

US EPA ARCHIVE DOCUMENT

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SULLIVAN & WORCESTER LLP

ONE POST OFFICE SQUARE
BOSTON, MASSACHUSETTS 02109

(617) 338-2800

FAX NO. 617-338-2880

WWW.SANDW.COM

DIRECT DIAL 617 338 2945
EMAIL: VBALTERA@SANDW.COM

IN WASHINGTON, D.C.
1656 K STREET, NW
WASHINGTON, D.C. 20006
(202) 775-1200
FAX NO. (202) 293-2275

Superfund Project Center
SITE: Wells G&H
BREAK: 11.9
OTHER: 283456

1290 AVENUE OF THE AMERICAS
NEW YORK, NEW YORK 10104
(212) 660-3000
FAX NO. (212) 660-3001



SDMS DocID 283456

January 30, 2004

CERTIFIED MAIL NO. 7000 0600 0024 7007 5604
RETURN RECEIPT REQUESTED

U.S. Environmental Protection Agency
Martha Bosworth, Enforcement Coordinator
Office of Site Remediation and Restoration (HBS)
One Congress Street, Suite 1100
Boston, Massachusetts 02114
Attn: Wells G&H Case Team

Re: Whitney Barrel Company at Wells G&H Superfund Site

Dear Ms. Bosworth:

This firm represents Samuel Cabot Incorporated. I have enclosed Samuel Cabot Incorporated's response to EPA's Information Request regarding the Whitney Barrel site. If you have any questions on this, please phone me.

Very truly yours,

Victor N. Baltera

VNB:dg

Enc.

cc: Mary Jane O'Donnell (w/o enc.)
John Anderson (w/enc.)
William F. McGonigle (w/o enc.)

0052-0002

Samuel Cabot Incorporated
Response to Request for Information concerning
the former Whitney Barrel Company at the Wells G&H Superfund Site

[Person(s) who provided information relied on in answering questions denoted by ()]

We note that the EPA's Information Request is addressed to Samuel Cabot Construction. We have never used that name, and we do not know who Samuel Cabot Construction is. We are responding to EPA's request as if it were addressed to Samuel Cabot Incorporated.

Many of the questions are identical to EPA's 1994 information request for the Turchin Junkyard, and we consulted our answer ("1994 Response") to that request in responding to these questions.

1. **General Information About Samuel Cabot Incorporated**

a. Full Legal Name & Mailing Address (McGonigle)

Samuel Cabot Incorporated
100 Hale Street
Newburyport, MA 01950

b. For Each Person Answering These Questions on Behalf of Samuel Cabot Incorporated, provide: (McGonigle)

John Schutz
President
Samuel Cabot Incorporated
100 Hale Street
Newburyport, MA 01950

Phone: 508-465-1900

c. Person Designated for Future Correspondence Regarding This Site (McGonigle)

William F. McGonigle
Treasurer and Vice President-Finance
Samuel Cabot Incorporated
100 Hale Street
Newburyport, MA 01950

508-465-1900

d. Provide the Names of all Superfund Sites in Region I (New England) for which Samuel Cabot Incorporated has Received a Request for Information from EPA (Anderson, Gihlstorf, 1994 Response)

Turchin Junkyard – Tilton, NH

The Solvents Recovery Service of New England-Southington, CT

Cannon Superfund Sites:

- A. Bridgewater, MA
- B. Plymouth, MA
- C. Tinkhans Garage Site
Londonderry, NH
- D. Gilson Road Site
Nashua, NH

2. **Samuel Cabot Incorporated's Legal Status**

- a. Doing Business Under Any Other Name: Cabot's Stains, Cabot Stains (not registered as a d/b/a) (Papenfuss, McGonigle)
- b. If Samuel Cabot Incorporated is a Corporation, provide: (McGonigle)
 - i. Date of Incorporation: 1907
 - ii. State of Incorporation: Massachusetts
 - iii. Agent for Service of Process: Sullivan & Worcester LLP
Attn: Christopher Cabot
- c. If Respondent was a Business Entity Other Than a Corporation: N/A (McGonigle)
- d. Respondent Affiliated with Another Corporation: N/A (McGonigle)
- e. Respondent's Predecessors-in-Interest: N/A (McGonigle)
- f. Respondent No Longer Exists as the Same Legal Entity: N/A (McGonigle)
- g. Respondent Filed for Bankruptcy: N/A (McGonigle)

3. **Respondent's Operations** (Anderson, Gihlstrorf)

- a. Address of Plants (Anderson, Gihlstrorf)

Samuel Cabot Incorporated (Discontinued)
229 Marginal Street
Chelsea, MA 02150

Samuel Cabot Incorporated (starting August 1985)
100 Hale Street
Newburyport, MA 01950
- b. Nature of Operations at Each Location
 - i. Chelsea, MA (Gihlstrorf, 1994 Response)

Still Operation:

.1877 - 1976 with a short interruption for rebuilding after the Great Chelsea Fire in 1908. The Company purchased coal tar from Boston Edison and transported the material in Company ships to Cabot's Chelsea location where it was distilled into creosote oil and pitch. The pitch was sold as a roofing material while the creosote oil was used in the manufacture of wood stain and other consumer products such as tree healing paint, tasgon, gutter paint, and so forth. The still operation was discontinued in 1976 and dismantled in 1979.

