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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number MAC300000759	2. Page 1 of 1	3. Emergency Response Phone (800) 483-3718	4. Manifest Tracking Number 009864209 FLE			
5. Generator's Name and Mailing Address Checon Corporation 30 Larsen Way Attleboro Falls, MA 02763 Generator's Phone: (508) 809-5136				Generator's Site Address (if different than mailing address) SAME				
6. Transporter 1 Company Name Clean Harbors Environmental Service, Inc.				U.S. EPA ID Number MAD039322250				
7. Transporter 2 Company Name				U.S. EPA ID Number				
8. Designated Facility Name and Site Address Clean Harbors of Connecticut Inc 51 Broderick Road Bristol, CT 06010 Facility's Phone: (860) 583-8917				U.S. EPA ID Number CTD000604488				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	x	1. RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S., (CADMIUM, SILVER), 9, PG III (D006)	X	1	TT	2750	G	D006 D011
		2.						
		3.						
		4.						
14. Special Handling Instructions and Additional Information 1. CH465786B ERG#171								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Officer's Printed/Typed Name Paige Geoffroy				Signature <i>Paige Geoffroy</i>		Month Day Year 07/14/16		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name Rick Tucker				Signature <i>Rick Tucker</i>		Month Day Year 07/14/16		
Transporter 2 Printed/Typed Name				Signature		Month Day Year		
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____								
Facility's Phone: _____								
18c. Signature of Alternate Facility (or Generator) _____ Month Day Year _____								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H070		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name JASON DAIGLE				Signature <i>Jason Daigle</i>		Month Day Year 07/14/16		