVE OF THE PARTY OF THE |                      |       |          |             |
|  | ed/placarded, and a<br>inted/Typed Name | FICATION: I hereby decre in all respects in prope |                       |                   |                 |                         | tional govern |  | ACE                  | OT Mo |          |             |
| 16. International Shipme   | ents                                    | Import to U.S.                                    |                       | Export from       |                 | Port of er<br>Date leav | ntry/exit:    | (IACS)III  | _(5)                 |       | UZ.      |             |
| 17. Transporter Acknowl<br>Transporter 1 Printed/Ty  |   | of Shipment                                       |                       |                   | Signature       | _                       |               |  |                      | Mo    | nth Day  | Year        |
| 17. Transporter Acknowl Transporter 1 Printed/Ty Transporter 2 Printed/Ty  | 100 (                                   | Vannas  |                       | 1                 | Signature       |                         | M             |  |                      | Mo    | 927      | 1)2<br>Year |
| 18. Discrepancy  |   |   |                       |                   |                 |                         |               |  | -                    | _     |          | 1           |
| 18a. Discrepancy Indica  | ation Space                             | Quantity  | Пту                   | ре                | Res             | idue                    |               | Partial Re   | ection               |       | Full Rej | ection      |
| 18b. Alternate Facility (o   | or Generator)                           |   |                       |                   | Shipping        | Documer                 | nt Tracking N | U.S. EPA ID I  | Number               |       |          |             |
| Facility's Phone:  |   |   |                       |                   |                 |                         |               |  |                      |       |          |             |
| 18b. Alternate Facility (c<br>Facility's Phone:<br>18c. Signature of Alternations of |   |   |                       |                   |                 |                         |               |  |                      |       |          |             |
|  | ate Facility (or Gene                   | erator)   |                       |                   |                 |                         |               |  |                      | Mo    | onth Da  | y Yea       |
| 19. Report Managemen   |   |   | isposal, and recyclin | g systems)        |                 |                         |               |  |                      | Me    | onth Da  | y Yea       |
| 19. Report Managemen   |   |   | isposal, and recyclin | g systems)        |                 |                         |               | 4.   |                      | M     | onth Da  | y Year      |
| 20. Designated Facility  | f Method Codes (i.e                     | e., codes for treatment, di<br>2.                 |                       | noted in Item 18a |                 |                         |               | 4.   |                      | 1     | 1        |             |
| 2  | f Method Codes (i.e                     | e., codes for treatment, di<br>2.                 |                       | noted in Item 18a | ).<br>Signature |                         |               | 4.   |                      | 1     | onth Da  | 1           |

| 1                 | DO        | IPPING<br>CUMENT   |   | lumber<br>930840                                      | 9 3                     | 2. Page 1 of    | (800) 43 | 4-9300                  |   | 4. Shipping             | z 0                  | racking Num<br>031 |            | 5                |
|-------------------|-----------|--|---|---|-------------------------|-----------------|----------|-------------------------|---|-------------------------|----------------------|--------------------|------------|------------------|
| 1                 |           | enerator's Name and Ma                                     | OE<br>AT                                    | NERAL ELEC<br>TN MATT CA<br>PLASTICS A<br>TSFIELD, MA | LACONE<br>VE            |                 |          | L BLEC<br>STICS A       | TRIC CO<br>VE                           | han mailing addres      | s)                   |                    |            |                  |
| П                 | Gene      | erator's Phone: 413  | 12.1.00.22                                  | torible, in   | C 01201                 |                 | 2011     | arar, was               | *************************************** | U.S. EPA ID N           | lumber               |                    |            |                  |
| П                 | 200       | DE ETC.,INC  | -   |   |                         |                 |          |                         |   | NYD                     |                      | 6 5 6              | <b>3</b> 4 | 4 7              |
| Н                 | 7. Tra    | ansporter 2 Company Na                                     | ame   |   |                         |                 |          |                         |   | U.S. EPA ID N           | lumber               |                    |            |                  |
|                   |           | esignated Facility Name                                    | 6.31  | B - GREENTR<br>TOBY ROAD<br>RSEY, PA 15               |                         |                 |          |                         |   | U.S. EPA ID N           |                      | ¥ 1                |            |                  |
| П                 | Facili    | ity's Phone: \$14 2  | 92-1 Ldd                                    | August Law 9  |                         |                 | -        |                         |   | NOI                     | R                    | E Q                | i          | 7 5              |
| И                 | 9a.<br>HM | and Packing Group (  | if any))                                    |   | azard Class, ID Numb    | er,             |          | 10. Contai<br>No.       | ners<br>Type                            | 11. Total<br>Quantity   | 12. Unit<br>Wt./Vol. | 13. (              | Codes      |                  |
| GENERATOR -       |           | 1. NON REGIT   | ATED MATE                                   | UAL   |                         |                 |          | 1                       | DT                                      | 20770                   | ĸ                    | NONE               |            |                  |
| - GENE            |           | 2.   |   |   |                         |                 |          |                         |   | "                       |                      |                    |            |                  |
| Ì                 |           | 3  | 3   |   |                         |                 |          |                         |   |                         |                      |                    |            |                  |
|                   |           | 4.   |   |   |                         | -               | -        | -                       |   |                         |                      |                    |            |                  |
| П                 |           |  |   |   |                         |                 |          |                         |   |                         |                      |                    |            |                  |
|                   |           | TRAILER NUM<br>GENERATOR S/OFFEI<br>marked and labeled/pla | ROR S CERTIFICATI<br>carded, and are in all | ON: I hereby declar<br>respects in proper of          |                         |                 |          |                         |   |                         |                      | e, and are clas    |            | aged,            |
| 1                 |           | rator's/Offeror's Printed/                                 |   |   |                         | THE WAR         |          | pale                    | (AR'AD                                  | K) FOR                  | SE                   | P                  | •          | 113              |
| RINT              | Trans     | sporter signature (for ex                                  |   | 2.47  |                         | Export from     | u.s.     | Port of er<br>Date leav |   |                         |                      |                    |            |                  |
| TRANSPORTER INT'L | Trals     | porter   Printed/Typed                                     | Zelle                                       | er sn   |                         | 1               | goalure  | n3                      | lle                                     | Ja                      |                      | Mon<br>Mon         | Day<br>Day | 7   Year<br>Year |
| K                 | 10.5      |  |   |   |                         |                 |          |                         |   |                         |                      |                    |            | X                |
| Î                 | _         | iscrepancy<br>Discrepancy Indication S                     | Space Qua                                   | entity  | Туре                    |                 |          | lesidue                 |   | Partial Rej             | ection               |                    | Full Rej   | ection           |
| - AIN             | 18b. A    | Alternate Facility (or Ger                                 | nerator)                                    |   |                         |                 | Shippi   | ng Documer              | nt Tracking No                          | umber:<br>U.S. EPA ID N | lumber               |                    |            |                  |
| FAC               | Facilit   | ty's Phone:  |   |   |                         |                 |          |                         |   | 1                       |                      |                    |            |                  |
| SIGNATED FACILITY |           | Signature of Alternate Fa                                  | acility (or Generator)                      |   |                         |                 |          |                         |   |                         |                      | Mo                 | nth Day    | Year             |
| SIG               | 19. R     | eport Management Meth                                      | nod Codes (i.e., code                       | s for treatment, dispo                                | osal, and recycling sys |                 |          |                         |   |                         |                      |                    |            | 70%              |
| (                 | )         |  |   | 2.  |                         | 3.              |          |                         |   | 4.                      |                      |                    |            |                  |
|                   | _         | esignated Facility Owne                                    | r or Operator: Certific                     | ation of receipt of sh                                | ipment except as note   | 2 23 13 2 2 2 2 |          |                         |   |                         |                      |                    |            |                  |
| 1                 | Printe    | d/Typed Name   |   |   |                         | Si              | ignature |                         |   |                         |                      | Mor                | nth Day    | Year             |



| 5. Generator 5 Ivame an  | MAD0030   | 8 4 0 9 3   | 2. Page 1 of              | (300) 424 9300<br>Generator's Site Address  |              | 4. Shipping I         | z 0                 | 031      | 895             | 1                                       |
|--|---|---|---------------------------|---|--------------|-----------------------|---------------------|----------|-----------------|---|
| Generator's Phone: 41  | GENERAL<br>ATTN:MA'<br>159 PLAST  | ELECTRIC CO<br>PT CALACONE                                | 4                         | GENERAL SLECTION PLASTICS AT PETTSFIELD, MA | TRIC CC      |                       | 9)                  |          |                 |   |
| 6. Transporter 1 Compa   | ny Name   |   |                           | -   |              | U.S. EPA ID N         |                     |          | 4.3             | 876                                     |
| PAGE STC.,INC  |   |   |                           |   |              | NAD                   | -                   | 6 9 6    | 9 9             | 4 ?                                     |
| 7. Transporter 2 Compa   | ny Name   |   |                           |   |              | U.S. EPA ID N         | lumber              |          |                 |   |
|  | ame and Site Address ADS - GRE<br>635 TCBY  | ROAD  | L                         |   |              | U.S. EPA ID N         |                     |          |                 |   |
| Facility's Phone: 81   | 1 265-1744  | 24 1.040  |                           |   |              | NOT                   | R                   | EQ       | 3               | 7 2                                     |
| 9a. 9b. U.S. DOT D<br>and Packing Gr   | escription (including Proper Shipping I   | Name, Hazard Class, ID Nur                                | mber,                     | 10. Contai                                  | _            | 11. Total<br>Quantity | 12. Unit<br>Wt/Vol. | 13.      | Codes           |   |
| All the second of  | BULATED MATERIAL  |   |                           | No.   | Туре         | Estima                | e vicivoi.          | NONE     |                 | 1                                       |
|  | JOHN I BO MA ( BROAL  |   |                           | 1   | DI           | 20130                 | 12                  | HOME     |                 |   |
| 2.   |   |   |                           |   |              |                       |                     |          |                 |   |
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| 4.   |   |   |                           |   |              |                       |                     |          |                 |   |
|  |   |   |                           |   |              |                       |                     |          |                 |   |
|  |   |   |                           |   |              |                       |                     |          |                 |   |
| TRAILER N  | UMBER D-7632  | 4- i)   |                           |   |              |                       |                     |          |                 |   |
| 15. GENERATOR S/O<br>marked and labele<br>Generator's/Offeror's Pri  | FFEROR S CERTIFICATION: 1 herel<br>d/placarded, and are in all respects in  | by declare that the contents                              | ort according to app      |   | ional govern | nmental regulations.  | No.                 | 'N Mo    | issified, pack  | / Yea                                   |
| 15. GENERATOR S/O<br>marked and labele<br>Generator's/Offeror's Pri  | FFEROR S CERTIFICATION: I here displacanted, and are in all respects in inted/Typed Name  LLO (AGHNT FOR GE)  ints Import to U.S. | by declare that the contents                              | ort according to app      | olicable international and nat              | ional govern |                       | No.                 | 'N Mo    |                 |   |
| 15. GENERATOR S/O<br>marked and labele<br>Generator's/Offeror's Pri<br>ROBERT PAPA<br>16. International Shipme<br>Transporter signature (f   | FFEROR S CERTIFICATION: I hereld/placarded, and are in all respects in inted/Typed Name  LLO (AGENT FOR GE)  ints                 | by declare that the contents                              | export from               | Signature Out. Port of ea                   | ional govern | nmental regulations.  | No.                 | 'N Mo    | 19 <sub>2</sub> | Yea<br>7113                             |
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| 15. GENERATOR S/O marked and labele Generator's/Offeror's Prince (PAPA) 16. International Shipme Transporter signature (for 17. Transporter 1 Printed/Ty   | FFEROR S CERTIFICATION: I hereld/placarded, and are in all respects in inted/Typed Name  LLO (AGHNT FOR GE)  ints                 | by declare that the contents                              | Export from               | Signature  Outs.  Port of er  Date leav     | ional govern | nmental regulations.  | No.                 | Mo<br>Mo | onth Day        | 7   Yea                                 |
| 15. GENERATOR S/O marked and labele  Generator's/Offeror's Pri ROBERT' PAPA)  16. International Shipme Transporter signature (f 17. Transporter Acknowle Transporter 1 Printed/Ty  ROBERT' PAPA)  Transporter 2 Printed/Ty   | FFEROR S CERTIFICATION: I hereld/placarded, and are in all respects in inted/Typed Name  LLO (AGHNT FOR GE)  ints                 | by declare that the contents                              | Export from               | Signature  Outs.  Port of er  Date leav     | ional govern | nmental regulations.  | NEAR C              | Mo<br>Mo | onth Day        | Yea                                     |
| 15. GENERATOR S/O marked and labele Generator's/Offeror's Pri ROBERT' PAPA) 16. International Shipme Transporter signature (f 17. Transporter 1 Printed/Ty Papa Papa Papa Printed/Ty Printed/Ty Printed/Ty Printed/Ty Printed/Ty 18. Discrepancy Indica  | FFEROR S CERTIFICATION: I hereld/placarded, and are in all respects in inted/Typed Name  LLO (AGHNT FOR GE)  ints                 | by declare that the contents proper condition for transpo | Export from               | Signature  Outs.  Port of er  Date leav     | htry/exit.   | Partial Rej           | ACE C               | Mo<br>Mo | nth Day         | Year Year Year Year Year Year Year      |
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| 15. GENERATOR S/O marked and labele Generator's/Offeror's Prince (1997) 16. International Shipme Transporter signature (1997) 17. Transporter 1 Printed/Ty Transporter 2 Printed/Ty 18. Discrepancy 18a. Discrepancy Indica 18b. Alternate Facility (of Facility's Phone:  | FFEROR S CERTIFICATION: I hereld/placarded, and are in all respects in need/Typed Name  LLO (AGHNT FOR GE) ints                   | by declare that the contents proper condition for transpo | Export from               | ignature  Date leave                        | htry/exit.   | Partial Rej           | ACE C               | Mo<br>Mo | nth Day         | Yea Yea Yea                             |
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| 1                   | DO            | IPPING<br>CUMENT                             | 1. Generator ID Number   | 2. Pa                  |                  | mergency Response                  |              | 4. Shipping I           | 7 N                  | racking Num | 895           | 2      |
|---------------------|---------------|--|--|------------------------|------------------|------------------------------------|--------------|-------------------------|----------------------|-------------|---------------|--------|
| Ц                   | 5. Ge         | enerator's Name and Ma                       | alling Address  GENERAL ELECTRIC (                               | ·0                     |                  | rator's Site Address ( MERAL ELECT |              |                         | s)                   |             | -             |        |
| 17                  |               |  | ATTN:MATT CALACO:<br>159 PLASTICS AVE                            | NE                     | 159              | PLASTICS AT                        | VE           |                         |                      |             |               |        |
| II                  | 6. Tra        | erator's Phone: 413<br>ansporter 1 Company N | ANA SASS PITTSPIELD MA CIZO<br>ame                               | -                      | PIT              | TSFIELD, MA                        | 01201        | U.S. EPA ID N           | lumber .             |             |               |        |
| Ш                   | PAC<br>7. Tra | OF RTC INC<br>ansporter 2 Company N          | ame  | _                      | -                |                                    | -            | U.S. EPA ID N           |                      | 696         | 9 9           | 4 7    |
| 11                  | 8 De          | esignated Facility Name                      | and Site Address   |                        |                  |                                    | _            | U.S. EPA ID N           | umher                |             |               |        |
|                     | 0.00          | Angliator I builty Italia                    | ADS - GREENTRES LA<br>635 TOBY ROAD                              | NDFILL                 |                  |                                    |              | U.O. E. AID             | unbor                |             |               |        |
| 11                  | Facili        |  | 265-1744 KERSEY, PA 15846  |                        |                  |                                    |              | NOT                     | ĸ                    | EQ          | - 1           | 7 5    |
|                     | 9a.<br>HM     | 9b. U.S. DOT Descri<br>and Packing Group (   | iption (including Proper Shipping Name, Hazard Clas<br>(if any)) | s, ID Number,          |                  | 10. Contain<br>No.                 | Type         | 11. Total<br>Quantity   | 12. Unit<br>Wt./Vol. | 13. (       | Codes         |        |
| ATOR -              |               | 1. NON REGIJ                                 | LATED MATERIAL   |                        |                  | 1                                  | DT           | 19920                   | K                    | NONE        |               |        |
| GENERATOR           |               | 2.   |  |                        |                  | F                                  |              | 1100                    |                      |             |               |        |
|                     |               | 3.   |  |                        |                  |                                    |              |                         |                      |             |               |        |
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| II                  |               |  |  |                        |                  |                                    |              |                         |                      |             |               |        |
|                     | 15.           | TRAILER NUM                                  | ND DEBRIS APPROVAL NUMBER  | contents of this consi | gnment are ful   | ly and accurately des              | scribed abov | e by the proper shi     |                      |             | ssified, pack | aged,  |
|                     |               | rator's/Offeror's Printed                    |  |                        | Signature        |                                    | - /          | \ AG                    | NOT                  | 'Mor        | nth Day       | Year   |
| ļ                   |               |  | (AGENT FOR GE)   |                        | Pa               | 35(7)                              | DARC         | ADE FO                  | 20                   | = p         | 9127          | 113    |
| INT                 |               | sporter signature (for ex                    | Import to U.S.   | Expo                   | ort from U.S.    | Port of ent                        |              | 1100                    |                      |             |               |        |
| TER                 | 17. Tr        |  | nent of Receipt of Shipment                                      |                        | Signature        | -                                  | /            |                         |                      | Mon         | ith Day       | Year   |
| TRANSPORTER INT'    | L             | mer /  | 211  |                        |                  | 12                                 |              | - July 1                |                      | 0           | 9127          | 7113   |
| TRAN                | ITans         | sporter 2 Printed/Typed                      | Name   |                        | Signature        |                                    |              |                         |                      | Mon         | in Day        | Tear   |
| 1                   | _             | iscrepancy                                   |  |                        |                  |                                    |              |                         |                      |             |               |        |
| 11                  | 16a. L        | Discrepancy Indication 8                     | Space Quantity   | Туре                   |                  | Residue                            |              | Partial Reje            | ection               | 1           | Full Reje     | ection |
| <u>-</u>            | 18b. A        | Alternate Facility (or Ger                   | nerator)   |                        |                  | Shipping Document                  | Tracking No  | umber:<br>U.S. EPA ID N | lumber               |             | -             |        |
| FACI                | Facilit       | ty's Phone:                                  |  |                        |                  |                                    |              | I                       |                      |             |               |        |
| DESIGNATED FACILITY | 18c. S        | Signature of Alternate Fa                    | acility (or Generator)   |                        |                  |                                    |              |                         |                      | Mo          | nth Day       | y Year |
| ESIG                | 19. Re        | eport Management Met                         | hod Codes (i.e., codes for treatment, disposal, and              | recycling systems)     | 10               |                                    |              | 12                      |                      |             |               |        |
| 9                   |               |  | 2.   |                        | 3.               |                                    |              | 4.                      |                      |             |               |        |
|                     |               | esignated Facility Ownerd/Typed Name         | er or Operator: Certification of receipt of shipment ex          | cept as noted in Item  | 18a<br>Signature |                                    |              |                         |                      | Mor         | nth Day       | Year   |
| +                   |               |  |  |                        |                  |                                    |              |                         |                      | - 1         |               |        |



