

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 005252041 FLE		
5. Generator's Name and Mailing Address Checon Corporation 30 Larsen Way Attleboro Falls, MA 02763			Generator's Site Address (if different than mailing address) SAME				
Generator's Phone: (508) 809-5136							
6. Transporter 1 Company Name Clean Harbors Environmental Services 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				U.S. EPA ID Number CTD000604488			
Facility's Phone: (860) 583-8917							
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), 9, PG III (D006)	001	TT	3771	G	D006 D011
		2.					
		3.					
		4.					
14. Special Handling Instructions and Additional Information 1. CH465786B ERG#171 37"							
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: Pange Geoffrey Signature: Pange Geoffrey Month: 05 Day: 18 Year: 12							
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials						
TRANSPORTER	Transporter 1 Printed/Typed Name: SCOTT FACE			Signature: [Signature]		Month: 05 Day: 18 Year: 12	
	Transporter 2 Printed/Typed Name:			Signature:		Month: Day: Year:	
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number: _____						
	18b. Alternate Facility (or Generator) U.S. EPA ID Number: _____						
	Facility's Phone: _____						
	18c. Signature of Alternate Facility (or Generator) Month: Day: Year:						
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
	1. H077	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: Denise Bujak			Signature: Denise Bujak		Month: 05 Day: 18 Year: 12	