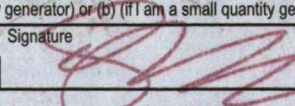
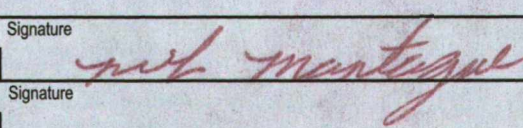
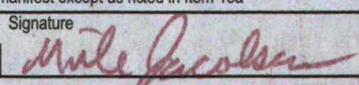


UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CTP 000 033 646		2. Page 1 of 1		3. Emergency Response Phone (800) 535-5053		4. Manifest Tracking Number 017529187 JJK				
		5. Generator's Name and Mailing Address THE UNITED ILLUMINATING CO. 180 MARSH HILL ROAD ORANGE, CT 06477						Generator's Site Address (if different than mailing address) 3 RIVERSIDE DRIVE ANSONIA, CT 06041				
6. Transporter 1 Company Name PAGE ETC INC		U.S. EPA ID Number NYD98696947										
7. Transporter 2 Company Name		U.S. EPA ID Number										
8. Designated Facility Name and Site Address ENVIRITE OF PENNSYLVANIA, INC. 730 VOGELSONG ROAD YORK, PA 17404		U.S. EPA ID Number PAD 010 154 045										
Facility's Phone: (717) 846-1900												
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, NA3077, Hazardous waste, solid, n.o.s., (Cadmium, Lead), 9, PGIII, (D006, D008), ERG #171				XX 1	DT	EST	P	D006	D008	
								46000				
14. Special Handling Instructions and Additional Information 1. L173531EPA / (S,E)LEAD AND CADMIUM CONTAMINATED SOIL												
42,540 LBS												
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/Offor's Printed/Typed Name Shawn C. Crosbie						Signature 		Month Day Year 12 14 17				
INT'L	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	Transporter 1 Printed/Typed Name MIKE MONTAGUE						Signature 		Month Day Year 12 14 17			
	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. H110		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 MIKE JACOBSON						Signature 		Month Day Year 12 14 17				