|           | 195                    | PING<br>JMENT                                    | 1. Generato                    | r ID Number<br>りのほり                      | 1993   | ,                   | 2. Page 1 of  |   | псу Respon<br>(24. 9300) |  | 4. Shipping                                | Document 1                             | racking Num    | 893   | 7                                       |
|-----------|------------------------|--|--------------------------------|--|--|---------------------|---------------|---|--------------------------|--|--|--|----------------|---|---|
|           | Generat                | ioi s Phone.                                     | 94.5350                        | ATTN:MAT                                 | HECTRIC CC<br>T CALACION<br>CS AVE<br>C, MS. 61261 |                     |               | 159 PL                                  | etics .                  | s (if different to<br>CATRIC CC<br>AVE<br>(A 01201 | han mailing addres<br>)                    | s)                                     |                |   |   |
|           |                        | porter 1 Company Nar<br>I ETC_INC                | ne                             |  |  |                     |               |   |                          |  | U.S. EPAID N                               |  | 6 9 6          | g a   | <b>4</b> 7                              |
|           | 7. Trans               | porter 2 Company Nar                             | ne                             |  |  |                     |               |   |                          |  | U.S. EPA ID N                              | lumber                                 |                |   |   |
|           | 8. Desig               | nated Facility Name a                            | nd Site Addres                 | SALS - ORIGI<br>635 TOBY R               |  | CALITY.             | ·             |   | *                        | <u>,</u>   | U.S. EPA ID N                              | lumber                                 |                |   |   |
|           | Facility's             | s Phone: 원호 강동                                   | is1746                         | KERSEY, P.                               |  | ·                   |               |   |                          |  | [Nor                                       | R                                      | e Q            | <b>ä</b> .  | 7 5                                     |
|           | 9a.                    | 9b. U.S. DOT Descript<br>and Packing Group (if   |                                | Proper Shipping Na                       | ame, Hazard Class,                                 | ID Number,          |               |   | 10. Cont                 | ainers<br>Type                                     | 11. Total                                  | 12. Unit<br>Wt./Vol.                   | 13. 0          | Codes   | ·                                       |
| 1         |                        | NON REGUL  |                                | TERIAL                                   |  |                     |               |   | 110.                     | Турс   | ZST INVE                                   | e                                      | MOME           |   |   |
| GENERALOR |                        |  | <del></del>                    |  |  | 4                   |               |   | 1                        | DT   | 20,450                                     | ĸ                                      |                |   |   |
|           | 2.                     |  |                                | :  |  |                     |               |   |                          |  |  |  |                | ors -Mar Sedermode 773-Entre                        | ~~~~                                    |
|           | 3.                     |  |                                |  | <u></u>  |                     |               |   |                          | _  |  |  |                |   |   |
|           | į                      |  |                                |  |  |                     |               |   |                          |  | ļ ·  |  |                | leidene enemanen man en en                          | *************************************** |
|           | 4.                     |  |                                |  |  | ·                   | ·             |   |                          |  |  |  |                |   |   |
|           |                        |  | •                              |  |  |                     |               |   |                          |  |  |  |                | Andreas (1979) and the second section of the second | *******                                 |
| ( (       | 14. Spec               | cial Handling Instruction                        | ns and Addition                | nal information APPROVAL                 | er service of<br>Inimber 33                        | mbracted '<br>18849 | by CIENER     | ale la                                  | CTRIC C                  | C. IN  | on recula                                  | TED SC                                 | II.            |   |   |
|           | · 1                    | RAILER NUME                                      | ier D                          | -4451                                    | d- 1)  |                     |               |   |                          |  |  | •••                                    |                |   |   |
|           | 15. <b>GE</b>          | ENERATOR S/OFFERO                                | OR S CERTIFI<br>orded, and are | CATION: I hereby<br>in all respects in p | declare that the co                                | ntents of this      | consignment   | are fully and<br>cable interna          | accurately of            | lescribed aborational govern                       | ve by the proper sh<br>mental regulations. | ipping name                            | , and are clas | sified, pack  | aged,                                   |
|           |                        |  |                                |  |  |                     |               |   | $\bigcirc$               |  | · · · · · · · · · · · · · · · · · · ·      | ~~~~                                   | W Mon          | th Day  | Voar                                    |
|           | ROB                    | ors/Offeror's Printed/Ty<br>GRT PAPALLO          |                                | OR GE)                                   |  |                     | 48            | nature                                  | total                    | descr  | DE PER                                     |  |                |   | ) 13                                    |
| ב<br>ב    |                        | national Shipments<br>orter signature (for expo  |                                | port to U.S.                             |  |                     | Export from U | U.S.                                    |                          | entry/exit:<br>aving U.S.:                         |  |  |                |   |   |
| E.        |                        | sporter Acknowledgmei<br>rter J Printed/Typed Na |                                | f Shipment                               |  |                     | Sig           | nature j                                |                          | 1  | -/-  |  | Mon            |   | Year                                    |
| NO LON    | Transpor               | ///Le<br>Inter 2 Printed/Typed Na                | <u> </u>                       | · K                                      |  |                     | Sig           | gnature                                 | 14 6                     | <u>Lea</u>   | 1  |  | Mon            | 0   30<br>th Day                                    |   |
| 5         | ,                      |  |                                |  |  | •                   |               | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                          |  |  | ,                                      |                |   |   |
| ١         | 18. Disci<br>18a. Disc | repancy<br>crepancy Indication Sp                | ace                            | Quantity                                 |  | Туре                |               |   | Residue                  |  | Partial Rej                                | ection                                 |                | Full Rejo   | ection                                  |
|           |                        |  |                                | Quantity                                 |  | rype                |               |   |                          | ent Tracking N                                     | _  | OGGOT                                  | _              |   |   |
|           | 18b. Alte              | emate Facility (or Gene                          | erator)                        |  |  |                     |               | GHIP                                    | - mg Dooutill            | THE PROPERTY IN                                    | U.S. EPA ID N                              | Number                                 |                |   |   |
| 2         | Facility's             |  | ::: ( O                        |  |  |                     |               |   |                          |  |  |  |                |   |   |
| Ĭ         | ioc. Sign              | nature of Alternate Fac                          | ility (of Generi               | alor)                                    |  |                     |               |   |                          |  |  |  | Mo             | nth Day   | y Year                                  |
| 2         | 19. Repo               | ort Management Metho                             | od Codes (i.e.,                | codes for treatmer<br>2.                 | nt, disposal, and red                              | ycling syster       | ns)           |   |                          |  | 4.   |  |                |   |   |
|           | 20 D                   | ignated Esseits Over-                            | or Onesote a                   | adilization of mo-                       | nt of chiame-4                                     | ent ac ect- 1       | n (to== 10 =  |   |                          |  |  | ,                                      | 7              |   |   |
|           |                        | gnated Facility Owner<br>Typed Name              | or Operator: C                 | ennication of recei                      | hr or suibment exce                                | pt as noted i       |               | gnature                                 |                          | ,  |  | ······································ | Mor            | th Day  | Year                                    |
| , )       |                        |  |                                |  |  |                     |               |   |                          |  |  |  |                |   | -                                       |

