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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 010297793 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			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes	
x	1. RQ, NA3082, HAZARDOUS WASTE, LIQUID, N.O.S., (CADMIUM), 9, PG III (D006)	01 TT		4038	G	D006	D011
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. CH64550B 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/Officer's Printed/Typed Name Paige Geoffroy				Signature <i>Paige Geoffroy</i>		Month Day Year 2 8 17	
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 1 Printed/Typed Name Brian Makein Signature <i>Brian Makein</i> Month Day Year 2 8 17 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. 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 Denise Bush Signature <i>Denise Bush</i> Month Day Year 2 8 17							