

#338

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 009535701 FLE			
5. Generator's Name and Mailing Address Checon Corporation 30 Larsen Way North Attleboro, 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)	01	TT	2823	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/Offoror's Printed/Typed Name Paige Geoffroy		Signature Paige Geoffroy		Month 1		Day 23		Year 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 Brian Makein		Signature Brian Makein		Month 1		Day 23	
	Transporter 2 Printed/Typed Name		Signature		Month		Day	
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. 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 CLAUDE DAIGLE		Signature CLAUDE DAIGLE		Month 1		Day 23	
					Year 17			