| SHIPPING   | 1. Generator   | ID Number  | 9 3   | 2. Page 1 of  | 3. Emergency Respons<br>(800) 424-9300  | se Phone                   | 4. Shipping  |                     | 031            |                | 88                                      |
|--|--|--|---|---|---|----------------------------|--|---------------------|----------------|----------------|---|
| 5. Generator's Name an   |  | GENERAL ELECT<br>ATTN MATT CAL<br>159 PLASTICS AV<br>PITTSFIELD, MA  | LACONE<br>RE                                    |   | Generator's Site Address OENHRAL HERO 139 MASTICS A DIFFSFIELD, M.                            | A VE                       | than mailing addres  | ss)                 |                |                |   |
| Generator's Phone: 47<br>6. Transporter 1 Compa  | 3 494-5358<br>ny Name  | PILIBELLA, IMP.  | CLACE   |   | a a a an anama Curin  | 200.00                     | U.S. EPA ID N  | Number              | _              | -              |   |
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| 7. Transporter 2 Compa   | ny Name  |  |   |   |   |                            | U.S. EPA ID N  | lumber              |                |                |   |
| 8. Designated Facility N   | ame and Site Addres  | SAINS - OREENTRE   | T A STANT                                       | -   |   |                            | U.S. EPA ID N  | lumber              | _              | -              | _                                       |
|  |  | 63S TOBY ROAD  |   |   |   |                            |  |                     |                |                |   |
| Facility's Phone: 81   | 265-1744   | KERSEY, PA 158   | de.   |   |   |                            | NOT  | R                   | E Q            | · j            | 7 5                                     |
| 9a. 9b. U.S. DOT Do<br>and Packing Gre   |  | Proper Shipping Name, Haz  | zard Class, ID Numbe                            | ar,   | 10. Conta   | iners Type                 | 11. Total<br>Quantity  | 12. Unit<br>WL/Vol. | 13.            | Codes          |   |
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| TRAILER N  | AND DEBRIE   |  | (DER 258849                                     |   |   |                            | CN REGULA  |                     |                | position page  | tonad                                   |
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| DOCUMENT   | MADO   | lumber<br>0 1 0 8 4 0 9 3  | 2. Page 1 of   | 3. Emergency Response<br>(800) 424-9300                                      | e Phone | 4. Shipping           |                      | 031             |                                    | 19        |
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| 5. Generator's Name and Generator's Phone: 41  | AT<br>150  | eneral electric (<br>Tin matt calaco<br>9 plastics ave<br>1 tefield, ma. 0120  | NE   | Generator's Site Address<br>CENERAL ELEC<br>159 PLASTICS A<br>PITTSFIELD, MA | TRIC CO | than mailing addre    | ss)                  |                 |                                    |           |
| Generator's Phone:  6. Transporter 1 Compar  | ny Name  |  |  |  |         | U.S. EPA ID           | Vumber               |                 |                                    |           |
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| 100000000000000000000000000000000000000  | 783-1744   |  | www.   |  |         | NOT                   |                      | E Q             | 1                                  | 7 5       |
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| SHIPPING 1. Generator ID Number M. A. D. 9. 9. 3. 9. 4. 0. 9. 3.   | A 100 March 1987 A 100  | Emergency Response<br>(800) 434-9300   | Phone  | 4. Shipping                                 | Z (                  | Tracking Nu    | 8940   |
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| 5. Generator's Name and Mailing Address  GENERAL ELECTRIC  ATTN MATT CALACT  | Ge   | nerator's Site Address<br>ENERAL, FLECTOR ATTICES AT   | TRICCO   | than mailing addres                         | s)                   | 001            |  |
| 159 PLASTICS AVE   |  |  |  |   |                      |                |  |
| Generator's Phone: 413 494-5358 PRITSFIELD, MA. 612<br>5. Transporter 1 Company Name   | CI P   | TTSFIELD, MA   | 01201  | U.S. EPA ID N                               | umbar                |                |  |
| PAGE HTC., INC   |  |  |  | NYD936969947                                |                      |                |  |
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| ADS - GREENIRES L.<br>635 TOBY ROAD  | ANIFILL  |  |  | 340 -510 14 11                              | 3115124              |                |  |
| acility's Phone: 814 265-1744 KERSEY, PA 15846   |  |  |  | TOR   | R                    | Ca             | 1 7  |
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| TRAILER NUMBER D-65 70 (- 1)  GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the marked and labeled/placarded, and are in all respects in proper condition   | R 258849  ne contents of this consignment are  | fully and accurately de  | scribed abov   | ve by the proper shi                        |                      |                |  |
| TRAILER NUMBER D-65 70 (- 1)  GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the marked and labeled/placarded, and are in all respects in proper condition enerator's/Offeror's Printed/Typed Name   | R 258849  ne contents of this consignment are  | fully and accurately de  | scribed abovern  | ve by the proper shi mental regulations.    |                      | e, and are cla |  |
| TRAILER NUMBER D-65 70 1- 1)  GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the marked and labeled/placarded, and are in all respects in proper condition enerator's/Offeror's Printed/Typed Name  ROBERT PAPALLO (AGENT FOR CE)  6. International Shipments Import to U.S.   | R 258849  ne contents of this consignment are  | fully and accurately dee<br>e international and nati   | scribed abovern  | ve by the proper shi<br>mental regulations. | pping name           | e, and are cla | nth Day  |
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| 6. Transporter 1 Company Name  | 140  |   |  |                               | U.S. EPA ID N                              | lumber               |                | _  |                |
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| POCUMENT  | 1. Generator ID Number  |   | mergency Response Phone                   | 4. Shipping Document 7               | racking Number 0318834             |
|---|---|---|---|--------------------------------------|------------------------------------|
| Generator's Name ar   | nd Mailing Address  | 45                                      | erator's Site Address (if different the   | an mailing address)                  |                                    |
| 6. Transporter 1 Compa  | any Name  |   |   | U.S. EPA ID Number                   | 6 4 5 4 B                          |
| 7. Transporter 2 Compa  | any Name  |   |   | U.S. EPA ID Number                   |                                    |
| Designated Facility N   | Vame and Site Address   |   |   | U.S. EPA ID Number                   | 0 0 -                              |
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| T down y 5 1 Horics   | Description (including Proper Shipping Name, Hazard Claroup (if any))   | ass, ID Number,                         | 10. Containers No. Type                   | 11. Total 12. Unit Quantity Wt./Vol. | 13. Codes                          |
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| ) 4.  |   |   |   |                                      |                                    |
| THE STATE OF  | structions and Additional Information  4784  FFEROR'S CERTIFICATION: I hereby declare that the                | 20,840                                  |   |                                      |                                    |
| marked and labele   | rd/placarded, and are in all respects in proper condition f   | or transport according to applicable in | nternational and national government      | ental regulations.                   | and and characteristic positioges, |
|   | inted/Typed Name  | Signature                               | I XM Larnor                               | AS AGENT                             | Month Day Year                     |
|   | ale 🗀   | - INDA-HK                               | WIND WAY                                  | DITTA INC.                           | 10 2413                            |
| 16. International Shipme Transporter signature (fi  | or exports only):   | Export from U.S.                        | Fort of entry/exit:<br>Date leaving U.S.: |                                      | 1 100 4 1, 400                     |
| Transporter signature (fi   | for exports only): edgment of Receipt of Shipment ped Name  | Signature                               | Port of entrylexit:<br>Date leaving U.S.: |                                      | 10 2413                            |
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| 1           | SHIPPING<br>DOCUMENT   | 1. Generator ID Number   | 2. P   | age 1 of 3. Emergency Res                    |                                 | 4. Shipping              | Document T           | 0318835                       |
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| 31 6        | 5. Generator's Name and Ma   | ailing Address   |  | Generator's Site Ad                          |                                 | t than mailing addre     | ss)                  | 0010000                       |
|             | Generator's Phone:   | 700 1 5 1 7 7 7 1 5 1 1 1 1 1 1 1 1 1 1 1 1  | 160<br>45 pt   | 75KSk (1 ji)<br>- 17 - 5 (-<br>1 () - 18 (-) |                                 |                          |                      |                               |
| 1           | 6. Transporter 1 Company N   |  |  |  |                                 | U.S. EPA ID              | Number               |                               |
| 1           | 7. Transporter 2 Company N   | ame  |  |  |                                 | U.S. EPA ID I            | Number               |                               |
| 1           | 8 Decimated Facility Name  | and Cita Addrace   |  |  |                                 | U.S. EPA ID I            | fumber               |                               |
|             |  | and Site Address   |  |  |                                 |                          | number               |                               |
| 11          | Facility's Phone:  | 19.3144  |  |  |                                 | 90                       | -                    |                               |
|             | 9a. 9b. U.S. DOT Descri<br>and Packing Group (   | ption (including Proper Shipping Name, H<br>if any))                                 | lazard Class, ID Number,   | 10. C  | ontainers<br>Type               | 11. Total<br>Quantity    | 12. Unit<br>Wt./Vol. | 13. Codes                     |
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| 7           | 15. GENERATOR SIOFFER  | ROR'S CERTIFICATION: I hereby declar<br>carded, and are in all respects in proper of |  |  |                                 |                          |                      | and are classified, packaged, |
|             | Generator's/Offeror's Printedi   |  | (  | Signature 1                                  | CO HAV                          | (HDIC) FO                | 268                  | Month Day Yea                 |
|             | <ol> <li>International Shipments</li> <li>Transporter signature (for expense)</li> </ol>                             | Import to U.S.   | Ехро   |  | of entry/exit:<br>leaving U.S.: |                          |                      |                               |
|             | 17. Transporter Acknowledgm<br>Transporter 1 Printed/Typed N   |  | /  | Signature 1                                  |                                 | Med                      | 1                    | Month Day Yea                 |
| 7           | ransporter 2 Printed/Typed N   | lame   | Territoria de la companya della companya della companya de la companya della comp | Signature                                    | 1/                              |                          |                      | Month Day Yea                 |
| +           | 8. Discrepancy   |  |  | 3  |                                 |                          |                      |                               |
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| 1           | 8b. Alternate Facility (or Gen   | erator)  | Ll Type  |  | ment Tracking (                 | Number:                  |                      |                               |
| ī           | 18b. Alternate Facility (or Gen  | erator)  | L_] Type   |  | ument Tracking I                | Number:                  |                      |                               |
| 1 F         | 18b. Alternate Facility (or Gen<br>Facility's Phone:<br>8c. Signature of Alternate Fa                                | erator)  |  |  | rment Tracking (                | Number:                  |                      |                               |
| 1<br>1<br>1 | 18b. Alternate Facility (or Gen<br>Facility's Phone:<br>18c. Signature of Alternate Fa<br>19. Report Management Meth | erator)  cility (or Generator)  od Codes (i.e., codes for treatment, disp            | osal, and recycling systems)   | Shipping Doci                                | ument Tracking                  | Number:<br>U.S. EPA ID N |                      |                               |



| 5. Generator's Name and N  | 44 1  |   | Emergency Response Phone  | 4. Shipping                                | Z 0   | 318836                      |
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|  | Aailing Address   | l.  | nerator's Site Address (if different                                  | than mailing address                       | ss)   |                             |
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| Generator's Phone: 6 Transporter 1 Company   |   | Cr. c   | 14 m (6)  | U.S. EPA ID I                              | lumber  |                             |
| TAJESTO INC  | TOTAL   |   |   |  |   | W + W + B                   |
| 7. Transporter 2 Company I   | Name  |   |   | U.S. EPA ID N                              | lumber  |                             |
| 8 Designated Facility Name   | e and Site Address  |   |   | U.S. EPA ID N                              | lumber  |                             |
|  | THE STREET  | axini   |   |  |   |                             |
| Facility's Phone:  | 160 - 40 AD 18 19 19 19 19 19 19 19 19 19 19 19 19 19   |   |   | 1.80                                       | h i   |                             |
| 9a. 9b. U.S. DOT Desc<br>and Packing Group   | ription (including Proper Shipping Name, Hazard<br>(if any))  | Class, ID Number  | 10. Containers No. Type   | 11. Total<br>Quantity                      | 12. Unit<br>Wt./Vol.  | 13 Codes                    |
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| <ol> <li>GENERATOR S/OFFE<br/>marked and labeled/pla</li> </ol>  | ROR S CERTIFICATION: I hereby declare that<br>accarded and are in all respects in proper condition      | the contents of this consignment are from for transport according to applicable | ully and accurately described above international and national govern | e by the proper shi<br>mental regulations. | pping name, a   | nd are classified, packaged |
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| 6 International Shinments  | Import to U.S. courts only):  | Export from U.S.  | Port of entry/exit:<br>Date leaving U.S.:                             |  | -   |                             |
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| 16. International Shipments Transporter signature (for ex 17. Transporter Acknowledge Transporter Printed/Typed of transporter Print     | Name  Space Quantity  nerator)  aclity (or Generator)  hod Codes (i.e. codes for treatment, disposal, a | Signatur  Type  Type  | Residue   | umber                                      |   | Month Day                   |
| Transporter signature (for ex<br>17. Transporter Acknowledger<br>Transporter Printed/Typed of the signature of Printed/Typed of the signature of Alternate Facility (or Gereacility's Phone<br>8c. Signature of Alternate Facility   | Name  Name  Space Quantity  nerator)  | Signatur  Type  | Residue   | umber                                      |   | Month Day                   |
| Transporter signature (for ex 17. Transporter Acknowledger Transporter Printed/Typed In 18. Discrepancy Indication Statement Facility's Phone Sc. Signature of Alternate Facility's Report Management Method   | Name  Space Quantity  nerator)  aclity (or Generator)  hod Codes (i.e. codes for treatment, disposal, a | Signatur  Type  Indirecycling systems)  | Residue Shipping Document Tracking No                                 | umber                                      |   | Month Day                   |