Prior to 1975, the manufacture of wood stain consisted of collecting a variety of combustible solvents (mineral spirits, kerosene, heavy aromatic naphtha, and oils such as creosote oil, linseed oil, fish oil, and pigments) in a chaser mill where the ingredients were mixed and blended with some size reduction also occurring and commonly referred to as "grinding."

The manufacturing procedure from 1975 to the close of the plant in 1985 used a high-speed disperser to mix and blend the same ingredients; however, no size reduction occurred.

Following the mixing, blending, and grinding procedure, other rheological ingredients were added as the batch was standardized. Once the product was standardized for color and specific gravity, it was packaged in pint, quart, gallon, 5-gallon, and 55-gallon containers.

ii. Newburyport, MA (Anderson, Gihlstorf)

This plant has been in operation since 1985. Because of its design to control and prevent pollution, it is considered to be a "state-of-the-art" facility. The plant uses high-speed dispersers to mix and blend the various ingredients to produce a wide range of wood stain including opaque stains, semi-solid stains, semi-transparent stains, decking stains, and PTW stains.

c. Chemical Constituents at the Site (Anderson, Gourlay)

Chemical constituents on EPA Enclosure F which were produced, processed or used in Samuel Cabot operations or present in materials produced, processed or used in our operations are:

C9-C18 aliphatic hydrocarbons. Aluminum, chromium, cobalt, lead, magnesium, mercury, calcium, copper, iron, and manganese. Methyl isobutyl ketone (MIBK).

d. Changes in Operations (Anderson, 1994 Response)

See "b" above. Our major products manufactured include stains and paints. See also "3e."

e. List of Products (Gihlstorf, 1994 Response)

A list of the products manufactured by Samuel Cabot Incorporated is enclosed. See Appendix I.

The Chelsea and Newburyport sites manufactured the whole range of Cabot products in the Company's line of products at the time of their operation.

f. Types of Raw Materials Used (Anderson, Gihlstorf, 1994 Response)

The manufacture of wood stain involves the use of combustible solvents, pigments, driers, oils, and other rheological ingredients.

Beginning in about 1983, we recycled wash solvent into subsequent batches which are compatible in color and formulation.

g. Cleaning & Maintenance of Equipment (Gihlstorf, 1994 Response)

- i. The cleaning of the chaser mills and dispersers is accomplished by withholding a small amount of mineral spirits from the batch to be used in the cleanup. The mills and dispersers are flushed with this solvent until they are clean, and the solvent is then pumped back into the batch and becomes part of the final formulation. Filters and fillers are cleaned by flushing with mineral spirits, and the spent solution is sent to a holding tank where it is used in subsequent batches. We do not have information on how the Chelsea still was cleaned.
- ii. The amount used annually depends on the number of batches made per year. From 1980 – 1985 our plants averaged between 750 and 1,100 batches per year. Batches were typically 1,000 gallons or less, but some may have been up to 3,000 gallons. We have no information before 1980.

h. Spill Clean-Up Methods (Gihlstorf)

There were no spills in the Newburyport plant during the period being investigated other than occasional, minor operational spills which were cleaned up using Speedi-Dri and/or rags. This material would then have been put into the trash, used in the process, or, if hazardous waste, sent to Ashland Chemical or Triumvirate Environmental. At Chelsea, minor operational spills would have been dealt with the same way after 1980. Before 1980, they may have been mixed with sawdust, concrete or Speed-Dri and disposed of in the trash.

Chelsea, MA - Spill #1 (1994 Response)

i. Type of Materials Spilled

September 12, 1973: A spill of coal tar from a holding tank at the Chelsea site apparently caused by a disgruntled employee in the nighttime. Cleanup by the Morelli Maintenance Corp., 385 Elliott Street, Newton Upper Falls, MA 02164 and Coastal Services, 22 River Street, Braintree, MA 02184.

ii. Materials Used to Clean Up Spills

Sand, floating boom, vacuum truck, and vacuum barge.

- iii. Methods Used to Clean Up Spills
Material was vacuumed into truck and barge.
- iv. Disposal Site of Cleaned Up Material (Gihlstorf)
Unknown.

Chelsea, MA - Spill #2 (1994 Response)

- i. Type of Materials Spilled
February 4, 1983: #4 Fuel Oil
- ii. Materials Used to Clean Up Spills
Sand, floating boom, absorbent pads, vacuum truck, Bobcat.
- iii. Methods Used to Clean Up Spills
Mixed sand with oil and collected with Bobcat. Used sausage booms and absorbent pads to collect oil on the water.
- iv. Disposal Site of Cleaned Up Material (Gihlstorf)
Handled by Coastal Services under Hazardous Waste Manifest:

M5741, 5744, 5745, MA2209, MA5846, MA5848, MA5847, MA 10557,
and MA10556.

