

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number MAC300000759	2. Page 1 of 1	3. Emergency Response Phone (800) 453-3718	4. Manifest Tracking Number 005250181 FLE	
5. Generator's Name and Mailing Address Checon Corporation 30 Larsen Way Attleboro Falls, MA 02763 (508) 809-5139			Generator's Site Address (if different than mailing address) SAME			
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.
			No.	Type		
	x	1. RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S., (CADMIUM), 9, PG III (D009)	001	TT	3471	G
14. Special Handling Instructions and Additional Information 1. CH465786B. ERG#171 44"						
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 Offeror's Printed/Typed Name Purge Geoffrey		Signature <i>Purge Geoffrey</i>		Month Day Year 03/12/12		
TRANSPORTER	16. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____					
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name SCOTT ACE Signature <i>Scott Ace</i> Month Day Year 03/12/12 Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year _____					
DESIGNATED FACILITY	18. Discrepancy					
	18a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ 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 <i>Denise Bujak</i>		Month Day Year 3/12/12	