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|                   | 5. Generator's Name and Mailing Address  | 31   | rator's Site Address (if o |                         | ress)  |                               |
|                   | Generator's Phone: 4-3 424 3135 MILIEPTEL MAR MA   | to c   | web mile from a            |                         |  |                               |
|                   | 5. Transporter 1 Company Name  |  |                            | U.S. EPA I              | A. T. S. | -14-1-                        |
|                   | 7. Transporter 2 Company Name  |  |                            | U.S. EPA II             | Number                                       |                               |
| Ш                 |  |  |                            |                         |  |                               |
|                   | 8. Designated Facility Name and Site Address   |  |                            | U.S EPAII               | ) Number                                     |                               |
|                   | Facility's Phone: "14 6 14   |  |                            | 1 30                    | 1 6 1  | 2 +                           |
|                   | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Numb<br>and Packing Group (if any))   | per,   | 10. Containers<br>No.      | 11, Total Type Quantity | 12. Unit<br>Wt./Vol.                         | 13 Codes                      |
| GENERATOR -       | 1. N M 电影(1) 1 : " 1) (1) + (4) + (4)  |  |                            | 223                     | 8  | N NI                          |
| GEN               | 2.   |  |                            |                         |  |                               |
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| 1:                | TRALLER NOT DEBRIE 4784  5. GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the contents of a marked and labeled/placarded, and are in all respects in proper condition for transport a   |  |                            |                         |  | and are classified, packaged, |
| 11                | enerator's/Offeror's Printed/Typed Name  | Specifie   | Dec                        | AKADE A                 | RE   | Month Day Year                |
| INT'L             | S. International Shipments Import to U.S. ransporter signature (for exports only):   | Export from U.S.   | Port of entry/e            |                         |  |                               |
| E 17              | 7. Transporter Acknowledgment of Receipt of Shipment<br>ansporter 1 Printed/Typed Name   | Signature  |                            |                         |  | Month Day Year                |
| န္တို"            | ansported Franco Types Halle   | Signature  | 1.4                        | Acka                    | 1/2  | Month Day Year                |
| IRANSPORTER INT'L | ansporter 2 Printed/Typed Name   | Signature  |                            |                         |  | Month Day Year                |
| _                 | 3. Discrepancy   |  |                            |                         |  |                               |
| 18                | ta. Discrepancy Indication Space Quantity Type   |  | Residue                    | Partial Ro              | ejection                                     | Full Rejection                |
| 18                | b. Alternate Facility (or Generator)   |  | Shipping Document Tra      | U.S. EPA ID             | Number                                       |                               |
|                   | cility's Phone:<br>c. Signature of Alternate Facility (or Generator)   |  |                            | _,                      |  | Month Day Year                |
| N N               |  |  |                            |                         |  |                               |
| S 19              | Report Management Method Codes (i.e., codes for treatment, disposal, and recycling syst 2.   | tems)  |                            | 14.                     |  |                               |
|                   |  |  |                            | , ,                     |  |                               |
| _                 | Designated Facility Owner or Operator: Certification of receipt of shipment except as noted  |  |                            |                         |  | Marie S. V                    |
| Pr                | nted/Typed Name  | Signature  |                            |                         |  | Month Day Year                |



| S. Separator's Name and Making Address  Separator Press.  1. Transporter of Company Name  U.S. EPAID Number  I. Transporter of Company Name  U.S. EPAID Number  U.S.  | SHIPPING<br>DOCUMENT   | 1. Generator ID Number   | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -  | e 1 of 3. Emergency Respon      | se Phone            | 4. Shipping  |                | nacking Numb | 8838           |
|--|--|--|--|---------------------------------|---------------------|--|----------------|--------------|----------------|
| U.S. EPA D Number   U.S.   | 5. Generator's Name ar   | では、11.25 Miles (1.25)<br>では、11.25 Miles (1.25)<br>と、11.25 Miles (1.25) | NAVE   | THE STATE                       | भागुरश्वर ५।<br>५ क | han mailing addre  |                |              |                |
| Transporter 2 Company Name  8. Designated Facility Name and Site Address  WERNET RIFE LANCETE  WERNET RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE LANCETE  WERNES TO LANCETE RIFE RIFE LANCETE  WERNES TO LANCETE RIFE RIFE RIFE LANCETE  WERNES TO LANCETE RIFE RIFE RIFE RIFE LANCETE  SERVICE RIFE RIFE RIFE RIFE RIFE RIFE RIFE RIF   | Generator's Phone: *1  6. Transporter 1 Compa  | 2 394 1224   | C3740 0 C3001  |                                 |                     | U.S. EPA ID  | Number         |              |                |
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| 6. International Shipments   | marked and labeled   | /placarded, and are in all respects in prop                            |  | applicable international and na |                     |  |                |              |                |
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| 7 Transporter Acknowledgment of Receipt of Shipment Transporter 1 Printed/Typed Name  Signature  Signature  Month Day  Transporter 2 Printed/Typed Name  Signature  Signature  Month Day  Acknowledgment of Receipt of Shipment  Transporter 1 Printed/Typed Name  Signature  Signature  Month Day  Acknowledgment Nember  Signature  Residue  Partial Rejection  Full Rejection  Shipping Document Tracking Number:  U.S. EPÀ ID Number  Acknowledgment Method Codes (i.e., codes for treatment, disposal, and recycling systems)  Proposition of Receipt of Shipment except as noted in Item 18a   | 16. International Shipmen  | ts Import to U.S.  | Export f   |                                 | ntry/exit:          | JE MIL   |                |              | 2911           |
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| 5. Generator's Name and M Generator's Phone:  | (34NERA) 5<br>TTN 4427<br>150 PLA 9TA  | VINCONCE<br>LANGUAGE<br>ELECTRIC | i.                      | erator's Site Address       | rvi.          |                       | ss)                  |  |
| PAGE ET UN  | Name   |                                  |                         |                             |               | U.S. EPA ID           |                      | 6 6 1 T V                                    |
| 7. Transporter 2 Company  |  |                                  |                         |                             |               | U.S. EPA ID           | Number               |  |
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| 14 Special Handling Instruc   | tions and Additional Information   |                                  | 5. 17 Mg to             | E-41.1/*                    |               | N. T. F. Say o        |                      |  |
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| 18. Discrepancy   | Space 🗔  |                                  | -                       |                             |               |                       | A. C.                |  |
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| 18b. Alternate Facility (or Ger<br>Facility's Phone:<br>18c. Signature of Alternate Facility is Report Management Met<br>1. | acility (or Generator)   |                                  | *****                   |                             |               |                       |                      | Month Day Yea                                |
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| 19. Report Management Met  1.   | nod Codes (i.e., codes for treatment,  | disposal, and recycling system   | ms) 3.                  |                             |               | 4.                    |                      |  |

| I            |           | IPPING<br>CUMENT   | 1. Generator ID Number   | 2. Page 1 o                        | f 3. Emergency Response Pl         | hone           | 4 Shipping            | Z O                  | 0318840        |
|--------------|-----------|--|--|------------------------------------|------------------------------------|----------------|-----------------------|----------------------|----------------|
|              | 5. Ge     | nerator's Name and M   | ENG LINES  |                                    | Generator's Site Address (if       | different than | mailing address       |                      |                |
|              |           |  | 120 NE - 92 NES X 12   | are.                               | 17 1 1 <sub>1</sub> 1              |                |                       |                      |                |
|              | Conc      | rator's Phone:   |  |                                    | T 10 # 10 10                       | 10             |                       |                      |                |
|              | 6. Tra    | insporter 1 Company N  |  |                                    |                                    |                | U.S. EPA ID           | Vumber               |                |
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| 11           | Facilit   | y's Phone:   | 35, 744  |                                    |                                    |                | 37                    | 1:                   | H w            |
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| E            | 18b. Al   | Itemate Facility (or Ger   | neralor)   |                                    | empland execution (1               |                | U.S. EPA ID N         | lumber               |                |
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| 4 5           | SHIPPING   | 1. Generator ID Number   | 2. Page 1 of 3. Er                       | nergency Response Phone                   | 4. Shipping Document                   |  |
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|               | Generator's Name and Ma  | TINE<br>TINE   | rn GPT                                   | rator's Site Address (if different th     | nan mailing address)                   |  |
| G             | enerator's Phone: 413  | 494 SETE OFFICE CHEER WAY OF   | 200                                      | esemi da com                              |  |  |
| 6.            | Transporter 1 Company No.  | ame  |  |   | U.S. EPA ID Number                     | 6. 7. 5. 1. 1. 4. 2                            |
| 7.            | Transporter 2 Company No   | ame  |  | 151000000000000000000000000000000000000   | U.S. EPA ID Number                     |  |
| 8.            | Designated Facility Name   | and Site Address   | ST 16 TO 3                               |   | U.S. EPA ID Number                     |  |
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| 9a<br>HI      | The state of the s | ption (including Proper Shipping Name, Hazard Cl<br>if any))   | ass, ID Number,                          | 10. Containers  No. Type                  | 11. Total 12. Unit<br>Quantity WL/Vol. | 13. Codes                                      |
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|               | . Discrepancy<br>a. Discrepancy Indication S   | space Quantity   | Туре                                     | Residue                                   | Partial Rejection                      | Full Rejection                                 |
| 18            | b. Alternate Facility (or Gen  | erator)  |  | Shipping Document Tracking Nu             | umber:<br>U.S. EPA ID Number           |  |
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| )_            | c. Signature of Alternate Fa   |  |  |   |  | Month Day Year                                 |
| 19.           | . Report Management Meth   | od Codes (i.e., codes for treatment, disposal, and<br>2.   | recycling systems)  3.                   |   | 4.                                     |  |
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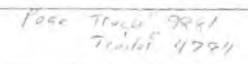
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|  | MADODIOB   | 1093   |   | (800) 424-9300   |  | Z                   | z 0       | 031            | 883      | 9                                       |
| 5. Generator's Name and<br>Generator's Phone: 412  | GENERAL EL<br>ATTN MATT<br>159 PLASTICS  | CALACONE<br>AVE  | 1   | nerator's Site Address<br>ENERAL ELEX<br>SO PLASTICS A | OTRIC CO   | an mailing addres   | 3)        | 7700           |          | ,                                       |
| 6. Transporter 1 Compani<br>PAGE STC., INC   | y Name   |  |   | and the second   | - 22 Th S. 11 C  | U.S. EPAID N        |           | 6 9 6          | 9 9      | 4 7                                     |
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| . Generator's Name and   | Melling Address GENERA ATTIN 30 159 PLA   | AL BLECTRIC CO<br>IATT CALACONE<br>STICS AVE                        |  | Senerator's Site Address<br>GENERAL ELEC<br>159 PLASTICE A   | TRIC CC   | han mailing addres                               | (3)                        |                |               |       |
| Generator's Phone: 413<br>5. Transporter 1 Company   |   | BLD, MA 01201   |  | PITTSFIELD, MA   | 4 01701   | U.S. EPA ID N                                    | himbar                     |                |               |       |
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| 16. International Shipments  Transporter signature (for exporter Acknowledgmen  Transporter 1 Printed/Typed National States (1994)  Transporter 2 Printed/Typed National States (1994)  18. Discrepancy  | Import to U.S. irts only): It of Receipt of Shipment me  | Signature   | Date leav                            | ing U.S.:        | Partial Reje                                | ection     | -             | h Day           |
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| DOCUMENT  | MADODICE  | 0.91  | 1   | 3. Emergency Respons   |                            | 4. Shipping                                  | <b>Z</b> 0 | 031             | 8843                      |
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| Generator's Name and Generator's Phone: 413   | OENERAL ELS<br>ATTNIMATT C<br>159 PLASTICS  | ALACONE   |   | Generator's Site Address CHENIER AL FILE 150 PLANTICE PTTTBUILD MA                             | TRIC O                     |  |            | 7 16            |                           |
| Generator's Phone:<br>5. Transporter 1 Company  |   | W. 212-1  |   | 111111111111111111111111111111111111111  | PC SHIPOI                  | U.S. EPAID N                                 | lumber     |                 |                           |
| PAGE STC.JNC  |   |   |   |  |                            |  |            |                 |                           |
| 7. Transporter 2 Company  | Name  |   |   |  |                            | U.S. EPA ID N                                | lumber     |                 |                           |
|   |   |   |   |  |                            | 1  | 5.50       |                 |                           |
| 8. Designated Facility Nan  | ne and Site Address<br>ADS - ORDER TOBY MOU   | REKLAMIFILE<br>ID                                   |   |  |                            | U.S. EPA ID N                                | lumber     |                 |                           |
| Facility's Phone: 214   | 365-1744 NERGREY, 9A. 1   | 5846  |   |  |                            | ROI  | E          | EQ              | 1.7                       |
|   | cription (including Proper Shipping Name,   | Hazard Class, ID Numb                               | per,  | 10, Conta  | ainers                     | 11. Total                                    | 12. Unit   | - 40            | 0.4                       |
| 4M and Packing Grou   |   |   |   | No.  | Type                       | Quantity                                     | Wt./Vol.   | 13.             | Codes                     |
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|   | MO DEBRIE APPROVAL NO   | Service Contracti<br>MANER 258849                   | od by Gener                                       | AL ELECTRIC O  | 0 4-34                     | ON-REGULAT                                   | 1900 SO    | TL.             |                           |
| TRAILER MUS   | MIS DEBRUS APPROVAL NO  | fare that the contents of                           | this consignment a                                | are fully and accurately d   | escribed abo               | ve by the proper shi                         |            |                 | ssified, package          |
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| 5. GENERATOR S/OFF<br>marked and labeled/p<br>Senerator's/Offeror's Printe<br>6. International Shipments<br>Transporter signature (for<br>7. Transporter Acknowleds<br>transporter 1 Printed/Typer<br>transporter 2 Printed/Typer<br>8. Discrepancy<br>8. Discrepancy Indication<br>8b. Alternate Facility (or G  | EROR S CERTIFICATION: I hereby decilecarded, and are in all respects in proper ad/Typed Name  Import to U.S. exports only): Impent of Receipt of Shipment of Name  In Space Quantity  Interest Quantity | fare that the contents of r condition for transport | this consignment a according to applic Sign       | are fully and accurately diable internal and na nature  S. Port of e Date lear                 | escribed aboutional govern | ve by the proper shi                         | pping name | Mon             | th Day Day Full Rejection |
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| SHIPPING<br>DOCUMENT  | Generator ID Number   |   | 20) 424-9300                                   |                              | 4. Shipping                              | Z 0                 | Tracking Num   | 893          | 14    |
|---|---|---|--|------------------------------|--|---------------------|----------------|--------------|-------|
| Generator's Name and Mailing  Generator's Phone:  | OFNERAL ELECTRIC C<br>ATTRIMATY CALACON<br>159 PLASTICS AVE   | E 199   | ator's Site Address                            | AE CO                        | an mailing address                       |                     |                |              |       |
| 6. Transporter 1 Company Name   | T   |   |  |                              | U.S. EPA ID A                            |                     |                |              |       |
| DAIL DTG HDAG   |   |   |  |                              | MAD                                      | 9.3                 | 6 9 6          | 9 9          | 4     |
| 7. Transporter 2 Company Name   |   |   |  |                              | U.S. EPA ID N                            | lumber              |                |              |       |
| Designated Facility Name and  | Site Address ADM - GRIDDATTHERE LAS<br>AND TORY ROAD  | THU   |  |                              | U.S. EPA ID N                            | lumber              |                |              |       |
| Facility's Phone: #14 265   | 1744 NERSEY, PA 15046   |   |  |                              | INOT                                     | B                   | E Q            | - 1          | 7     |
|   | (including Proper Shipping Name, Hazard Class   | s, ID Number,   | 10. Contain<br>No.                             | Type                         | 11. Total<br>Quantity                    | 12. Unit<br>WL/Vol. | 13.0           | Codes        |       |
| 1. NON REQUEAT  | TED MATERIAL  | :   |  | 1                            | STIMATE                                  | 5                   | NONE           |              | Г     |
|   |   |   | 1  | n + 1                        | JAN ALAN                                 |                     |                | )            | -     |
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| <ol> <li>GENERATOR S/OFFEROR<br/>marked and labeled/placard</li> </ol>  | S CERTIFICATION: I hereby declare that the c<br>ed, and are in all respects in proper condition for | contents of this consignment are full<br>transport according to applicable in | y and accurately des<br>itemational and nation | cribed above<br>onal governm | by the proper shi<br>nental regulations. | pping name          | , and are clas | sified, pack | ageo  |
| Senerator's/Offeror's Printed/Type  |   | Signature   | 20P6   | 02/10                        | CADE ) F                                 | REE C               | → Mon          | th Day       | 11    |
| 6. International Shipments<br>Fransporter signature (for exports  |   | Export from U.S.  | Port of ent<br>Date leaving                    |                              |  |                     |                |              |       |
| 7. Transporter Acknowledgment or<br>ransporter 1, Pfinted/Typed Nam   |   | Signature   | 1  | -                            | -7                                       | ,                   | Mont           | th Day       |       |
| HOINI   | NELKI   | WI.   | An   | 16                           | 11                                       | 11                  | 111            | mo           | 11    |
| ransporter 2 Printed/Typed Nam  |   | Signature   |  | 11                           | 100                                      | -                   | Mon            | th Day       | -     |
|   |   | -   | 1  |                              |  |                     |                |              | 1     |
| 8. Discrepancy  |   |   | /  | -                            | 4  |                     |                |              |       |
| 8a. Discrepancy Indication Space  | e Quantity  | Type '  | Residue  | 4                            | Partial Reje                             | ection              |                | Full Rej     | ectio |
|   |   |   |  |                              |  |                     |                |              |       |
| Ot Albertata Facility for Consens   | ort.  |   | Shipping Document                              | Tracking Nu                  |  | limber              |                |              |       |
| 8b. Alternate Facility (or General  | or)   |   | Shipping Document                              | Tracking Nu                  | U.S. EPA ID N                            | lumber              |                |              | _     |
| acility's Phone:  |   |   | Shipping Document                              | Tracking Nu                  |  | lumber              |                |              |       |
| acility's Phone:  |   |   | Shipping Document                              | Tracking Nu                  |  | lumber              | Mor            | nth Da       | y 1   |
| 8b. Alternate Facility (or General<br>Facility's Phone:<br>8c. Signature of Alternata Facility<br>9. Report Management Method |   |   | Shipping Document                              | Tracking Nu                  |  | lumber              | Mor            | nth Da       | 1     |
| acility's Phone:<br>Bc. Signature of Alternate Facility   | r (or Generator)  |   | Shipping Document                              | Tracking Nu                  |  | lumber              | Mor            | nth Da       | 1     |
| acility's Phone:<br>8c. Signature of Alternata Facility<br>9. Report Management Method  | r (or Generator)  Codes (i.e., codes for treatment, disposal, and re                                | ecycling systems)   | Shipping Document                              | Tracking Nu                  | U.S. EPA ID N                            | lumber              | Mor            | nth Da       | y     |
| facility's Phone:<br>8c. Signature of Alternata Facility<br>9. Report Management Method                                       | r (or Generator)  | ecycling systems)   |  | Tracking Nu                  | U.S. EPA ID N                            | tumber              | Mor            | 1            | 1     |



