



Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CTD018800458	2. Page 1 of 1	3. Emergency Response Phone 1-800-468-1760	4. Manifest Tracking Number 003411962 SKS		
5. Generator's Name and Mailing Address AND-COIL 60 E MAIN ST VERNON ROCKVILLE Generator's Phone: 860-871-1200				Generator's Site Address (if different than mailing address) CT 06066-3245			
6. Transporter 1 Company Name SAFETY-KLEEN SYSTEMS, INC.				U.S. EPA ID Number TXR000050930			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address SAFETY-KLEEN SYSTEMS, INC. 224 EAST MAIN STREET W BROOKFIELD, MA 01585 Facility's Phone: 508-867-7184				U.S. EPA ID Number 7016 MAD096287354			
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. NA1993 WASTE COMBUSTIBLE LIQUID, N. O. S. (PETROLEUM NAPHTHA) PGIII DDT-SP11606	1	DM	8	G	D039	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information SK SHIP#207662370 58404061 60586 201231 CSG:8 1) ERG#128; 24 HR EMERGENCY # 800-468-1760 (SAFETY-KLEEN - 94138) SK AUTHORIZED TO RETAIN LICENSED SUBSEQUENT CARRIERS AS NECESSARY AA/COIL TRACKING# 12016							
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/Offeor's Printed/Typed Name MICHAEL PERLMAN				Signature 		Month Day Year 7 30 12	
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 Al Lyons				Signature 		Month Day Year 7 30 12	
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							
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. H141		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				Signature		Month Day Year	

GENERATOR STATE