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| SHIPPING   | Generator ID Number   | 14001  |  | Emergency Response P                     | hone          | 4. Shipping           | Document 1          | racking Number       | 231          |
|--|---|--|--|--|---------------|-----------------------|---------------------|----------------------|--------------|
| 5. Generator's Name and  | Mailing Address   | 5.45   | Ge   | nerator's Site Address (if               | different tha | an mailing address    |                     | 0010                 | 707          |
| Generator's Phone:   | 7.TTN 34.   | L BLECTRIC CO.<br>ATT CALACONE<br>MICS AVE<br>LD, MA 01201 | 9  | ENERAL ELECTION AVIOLOGICAL MAINTENAMENT | E CO          |                       |                     |                      |              |
| 6. Transporter 1 Company PAGE STC LESS   | Name  |  |  |  |               | U.S. EPAID N          |                     |                      | 947          |
| 7. Transporter 2 Company   | Name  |  |  |  |               | U.S. EPA ID N         | lumber              |                      |              |
| 8. Designated Facility Nan   | ne and Site Address   |  | D.L.   |  |               | U.S. EPA ID N         | lumber              |                      |              |
| Facility's Phone: 314  | 265-1744 KERREY,  | PA 15846   |  |  |               | 803                   | 8.                  | E Q                  | 173          |
|  | cription (including Proper Shipping) (if any))                    | g Name, Hazard Class, ID N                                 | lumber,  | 10. Containe<br>No.                      | rs<br>Type    | 11. Total<br>Quantity | 12. Unit<br>Wt/Vol. | 13. Codes            |              |
| 1, NUN HEIS  | OLATED MATERIAL   | 4  |  | 1  | DŤ            | SINA                  | 1¢                  | NONE                 | -            |
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| 4.   |   |  |  | Hitari                                   |               |                       |                     |                      | -            |
|  | EROR S CERTIFICATION: I her<br>placarded, and are in all respects |  |  |  |               |                       |                     | , and are classified | , packaged,  |
| Generator's Offeror's Print  | ed/Typed Name   |  | Signat   |  | CADE          | PER C                 | BUT                 | Month                | Day Y        |
| 16. International Shipment<br>Transporter signature (for   | L_Import to U.S.  |  | Export from U.S.   | Port of entry<br>Date leaving            |               |                       |                     |                      |              |
| 17. Transporter Acknowled<br>Transporter 1 Printed/Type  | gment of Receipt of Shipment<br>d Name                            | 11   | Signati  | re ()                                    | 1             | 70.                   | 10                  | Month                | Day Ye       |
| Transporter 2.Printed/Type   | Name  | 6/9  | Signat   | rre /                                    |               | CECA                  |                     | Month                | Day   W      |
| 18 Discrepancy   |   |  |  |  | -             |                       |                     |                      |              |
| 18a. Discrepancy Indicatio   | n Space Quantity  | □ <sub>Tj</sub>  | /pe  | Residue                                  |               | Partial Rej           | ection              | □F <sub>1</sub>      | di Rejection |
| 18b. Alternate Facility (or 0  | Generator)  |  |  | Shipping Document 1                      | racking Nur   | U.S. EPA ID N         | Number              |                      | _            |
| Facility's Phone:  | 4   |  |  |  |               | 1                     |                     | -                    |              |
| 18c. Signature of Alternate  | Facility (or Generator)   |  |  |  |               |                       |                     | Month                | Day          |
| 9. Report Management M   | lethod Codes (i.e., codes for treat                               | ment, disposal, and recyclin                               |  |  |               |                       |                     |                      | 1            |
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| TARTER STATE OF THE STATE OF TH | mer or Operator: Certification of n                               | eceipt of shipment except a                                | A STATE OF THE ASSESSMENT OF THE STATE OF TH |  |               |                       |                     |                      |              |
| Printed/Typed Name   |   |  | Signat   |  |               |                       |                     |                      |              |



| SHIPPING<br>DOCUMENT   | 1, Generator ID Number MAD 0 0 1 0 5  | 0093                       | 1 0              | mergency Response     |                | 4. Shipping I          | Z 0                  | 031893    | 32      |
|--|---|----------------------------|------------------|-----------------------|----------------|------------------------|----------------------|-----------|---------|
| Generator's Name and   | ORMSOLD R   |                            | 15               | arator's Site Address | VE             | an mailing addres      | 5)                   |           |         |
| 6. Transporter 1 Company   | Name  |                            |                  |                       |                | U.S. EPAID N           | umber<br>9 T #       | 9099      | 4.7     |
| 7, Transporter 2 Company   | Name  |                            |                  |                       |                | U.S. EPA ID N          | umber                |           |         |
| 8. Designated Facility Nam   | ne and Site Address ADE - ORES<br>633 TOBY E  | CAD                        | L                |                       |                | U.S. EPA ID N          | umber                |           |         |
| Facility's Phone:  | 265-1744 MERSEY, PA   | 15846                      |                  |                       |                | NOT                    | R I                  | 1 9       | 7.5     |
| HM and Packing Grou  |   | me, Hazard Class, ID Nur   | nber,            | 10. Contai<br>No.     | Type           | 11. Total<br>Quantity  | 12. Unit<br>Wt./Vol. | 13. Codes |         |
|  | CEATHOMATERIAL .  |                            |                  | 1                     | D T            | estimate<br>20,170     | К                    | PROPE     |         |
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|  | EROR S CERTIFICATION: I hereby<br>placarded, and are in all respects in pro-<br>ed/Typed Name |                            |                  | international and nat |                |                        | pping name, a        | Month Da  |         |
| 16. International Shipment   | S Import to U.S.  |                            | Export from U.S. | Port of er            | ntry/exit      | DE PO                  | GE                   | 111 100   | 6 1     |
| Transporter signature (for<br>17. Transporter Acknowled)<br>Transporter 1 Printed/Type | gment of Receipt of Shipment  |                            | Signatur         | Date leav             | ing U.S.       | , 7                    | , ,                  | Month Day | y Y     |
| Transporter 2 Printed/Type   | NDY N   | leckin                     | Signatur         | 11                    | we             | 7/1                    | 11                   | Month Da  | 611     |
| 18. Discrepancy  |   |                            | * *              |                       | 1              |                        |                      |           | 1       |
| 18a. Discrepancy Indication  | n Space Quantity  | Туре                       | F                | Residue               |                | Partial Reje           | ection               | Full Re   | jection |
| 18b, Alternate Facility (or 0  | Senerator)  |                            |                  | Shipping Documer      | nt Tracking Nu | mber:<br>U.S. EPA ID N | umber                | -         | _       |
| Facility's Phone:<br>18c, Signature of Alternate                                       | Facility (or Generator)   |                            |                  |                       | Ĥ.             | 1                      |                      | Month Da  | ау      |
| Report Management M  | lethod Codes (i.e., codes for treatment   | l, disposal, and recycling | systems)         |                       |                |                        |                      |           | 1       |
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| 20. Designated Facility Ow<br>Printed/Typed Name                                       | mer or Operator: Certification of receip  | of shipment except as n    |                  | n                     |                |                        |                      | Month P.  | W - 3   |
| r inteur typed Name  |   |                            | Signatur         |                       |                |                        |                      | Month Da  | 1       |



| DOCUMENT   | MADOOJOBA   | 093                        | 2 Page 1 of                 | 3. Emergency Respons<br>(800) 424-9300  | se Phone    | 4. Shipping  |                   | Tracking Nur<br>031 |               | 13       |
|--|---|----------------------------|-----------------------------|---|-------------|--|-------------------|---------------------|---------------|----------|
| Generator's Phone: 413   | Mailing Address GENERAL BLEC ATTN MATT CA 159 PLASTICS A PITTSFIELD, MA   | ALACONE<br>AVE             |                             | Generator's Site Addres<br>CHANDRAL ELLAC<br>159 PLASTICE /<br>PITTSFIELD, M. | TRIC CO     | han mailing addres   | s)                |                     |               |          |
| 6 Transporter 1 Company FAGE ETC_INC   | Name  |                            |                             |   |             | U.S. EPA ID N  |                   | 6 9 6               | 9 9           | 4        |
| 7. Transporter 2 Company   | Name  |                            |                             |   |             | U.S. EPA ID N  | umber             |                     |               | 1        |
| 51.4   | ne and Site Address ACH _ CIRCENTS 635 TOBY ROAD 265-1744 KERSHY, PA 15   | D                          |                             |   |             | U.S. EPAID N   |                   | B O                 |               | 7        |
| acinty of fiorie.  | scription (including Proper Shipping Name, H  | Hazard Class, ID Number,   |                             | 10. Conta   | _           | 11. Total  | 12 Unit<br>Wt/Vol |                     | Codes         |          |
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|  | FEROR S CERTIFICATION: I hereby decla<br>placarded, and are in all respects in proper of  |                            |                             |   |             |  | pping nami        | e, and are clas     | ssified, pack | aged     |
| enerator's/Offeror's Print   | ed/Typed Name   |                            | Sig                         | nature  | MI          | Y June   | SA                | Mon Mon             | nth Day       |          |
| ienerator's/Offeror's Print<br>ROBBRT PAPALI<br>6. International Shipment  | s Import to U.S.  |                            | Export from U               |   | entry/exit: | ACHUS Y  | SA<br>FUL         | E I                 | nth Day       |          |
| ienerator's/Offeror's Printe<br>ROBHRT PAPALI<br>6. International Shipment<br>fransporter signature (for<br>7. Transporter Acknowled<br>rensporter 1 Printed/Type  | s Import to U.S. exports only): gment of Receipt of Shipment d Name   |                            | Şis                         |   | (CO)        | ACHUS)   | SA<br>OL          | Mor<br>Mor<br>Mor   | nth Day       | )   (    |
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| Senerator's/Offeror's Prints ROBERT PAPAL  6. International Shipment Fransporter signature (for 7. Transporter Acknowled earst offer 1 Printed/Type Fransporter 2 Printed/Type  8. Discrepancy  8a. Discrepancy Indicatio  8b. Alternate Facility (or Conscillate)  6. Signature of Alternate  7. Report Management  | Import to U.S. exports only): gment of Receipt of Shipment d Name  A Name  O Quantity  Generator)  Facility (or Generator)  | posal, and recycling syste | Şis<br>Sig                  | Date lea  | entry/exit: | Partial Rejulumber: U.S. EPA ID N  |                   | I Mon               | nth Day       | )        |



| SHIPPING  | Generator ID Number  | 2. Page 1 of 3. E | Emergency Response Phone   | 4. Shipping D              | ocument Tra         | cking Number | 040            |
|---|--|-------------------|--|----------------------------|---------------------|--------------|----------------|
| DOCUMENT  | MABO 0 2.0.8 4 0 9 3   | 41 0              | 800) 424-9300  | Z                          |                     | 318          | 946            |
| 5. Generator's Name a                           | GENERAL ELECTRIC C<br>ATTN:MATT CALACOI<br>159 PLASTICS AVE  | XO GH<br>15       | erator's Site Address (if difference of the Comment | 30                         | )                   |              |                |
| 6. Transporter 1 Comp                           |  |                   | 1  | U.S. EPA ID No             | ımber               |              |                |
| PAGE STC ,INC                                   |  | 12                | 1  | NYD                        | 9 8 6               | 9 6 9        | 9 4            |
| 7 Transporter 2 Comp                            | any Name   |                   |  | U.S. EPA ID Nu             | imber               |              |                |
| 8. Designated Facility                          | Name and Site Address ADS - GREENTREE LA   | NOFILL            |  | U.S. EPA ID No             | umber               |              | 1              |
| Facility's Phone: 81                            | 4 265-1744 KERSEY, PA 15846  | 32 - 1 - 22       | and the same   | NOT                        | RE                  | Q            | 1 2            |
| 9a. 9b. U.S. DOT<br>HM and Packing G            | Description (including Proper Shipping Name, Hazard Clas<br>froup (if any))  | s, ID Number,     | 10. Containers No. Type  | 11. Total<br>Quantity      | 12 Unit<br>Wt./Vol. | 13. Cod      | es             |
| 1 NON RE  | OULATED MATERIAL   |                   | 100000   | 图4/4/4图                    | 2 1                 | NOME         |                |
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| 6. International Shipm<br>Fransporter signature | LImport to U.S.  | Export from U.S.  | Port of entry/exit:<br>Date leaving U.S.:  | -                          |                     | -111         | 19             |
| 7. Transporter Acknow                           | ledgment of Receipt of Shipment  |                   | 1  |                            |                     |              |                |
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| ransporter 2 Printed/T                          | yped Name  | Signatur          | e C  |                            |                     | Month        | Day            |
| 8. Discrepancy                                  | 1  |                   |  |                            | _                   | _            |                |
| 8a. Discrepancy Indic                           | ation Space Quantity   | Туре              | Residue  | Partial Reje               | ction               |              | Full Rejection |
| 8b. Alternate Facility (                        | or Generator)  |                   | Shipping Document Tracking   | g Number:<br>U.S. EPA ID N | umber               |              |                |
| Servinostrato ( domy (                          |  |                   |  | 1                          | -                   |              |                |
| acility's Phone:<br>8c. Signature of Altern     | ate Facility (or Generator)  |                   | H.   |                            |                     | Month        | Day            |
| <sup>o</sup> Report Managemen                   | nt Method Codes (i.e., codes for treatment, disposal, and r  | ecycling systems) |  | - 1                        |                     | 1            |                |
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| SHIPPING<br>DOCUMENT   | 1. Generator ID Number MAPO 0 1 0 8  | 4093   | 2. Page 1 of                           | 3, Emergency Response<br>(300) 424-9300                                       |                                | Z                      | Z 0                 | Tracking Nur<br>031 | 894       | 7      |
|--|--|--|--|---|--------------------------------|------------------------|---------------------|---------------------|-----------|--------|
| 5. Generator's Name and Generator's Phone: 413   | OENERAL EI<br>ATTNMATT<br>159 PLASTIC  | CALACONE<br>S AVE  |  | Generator's Site Address<br>GENERAL ELEC-<br>159 PLASTICS A<br>PIPTSFUELD, MA | VE                             | an mailing addres      | ss)                 |                     |           |        |
| 6 Transporter 1 Company<br>FAOR ETC. INC   | Name   |  |  | -   |                                | U.S. EPA ID N          |                     | 5 9 5               | 9 0       | 4 7    |
| 7. Transporter 2 Company   | Name   |  |  |   |                                | U.S. EPA ID N          |                     |                     |           |        |
| 8 Designated Facility Nam  | ne and Site Address ADS - OPEN   |  |  |   |                                | U.S. EPA ID N          | lumbar              |                     |           |        |
| 5. Dooignatou / domy rear  | 635 TORY RO  | AD   |  |   |                                | O.O. LI AID!           | ·                   |                     |           |        |
| t and the state of | 265-1744 KERSEY, PA  |  |  |   |                                | NOT                    | R                   | BQ                  | 1         | 7      |
| 9a. 9b. U.S. DOT Des<br>HM and Packing Grou  | cription (including Proper Shipping Nam<br>p (if any))   | e, Hazard Class, ID Numb                                     | er,                                    | 10. Contain<br>No.  | Type                           | 11. Total<br>Quantity  | 12. Unit<br>Wt/Vol. | 13.                 | Codes     |        |
| 1. NOW REGI  | ULATED MATERIAL  |  |  |   |                                | STARK                  | E                   | MONE                |           | Ľ      |
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|  |  |  |  |   |                                |                        | 100                 |                     |           |        |
| Special Handling Instru  | ctions and Additional Information  | R Service Contracte  | ed by GENER                            | AL ELECTRIC CO  | 1-1-100                        | N-REOULA               | THO SC              | 37.                 |           | _      |
| marked and labeled/p   | EROR S CERTIFICATION: I hereby de<br>lacarded, and are in all respects in prop<br>d/Typed Name<br>(O (ACENT FOR OH)) | eclare that the contents of<br>per condition for transport a | this consignment<br>according to appli | cable international and nati  | scribed above ional government | nental regulations     | EUT                 | e, and are clas     | th Day    |        |
| 6. International Shipments   | I Import to U.S.   |  | Export from                            | J.S. Port of en   | try/exit:                      | nacc                   | -                   |                     | 11.5      |        |
| ransporter signature (for<br>7. Transporter Acknowledge  | exports only):<br>Innent of Receipt of Shipment  |  |  | Date leavi  | ing U.S.:                      |                        |                     |                     |           |        |
| ransporter 1 Printed/Typer   | Name<br>Agli A720  | - 4  |  | nature John   | (/2                            | 1                      |                     | Mon                 | 119       | 1      |
| ransporter 2 Printed/Type  | d Name   |  | Sig                                    | natule  | , ,                            |                        |                     | Mon                 | th Day    | 1      |
| B. Discrepancy   |  |  |  |   |                                |                        |                     |                     |           | -      |
| Ba. Discrepancy Indication   | Space Quantity   | Туре   |  | Residue   |                                | Partial Rej            | ection              | [                   | Full Reje | ection |
| Bb. Alternate Facility (or G   | enerator)  |  | ~_                                     | Shipping Documen  | t Tracking Nu                  | umber:<br>U.S. EPAID N | Number              |                     |           |        |
| acility's Phone:   |  |  |  |   |                                | 1                      |                     |                     |           |        |
| 8c. Signature of Alternate   | Facility (or Generator)  |  |  |   |                                |                        |                     | Mo                  | nth Day   | 1      |
| Report Management M  | ethod Codes (i.e., codes for treatment,  | disposal, and recycling sys                                  |  |   |                                |                        |                     |                     |           |        |
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| Designated Facility Own  |  |  | _                                      |   |                                |                        |                     |                     |           |        |
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| rinted/Typed Name  | ner or Operator: Certification of receipt  | of shipment except as note                                   |  | nature  |                                |                        |                     | Mo                  | nth Day   |        |

| SHIPPING   | 1. Generator   |   | 1  |  | 3, Emergency F   |                                    | 11000   | 4. 5/14  | 77        |  | Tracking N    |  | A O         |
|--|--|---|--|--|--|------------------------------------|---|--|-----------|--|---------------|--|-------------|
| DOCUMENT<br>Generator's Name an  |  | 80101409  | 3  | 1  | Generator's Site   |                                    | if different  | than mailing :   | 44        |  | 00.           | .03  | 40          |
| Generator's Phone: 41  | 3 494-5958   | GENERAL ELECTRIC<br>ATTN MATT CALAC<br>159 PLASTICS AVE<br>PITTSFELD, MA 01   | DONE   |  | GENERAL<br>159 PLAST   | ELEC<br>TOS A                      | VE CO   |  | ouress)   |  |               |  |             |
| Transporter 1 Compa  | iny Name   |   |  |  |  |                                    |   | U.S. EP  |           |  |               |  |             |
| PAGE STC, INC  |  |   |  |  |  |                                    |   |  | _         |  | 6.9           | 5 9 9  | 4           |
| Transporter 2 Compa  | iny Name   |   |  |  |  |                                    |   | U.S. EP  | A ID Nur  | mber   |               |  |             |
| Designated Facility N  | ame and Site Address   | \$  |  |  |  | -                                  |   | U.S. EP  | A ID Nice | mhar   | -             |  |             |
|  |  | ADS - ORSENTRES!  | LANDFILL   |  |  |                                    |   | 0.0.0.   | 10110     | The second   |               |  |             |
| Facility's Phone:  | 4 265-1244   | KEREEY, DA. 15846   |  |  |  |                                    |   | N C  | T         | R  | EQ.           | 1  | 1,          |
|  | escription (including F  | Proper Shipping Name, Hazard (  | Class, ID Number,  |  | 10<br>N  | ). Contair<br>o.                   | Type  | 11. Total<br>Quantity  |           | 12. Unit<br>Wt./Vol.   | 13            | Codes  |             |
| 1 NON RE   | AM DETAJJO   | TERIAL  |  |  |  |                                    |   | ESTIM  | E         |  | NORE          |  |             |
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| TRAILER N  5. GENERATOR S/O  | FFEROR S CERTIFIC  | Z33 (+1)  | MATE PI<br>the contents of this                          | PO ±   | E IIIIT  | 719<br>FRIA                        | Z6<br>KEP<br>scribed abo  | ve by the prop   | er ships  | b RE   | aio de        |  | ackaged     |
| TRAILER N  5. GENERATOR S/O marked and labele  | FFEROR S CERTIFIE<br>diplacarded, and are  | APPROVAL NUMBER   | MATE PI  | PO ±   | E IIIIT  | 719<br>FRIA                        | Z6<br>KEP<br>scribed abo  | ve by the prop   | er ships  | b RE   | a, and are d  | essified, pa   | ackaged     |
| TRAILER N  15. GENERATOR S/O marked and labele  Generator's/Offeror's Pri ROBBELT PAPA   | FFEROR S CERTIFIC d/placarded, and are   | Z33 CATION: I hereby declare that in all respects in proper condition   | MATE PI  | PO ±   | E IIII are fully and accurate international  | 719<br>FRIA                        | Z6<br>KEP<br>scribed abo  | ve by the prop   | er ships  | b RE   | a, and are d  | essified, pa   |             |
| 5. GENERATOR S/O<br>marked and labele<br>Generator's/Olleror's Pri   | FFEROR S CERTIFIE d/placarded, and are inted/Typed Name  | Z33 CATION: I hereby declare that in all respects in proper condition   | MATE PI<br>the contents of this<br>on for transport acco | PO ±   | are fully and accurable international  | 719 ED LA rately des               | Z6<br>Scribed about a govern  | ve by the prop   | er ships  | b RE   | a, and are d  | essified, pa   |             |
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| Special Reduction and Additional Information  E. Designation Facility Name and Site Address Applications of Address Applications and Additional Information Research Information Special Information Special Information Special Information Special Information Special Information Special Information Special Information Special Information Special Information Special Information Special Research Information Special Information   | SHIPPING                           |                       | or ID Number                            | 2. Page 1 of      | 3. Emergency Respons                     | e Phone       | 4. Shipping   | Document | Tracking Numb     | 0040            |
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| GENERAL ELSC-TRAC COLORS AND STREET AND AND AND AND AND AND AND AND AND AND   | DOCUMENT                           |                       | 0001084091                              |                   | (809) 424-9300<br>Consentedo São Address | /il different |               |          | OTTO              | 3949            |
| Triansporter 2 Company Name and Size Address A.C.B. CRESHITECEST LANCETED.  E. Designated Facility Name and Size Address A.C.B. CRESHITECEST LANCETED.  E. Designated Facility Name and Size Address A.C.B. CRESHITECEST LANCETED.  E. Designated Facility Name and Size Address A.C.B. CRESHITECEST LANCETED.  E. Designated Facility Name and Size Address A.C.B. CRESHITECEST LANCETED.  E. Designated Facility Name and Size Address A.C.B. CRESHITECEST LANCETED.  E. Designated Facility Name and Size Address A.C.B. CRESHITECEST LANCETED.  E. Designated Facility Name and Size Address A.C.B. CRESHITECEST LANCETED.  E. Designated Facility Name and Additional Information Size Services Contracted by CRESHITECEST LANCETED.  E. Designated Facility Name and Additional Information Size Services Contracted by CRESHITECEST LANCETED.  E. Designated Facility Name and Additional Information Size Services Contracted by CRESHITECEST LANCETED.  E. Designated Facility Name and Additional Information Size Services Contracted by CRESHITECEST LANCETED.  E. Designated Facility Name and Additional Information Size Services Contracted by CRESHITECEST LANCETED.  E. Designated Facility Name and Additional Information Size Services Contracted by CRESHITECEST LANCETED.  E. Designated Facility Name and Additional Information Size Services Contracted by CRESHITECEST LANCETED.  E. Designated Facility Name Services Size Services Contracted by CRESHITECEST LANCETED.  E. Designated Facility Name Services Size Services Contracted Services Service  | Generator's Phone: 41              | 1454                  | ATTN MATT CALACOR                       | VE.               | GENERAL ELEC<br>159 PLASTICS A           | VE C          |               | 55)      |                   |                 |
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| 8. Dissiprated Facility Name and Site Address April CHESTITICAL STREAM S  |                                    | Maina                 |   |                   |  |               |               |          | 6 9 6             | 9 9 1           |
| Facility a Phone #14 265.1744 SEEDSHITY Park 1.5845  \$1. 80 U.S. COT Description (lockday Proper Shipping Name, Hazard Class, ID Number.  10. Containers  11. No. 17pe 1.1649 V.J. Co. U.S. Cotton Control Con | 7. Transporter 2 Compar            | y rvarne              |   |                   |  |               | U.S. EPA ID I | vumper   |                   |                 |
| Facility in Phone: #14 265-1748 SEEDIMENT Pol. 15846  Sa. 10 U.S. COT Description (Incidency Proper Shipping Name, Hazard Class, ID Number.  10. Containers  10. Containers  11. NCNN REDOUGLATED MATERIAL  12. 2  13. 3  3. 3  3. 3  4. 4  14. 17. 19. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18  | 8. Designated Facility Na          | me and Site Addre     | 96S                                     | mana a            |  |               | U.S. EPA ID N | Number   | -                 |                 |
| Security of the Continues of the Continu  |                                    |                       | 635 TORY ROAD                           | ALFRZ.            |  |               | INOT          | R        | EQ                | 1.2             |
| Special Handling behaudions and Additional Information  2.  3.  3.  5. Special Handling behaudions and Additional Information  Set District, AND DEBUREA APPROVAL NOTABLES 15869 PO # 111171926  TRAILER NR BRIBBER D-1636 11  NATERIAL FROM SUPERIAL PROMISE SUPERIAL ELECTRIC OF REQUIRED 15869 PO # 111171926  TRAILER NR BRIBBER D-1636 11  NATERIAL FROM SUPERIAL PROMISE SUPERIAL PROMISE SUPERIAL ELECTRIC OF REQUIRED 15869 PO # 111171926  TRAILER NR BRIBBER D-1636 11  NATERIAL FROM SUPERIAL PROMISE SUPERIAL PROMISE SUPERIAL ELECTRIC OF REQUIRED 15869 PO # 111171926  TRAILER NR BRIBBER D-1636 11  TRAILER NR BRIBBER D-1636 11  Separate Superial Promise Superial  | 9a. 9b U.S. DOT De                 | escription (including | Proper Shipping Name, Hazard Clas       | s, ID Number,     |  | 1             |               | 12. Unit |                   |                 |
| 3.  Second Handling Instructions and Additional Information  In Superior Committee Com  | 1110                               | * /                   | ATERIAL                                 |                   | No.                                      | Туре          |               | 7 110    | MUNICIPAL         |                 |
| Special Handling Instructions and Additional Information  Special Handling Instructions and Additional Information  PO ## 11117 1926  NATERIAL PROM SUPPER DESCRIPTION: I handly declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, parameter and and behelplacanted, and are in all respects in proper condition for transport according to applicable informational simpnents are guitations.  Gameracor's Officer's Printed (1) ped Name  Signature  Signature  Signature  Signature  Signature  Signature  Signature  Signature  Month Di Transporter Acknowledgment of Receipt of Shipmant Transporter Printed (1) ped Name  Signature  Signature  Signature  Month Di Transporter Printed (1) ped Name  Signature  Signature  Month Di Transporter Acknowledgment of Receipt of Shipmant Transporter Printed (1) ped Name  Signature  Signature  Month Di Transporter Acknowledgment of Receipt of Shipmant Transporter Printed (1) ped Name  Signature  Month Di Transporter Acknowledgment of Receipt of Shipmant Transporter Printed (1) ped Name  Signature  Month Di Transporter Acknowledgment of Receipt of Shipmant Transporter Printed (1) ped Name  Signature  Month Di Transporter Acknowledgment of Receipt of Shipmant Transporter Printed (1) ped Name  Signature  Month Di Transporter Acknowledgment of Receipt of Shipmant Transporter Printed (1) ped Name  Signature  Month Di Transporter Acknowledgment of Receipt of Shipmant Transporter Acknowledgment of Receipt (or Generator)  Report Management Method Codes (Le., codes for treatment, disposal, and recycling systems)  1. 2 20 Designated Facility (over or Operator: Certification of receipt of shipment except as noted in Item 18a  | ATEXT AGE                          | CARASE MIC AND        | NA MICONE                               |                   |  |               |               | 1        | Private.          |                 |
| Second Handling Instructions and Additional Information  SECONDATE NO REPORT ADDITIONAL PROPERTY ALL PROPERTY AS SUPERIOR SUPERIOR AND DESCRIPTION TO THE CONSTRUCTION OF THE CONSTRUCTION O  |                                    |                       |   |                   |  | DT            | 21,050        | K        |                   |                 |
| Special Hondling Instructions and Additional Information  Special Hondling Instructions and Additional Information  PO ## IIII 7 19 Z 6  NATERIAL PRON SUPER DESCRIPTION  NATERIAL PRON SUPER LINE PRON SUPER LINE  15. GENERATOR SOFFERORS CERTIFICATION: I hareby declare that the contents of this consignment are fully and accumulately described above by the proper shipping name, and are classified, part marked and labeled placarized, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.  Cananzian's Officor's Printed Printe  | 2.                                 |                       |   |                   |  |               |               |          |                   |                 |
| Special Handling Instructions and Additional Information  SECOLARY AND DESIGNA APPRICATION: I hareby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, par marked and labeled placorated, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.  Canonian's Offeror's Printed Pyped Name  Constructions Shippiness   Import to U.S.   Export from U.S.   Port of entrylexix   Date leaving U.S.    11 Transporter Ashanoidegement of Receipt of Shipment  Transporter Ashanoidegement of Receipt of Shipment  Transporter Printed Pyped Name   Signature   Month   Discrepancy Indication Space   Quantity   Type   Residue   Partial Rejection   Full Rill Shipping Document Tracking Number  18b. Alternate Facility (or Generator)   U.S. EPA ID Number    Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)   1.   2.   3.   4.    20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in liter 18a  |                                    |                       |   |                   |  |               | 1             |          |                   |                 |
| Special Handling Instructions and Additional Information  SECOLARY AND DESIGNA APPRICATION: I hareby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, par marked and labeled placorated, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.  Canonian's Offeror's Printed Pyped Name  Constructions Shippiness   Import to U.S.   Export from U.S.   Port of entrylexix   Date leaving U.S.    11 Transporter Ashanoidegement of Receipt of Shipment  Transporter Ashanoidegement of Receipt of Shipment  Transporter Printed Pyped Name   Signature   Month   Discrepancy Indication Space   Quantity   Type   Residue   Partial Rejection   Full Rill Shipping Document Tracking Number  18b. Alternate Facility (or Generator)   U.S. EPA ID Number    Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)   1.   2.   3.   4.    20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in liter 18a  |                                    |                       |   |                   |  |               |               |          |                   |                 |
| 15. GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the conlants of this consignment are fully and accurately described above by the proper shipping name, and are classified, parmarked and labelishiplacarded, and are in all respects in proper condition for transport according to applicable infernational and national governmental regulations.  Ganerator's Offeror's Printed Typed Name  Senature  Month Dr.  Transporter Acknowledgment of Receipt of Shipment  Transporter Acknowledgment of Receipt of Shipment  Transporter 2 Printed Typed Name  Signature  Month Dr.  Shipping Document Tracking Number:  18b. Alternate Facility (or Generator)  Facility's Phone:  18c. Signature of Alternate Facility (or Generator)  Month Dr.  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. 2. 3. 4.  20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a   | 3.                                 |                       |   |                   |  |               |               |          |                   |                 |
| 15. GENERATOR S/OFFEROR S CERTIFICATION: I hereby declare that the conlants of this consignment are fully and accurately described above by the proper shipping name, and are classified, parmarked and labelishiplacarded, and are in all respects in proper condition for transport according to applicable infernational and national governmental regulations.  Ganerator's Offeror's Printed Typed Name  Senature  Month Dr.  Transporter Acknowledgment of Receipt of Shipment  Transporter Acknowledgment of Receipt of Shipment  Transporter 2 Printed Typed Name  Signature  Month Dr.  Shipping Document Tracking Number:  18b. Alternate Facility (or Generator)  Facility's Phone:  18c. Signature of Alternate Facility (or Generator)  Month Dr.  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. 2. 3. 4.  20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a   |                                    |                       |   |                   |  |               |               |          |                   |                 |
| 15. GENERATOR SIOFFEROR'S CERTIFICATION: I hereby declare that the conlents of this consignment are fully and accurately described above by the proper shipping name, and are classified, parmarked and labeled placarded, and are in all respects in proper condition for transport according to applicable infernational and national governmental regulations.  Generator's Offeror's Printed Typed Name  16. International Shipments  Transporter Absnowledgment of Receipt of Shipment  Transporter Absnowledgment of Receipt of Shipment  Transporter 7 Printed Typed Name  Signature  Signature  Month Di  Shipping Document Tracking Number:  18b. Alternate Facility (or Generator)  Facility's Phone:  18c. Signature of Alternate Facility (or Generator)  Month Di  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. 2. 3. 4.  20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in item 18a  | -                                  |                       |   |                   |  | -             |               |          | -                 | -               |
| 15. GENERATOR SIOFFEROR'S CERTIFICATION: I hereby declare that the conlents of this consignment are fully and accurately described above by the proper shipping name, and are classified, parmarked and labeled placarded, and are in all respects in proper condition for transport according to applicable infernational and national governmental regulations.  Generator's Offeror's Printed Typed Name  16. International Shipments  Transporter Absnowledgment of Receipt of Shipment  Transporter Absnowledgment of Receipt of Shipment  Transporter 7 Printed Typed Name  Signature  Signature  Month Di  Shipping Document Tracking Number:  18b. Alternate Facility (or Generator)  Facility's Phone:  18c. Signature of Alternate Facility (or Generator)  Month Di  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. 2. 3. 4.  20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in item 18a  |                                    |                       |   |                   |  |               |               |          |                   |                 |
| 15. GENERATOR SIOFFEROR S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, par marked and labelied/placanded, and are in all respects in proper condition for transport according to applicable infernational and national governmental regulations.  Generator's Offeror's Printed Typed Name  Senature  Month Discrepancy  16. International Shipments  Import to U.S.  Transporter Acknowledgment of Receipt of Shipment  Transporter Acknowledgment of Receipt of Shipment  Transporter 1 Printed Typed Name  Signature  Month Discrepancy  18. Discrepancy Indication Space  Quantity  Type  Residue  Pertial Rejection  Full Re  Shipping Document Tracking Number  18. Shipping Document Tracking Number  18. Signature of Alternate Facility (or Generator)  Month Discrepancy Indication Space  Quantity  According to spirature  Month Discrepancy  Shipping Document Tracking Number  18. Signature of Alternate Facility (or Generator)  Month Discrepancy  According to spirature  Month Discrepancy  Indication Space  Quantity  Month Discrepancy  According to spirature  Month Discrepancy  Shipping Document Tracking Number  Month Discrepancy  Indication Space  Quantity  Month Discrepancy  According to spirature  Month Discrepancy  Month Discrepancy  Month Discrepancy  According to spirature  Month Discrepancy  Month Discrepancy  According to applicable infernational and recipitation of recipit of shipment except as noted in litern 18a   | 100                                | -                     |   |                   |  |               |               |          |                   |                 |
| 16 International Shipments   Import to U.S.   Export from U.S.   Date leaving U.S.     17 Transporter signature (for exports only):   Date leaving U.S.     17 Transporter Acknowledgment of Receipt of Shipment     18 Discrepancy   Transporter 2 Printed Typed Name   Signature   Month     18 Discrepancy   Indication Space   Quantity   Type   Residue   Partial Rejection   Full Residue     18 Shipping Document Tracking Number:     18 Shipping Document Tracking Number:     18 Shipping Document Tracking Number:     18 Shipping Document Method Codes (i.e., codes for treatment, disposal, and recycling systems)     1  | marked and labeled                 | /placarded, and an    |   |                   |  |               |               |          | a, and are classi | fied, packaged. |
| Transporter signature (for exports only):  17. Transporter Acknowledgment of Receipt of Shipment  Trapeporter 1 Printed/Typed Name  Signature  Month Da  18. Discrepancy  18. Discrepancy Indication Space  Quantity  Trype  Residue  Partial Rejection  Full Re  Shipping Document Tracking Number:  18b. Alternate Facility (or Generator)  W.S. EPA ID Number  18c. Signature of Alternate Facility (or Generator)  Month Da  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. Obsignated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a  | ROBERT PAPAL                       | LO (AGENT             | FOR OE)                                 | The last          | maline<br>Type                           | AROAD         | K) FRE        | SE.      |                   | SO              |
| 18a. Discrepancy Indication Space Quantity Type Residue Partial Rejection Full Residue Shipping Document Tracking Number.  18b. Alternate Facility (or Generator) U.S. EPA ID Number  Facility's Phone:  18c. Signature of Alternate Facility (or Generator) Month D  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. 2. 3. 4.  | 16 International Shipmen           | L.J                   | mport to U.S.                           |                   |  |               |               |          | -                 | _               |
| Transporter 2 Printed/Typed Name  Signature  Signature  Signature  Month Date  18. Discrepancy  18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Residue  Shipping Document Tracking Number:  18b. Alternate Facility (or Generator)  U.S. EPA ID Number  18c. Signature of Alternate Facility (or Generator)  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. 2  2. 3  4. 4  20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a  |                                    |                       | of Shipment                             |                   | /  | 1             |               |          |                   |                 |
| 18a. Discrepancy Indication Space Quantity Type Residue Partial Rejection Full Residue Shipping Document Tracking Number.  18b. Alternate Facility (or Generator) U.S. EPA ID Number  Facility's Phone:  18c. Signature of Alternate Facility (or Generator) Month D  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. 2. 3. 4.  | Transporter 1 Printed/Typ          | And                   | den                                     | 1                 | ///                                      | 16            |               |          | 111               | ZO 1            |
| 18a. Discrepancy Indication Space Quantity Type Residue Partial Rejection Full Residue Shipping Document Tracking Number.  18b. Alternate Facility (or Generator) U.S. EPA ID Number  Facility's Phone:  18c. Signature of Alternate Facility (or Generator) Month D.  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. 2. 3. 4.   | transponer 2 Printed/Typ           | eu Name               |   | 5                 | greatife                                 |               |               |          | Month             | I I             |
| 18a. Discrepancy Indication Space Quantity Type Residue Partial Rejection Full Residue Shipping Document Tracking Number.  18b. Alternate Facility (or Generator) U.S. EPA ID Number  Facility's Phone:  18c. Signature of Alternate Facility (or Generator) Month D.  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. 2. 3. 4.   |                                    |                       |   |                   |  |               |               | -        |                   |                 |
| 18b. Alternate Facility (or Generator)  Facility's Phone:  18c. Signature of Alternate Facility (or Generator)  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. 2. 3. 4.  20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a   |                                    | on Space              | Quantity                                | Туре              | Residue                                  |               | Partial Rej   | ection   |                   | Full Rejection  |
| 18c. Signature of Alternate Facility (or Generator)  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. 2. 3. 4.  20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a  | 18b. Alternate Facility (or        | Generator)            |   |                   | Shipping Docume                          | nt Tracking N |               | Number   |                   | _               |
| 18c. Signature of Alternate Facility (or Generator)  Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)  1. 2. 3. 4.  20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a  | Facility's Phone:                  |                       |   |                   |  |               | 1             |          |                   |                 |
| 2. 3. 4.  20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a.  |                                    | te Facility (or Gene  | erator)                                 |                   |  |               |               |          | Mont              | h Day           |
| 2. 3. 4.  20. Designated Facility Owner or Operator: Certification of receipt of shipment except as noted in Item 18a.  | Report Management                  | Method Codes (I.e.    | , codes for treatment, disposal, and r  | ecycling systems) |  |               |               | _        |                   | 1               |
|   | -                                  | The second live       | 2.                                      |                   |  |               | 4.            |          |                   | -               |
|   |                                    |                       | A Vancous                               |                   |  |               |               |          |                   |                 |
| Printed typed warne Signature Month U   |                                    | wner or Operator:     | Certification of receipt of shipment ex |                   | ometices                                 |               |               |          | 115-11            | n Plau          |
|   | Printed Typed Name                 |                       |   | Si                | grature                                  |               |               |          | Mont              | h Day           |



| 1           |                | IPPING  | 1. Generator ID       | Number   | 172                       | 2. Page 1 of  | 3. Emergen | cy Respons         | e Phone       | 4. Shipping             |                   |                |               | -       |
|-------------|----------------|---|-----------------------|--|---------------------------|---------------|------------|--------------------|---------------|-------------------------|-------------------|----------------|---------------|---------|
| Ш           |                | CUMENT  |                       | 010740   | 9 3                       | Y             | (800) 43   |                    | // 100 · · ·  |                         |                   | 031            | 997           | .5      |
|             |                | enerator's Name and Me                              | A<br>A                | ENERAL ELEC<br>TIN MATT CAI<br>19 FLASTICS A'<br>ITTEFIELD, MA | LACONE<br>VE              |               |            | AL BLEC<br>STICE A | VE CO         | han mailing addres      | 5)                |                |               |         |
| H           | 6. Tra         | ansporter 1 Company N                               |                       |  |                           |               |            |                    |               | U.S. EPA ID N           |                   | 7.27           | 7             |         |
|             |                | HERC INC  |                       |  |                           |               |            |                    |               | NYD                     | 9.9               | 6 9 6          | 9 9           | 4.7     |
| Ш           |                | ensporter 2 Company N                               |                       |  |                           |               |            |                    |               | U.S. EPAID N            | umber             |                |               |         |
|             | 8. De          | esignated Facility Name                             | and Site Address      | BOLLA ES GRE<br>S TOBY ROAD                                    | ENTREE LANDS              | PLL           |            |                    |               | U.S. EPA ID N           | umber             |                |               |         |
|             | Facili         | ty's Phone: 114 2                                   | 165-1744 H            | MRSEY, PA 158  | 146                       |               |            |                    |               | NOI                     | 2                 | B. Q           | 1.            | 7 5     |
|             | 9a.<br>HM      | _   | iption (including Pro | per Shipping Name, Ha  | azard Class, ID Number    |               |            | 10. Conta<br>No.   | iners<br>Type | 11. Total<br>Quantity   | 12 Unit<br>WL/Vol | 13.            | Codes         |         |
| - NC        |                | 1. NON REGUL  | ATEDMAT               | TAIN   |                           |               |            |                    |               | SHAWIE                  | -                 | NONE           |               |         |
| RATC        |                |   |                       |  |                           |               |            | 1                  | DT.           | 20,00                   | ж                 |                |               |         |
| GENERATOR   |                | 2.  |                       |  |                           |               |            |                    |               |                         |                   |                |               |         |
|             | -              | 3   |                       |  |                           |               | -          |                    |               |                         | _                 |                |               | -       |
|             |                |   |                       |  |                           |               |            |                    |               |                         |                   |                |               |         |
|             |                | 4.  |                       |  |                           |               |            |                    |               |                         |                   |                |               |         |
|             |                |   |                       |  |                           |               |            |                    |               |                         | . 3               | -              |               | -       |
| 1 .         | 4 5            | pecial Handling Instruct                            | ions and Additiona    | Information L sur  | SHE SITS OF A THUR        | S BOT OF      | TOD OTHER  | ANTE CO            | DOMESTIC AT   | Ministra Wil            | n enema           | 1.000 ar       |               |         |
|             |                |   |                       | 1629 I   |                           | D. POF111     | 171926     |                    |               |                         |                   |                |               |         |
|             |                | GENERATOR S/OFFE<br>marked and labeled/pla          |                       |  |                           |               |            |                    |               |                         | pping name        | , and are clas | ssified, paci | kaged,  |
| ļ           | 10 40 00       | rator's/Offeror's Printed                           |                       | R CE)  |                           | 9             | gnature    | Jan                | 0)4           | CADIS E                 | ED G              | E III          |               | 10.1    |
| INT         |                | nternational Shipments<br>sporter signature (for ex |                       | rt to U.S.   |                           | Export from I | U.S.       | Port of e          |               |                         |                   |                |               |         |
| ER          | 17. Tr         | ransporter Acknowledgn                              | nent of Receipt of S  | hipment  |                           |               |            |                    |               |                         |                   |                |               |         |
| TRANSPORTER |                |   | al Well               | Olori  | 700                       | 10            | My C       | 16/                |               |                         |                   | Mor            | 1 20          | SIIC    |
| TRAN        | Trans          | sporter 2 Printed/Typed                             | Name                  |  |                           | Sk            | gnature    |                    |               |                         |                   | Mor            | nth Day       | y Year  |
| 1           | 18. D          | Viscrepancy   |                       |  |                           |               |            |                    |               |                         |                   |                |               |         |
| 1           | 18a.           | Discrepancy Indication                              | Space C               | luantity   | Туре                      |               |            | Residue            |               | Partial Reje            | ection            | [              | Full Re       | jection |
| 7           | 18b.           | Alternate Facility (or Ge                           | nerator)              |  | -                         |               | Shipp      | ing Documer        | nt Tracking N | umber:<br>U.S. EPA ID N | lumber            |                |               |         |
| FACILITY    | 100.           | recorded toomy for oc                               | (Isolator)            |  |                           |               |            |                    |               | 1                       |                   |                |               |         |
| 'ATED F     | Facili<br>18c. | ity's Phone:<br>Signature of Alternate F            | acility (or Generato  | rj   |                           |               |            |                    |               |                         |                   | Mo             | onth Da       | ay Year |
| 1           | D.R            | Report Management Met                               | thod Codes (i.e., co  | des for treatment, dispo                                       | osal, and recycling syste | ems)          |            |                    |               |                         |                   |                | _1_           |         |
| DE          |                |   |                       | 2.   |                           | 3.            |            |                    |               | 4                       |                   |                |               |         |
|             | 20. D          | Designated Facility Own                             | er or Operator: Cer   | tification of receipt of sh                                    | ipment except as noted    | d in Item 18a |            |                    |               |                         |                   |                |               |         |
|             | Printe         | ed/Typed Name                                       |                       |  |                           | Si            | gnature    |                    |               |                         |                   | Mo             | nth Da        | y Year  |
| 4           |                |   |                       |  |                           |               |            |                    |               |                         |                   |                |               |         |



| SHIPPING<br>DOCUMENT                   | 1. Generator ID Number   | 0.93                          | 2. Page 1 of              | 3. Emergency Response P       | hone                            | 4. Shipping                             |            | nacking Numb     |                |
|--|--|-------------------------------|---------------------------|-------------------------------|---------------------------------|---|------------|------------------|----------------|
| Generator's Name and                   | Mailing Address  | ng Address                    |                           | Generator's Site Address (if  | ZZ 00318816 an mailing address) |   |            |                  |                |
| Generator's Phone: 413                 | OENERAL ELE<br>ATTN MAIT C<br>159 PLASTICS<br>494-2336 PITTEFFELD, M               | ALACONE                       |                           | DETERMENT DE AV               | E                               |   |            |                  |                |
| 6. Transporter 1 Compan                | Name   |                               |                           |                               |                                 | U.S. EPAID N                            |            |                  | 2 6 .          |
| PAGE ETC., INC                         |  |                               |                           |                               |                                 | NYD936969847                            |            |                  |                |
| 7. Transporter 2 Compan                | Name   |                               |                           |                               |                                 | U.S. EPA ID N                           | lumber     |                  |                |
| 8. Designated Facility Na              | ne and Site Address VECTIA HS ON   | ZEENTREE LANCE                | TILL                      |                               |                                 | U.S. EPA ID N                           | lumber     |                  |                |
| Facility's Phone: \$14                 | 265,1744 KERGHY, PA 1  | 5946                          |                           |                               |                                 | INOI                                    | Ř          | E Q              | 1.7            |
| 9a. 9b. U.S. DOT De<br>and Packing Gro | Q  | 10. Containe                  | No. Type Quantity WL/Vol. |                               |                                 | 13. Co                                  | 13. Codes  |                  |                |
| 1. NON REG                             | JAMETAN DETAJU   |                               |                           |                               |                                 | STIMATE                                 | =          | HONE             |                |
|  |  |                               |                           | 1                             | DT                              | MODEO                                   | к          |                  | -              |
|  |  |                               |                           |                               | AJ A                            | 19,850                                  | -          |                  |                |
| 2                                      |  |                               |                           |                               |                                 | 17,000                                  |            |                  |                |
|  |  |                               |                           |                               |                                 |   | li         |                  |                |
| - 12                                   |  |                               |                           |                               | _                               |   |            |                  |                |
| 3.                                     |  |                               |                           |                               |                                 |   |            |                  |                |
|  |  |                               |                           |                               |                                 |   | l i        |                  |                |
| 4.                                     |  |                               | _                         |                               |                                 |   |            | -                | _              |
| 4.                                     |  |                               |                           |                               |                                 |   |            | 12-21            |                |
|  |  |                               |                           |                               |                                 |   |            |                  |                |
| 5. GENERATOR S/OF                      | FEROR S CERTIFICATION: I hereby dec<br>placarded, and are in all respects in prope | dare that the contents of thi | is consignment            | are fully and accurately desc | cribed above<br>nal governm     | by the proper shi<br>nental regulations | pping name | , and are classi | fied, package  |
| Generator's/Offeror's Prin             | led/Typed Name   |                               | Se                        | pnature Police                | 2/ocra                          | NY EA                                   | BEOT       | - Month          | Day            |
| 6. International Shipmer               |  |                               | Export from               | U.S. Port of entry            | y/exit                          | 7114                                    |            |                  | 100            |
| Transporter signature (fo              |  |                               |                           | Date leaving                  | g U.S.:                         |   |            |                  |                |
|  | Igment of Receipt of Shipment  |                               | e i                       | 1                             |                                 |   |            | Month            | Day            |
| ransporter 1 Printed/Typ               |  |                               | 1                         | neture                        | /                               | )                                       |            | 1 1 1            | Day            |
| CARRY  (ransporter 2 Printed/Typ.)     | 1 Denma  | 10                            | Sk                        | inature                       | 10                              | Lance                                   |            | Month            | Day            |
| ransporter 2 milliour ryp              | ou Marino  |                               | 123                       | grauno                        | 1                               |   |            | 1                | 1 1            |
| 8. Discrepancy                         |  |                               |                           |                               |                                 | -                                       | -          |                  |                |
| 8a. Discrepancy Indicati               | on Space Quantity  | Туре                          |                           | Residue                       |                                 | Partial Reju                            | ection     |                  | Full Rejection |
|  |  |                               |                           | Shipping Document             | Tracking No                     | mhar                                    |            |                  |                |
| 8b. Alternate Facility (or             | Generator)   |                               |                           | Onlygeng Document             | Tracking The                    | U.S. EPA ID N                           | lumber     |                  |                |
|  |  |                               |                           |                               |                                 |   |            |                  |                |
| Facility's Phone:                      |  |                               |                           |                               |                                 | 1                                       |            |                  |                |
| 18c. Signature of Alternal             | e Facility (or Generator)  |                               |                           |                               |                                 |   |            | Mont             | h Day          |
|  |  |                               |                           |                               |                                 |   |            | 1                | 1 1            |
| 9. Report Management                   | Method Codes (i.e., codes for treatment, di  | isposal, and recycling syste  | ams)                      |                               |                                 |   |            |                  |                |
|  | 2.   |                               | 3.                        |                               |                                 | 4.                                      |            |                  |                |
|  |  |                               |                           |                               |                                 |   |            |                  |                |
| 0. Designated Facility 0               | wner or Operator: Certification of receipt of                                      | f shipment except as noted    | in Item 18a               |                               |                                 |   |            |                  |                |
| Printed/Typed Name                     |  |                               | Si                        | gnature                       |                                 |   |            | Month            | Day            |
|  |  |                               | 1                         |                               |                                 |   |            | 1                | 1 1            |