Sent to: Peabody Clean Industry
170 Border Street
E. Boston, MA 02128

CECOS International
4528 Royal Avenue
Niagara Falls, NY 14302

Chelsea, MA - Spill #3 (1994 Response)

- i. Type of Materials Spilled (Gihlstorf)
March 6, 1983: #4 Fuel Oil
- ii. Materials Used to Clean Up Spills (Gihlstorf)
Sand and shovel.

iii. Methods Used to Clean Up Spills (Gihlstorf)

Shovel used to mix sand and oil then transferred to other hazardous waste in process at the time.

iv. Disposal Site of Cleaned Up Material (Gihlstorf)

Unknown: Quantity was only one gallon and was cleaned up and handled by the regular Chelsea work crew and was commingled with other hazardous waste.

i. Schematic Diagram (Gihlstorf, 1994 Response)

Schematic diagrams for Chelsea and Newburyport included.

j. Former or Current Employees or Other Persons with Knowledge

See attachment for additional identifying information.

John Gihlstorf

Edward Doherty

Jean-Yves Gourlay

Samuel Cabot

Richard Papenfuss

John Anderson

We are not aware of anyone who had contact with Whitney Barrel Company.

4. Wastes & Waste Streams

a. Waste Survey (Papenfuss)

See attached.

b. Each Type of Waste from Samuel Cabot Incorporated's Operations (Papenfuss)

- A. Asbestos Pipe Insulation from Remodeling: White solid, 4 ft from disposal each in 1984 and 1985.
- B. Naphthalene: Off-white solid; odor unknown; 65 yd. for disposal in 1981.
- C. Waste Stains/Sawdust: Mixture of off-spec stains and sawdust to form a solid of various colors of gray, brown, red, and blue consisting of mineral spirits, linseed oil, inert pigments with a mild solvent smell; 1,756 drums from 1983-1985.

- D. Latex Wash Water: Liquid with very low solids, cloudy gray and brown color; slight ammonia smell; 75 drums and 1,750 gallons from 1984-1985.
- E. Wash Solvents: Low solids liquid with mineral spirits, kerosene, and high aromatic naphtha; gray/brown color; mild solvent smell; 3,500 gallons from 1985.
- F. Mixed Solvents: Clear liquid with solvent smell of mineral spirits and high aromatic naphtha; 4,129 gallons from 1985.
- G. Sawdust/Linseed Oil: Amber liquid with sawdust to form a solid; mild odor; 76 drums from 1984-1985.
- H. Off-Spec Stain: Gray/brown liquid with some solids consisting of mixed petroleum solvents, linseed oil, alkyd resin, inert pigments; mild solvent odor; 3,932 gallons in 1984.
- I. Tank Bottoms: High viscosity dark brown/black liquid mixture of asphalt and coal tar; petroleum smell; 233 drums from 1983.
- J. Oily Dirt from Spill: Mixture of dirt and heavy petroleum distillates; dark brown to black in color with a petroleum smell; 68,360 lbs. and 40 yd. from 1983.
- K. Tank Cleanings: Viscous dark brown petroleum-based sludge with a petroleum smell; 60 drums and 600 gallons from 1981 and 1983.
- L. Oil/Water from Spill: Mixture of petroleum distillates and water; two-phase with a petroleum smell; 9,600 gallons from 1983.
- M. Fiber Drums: Brown Kraft paper fiber drums previously used for shipping and storing various liquid and solid raw materials. Empty drums put into dumpster for disposal by trash hauler, BFI or others. Amounts and dates unknown.
- N. Steel Cans, Pails, Drums: Damaged and dirty one-gallon cans from production, damaged and dirty five-gallon pails from production, and raw material usage and a few damaged 55-gallon drums from raw material usage. Empty containers put into the dumpster for disposal by trash hauler, BFI or others. Amounts and dates unknown.
- O. Corrugated Packaging: Brown and white corrugated Kraft paper packaging materials from in-house use, raw material shipments, and supply shipments. Materials were put into dumpster for disposal by trash hauler, BFI or others. Amounts and dates unknown.
- P. Plastic Wrap: Clear and colored polyethylene stretch wrap and shrink wrap from raw material pallets. Material was put into the

dumpster for disposal by trash hauler, BFI or others. Amounts and dates unknown.

- Q. Paper Bags: Brown and white Kraft multi-wall paper bags from shipments of dry powdered raw materials. Bags were put into dumpster for disposal by trash hauler, BFI or others. Amounts and dates unknown.
- R. Speedi-Dri Absorbent: Used to clean up various oil and stain spills, when dry, material was placed into dumpster for disposal by trash hauler, BFI or others. Amounts and dates unknown.
- S. Cotton Rags: Used to wipe up small spills and wipe oil, grease, and stain off equipment. Usually soaked in water to prevent spontaneous combustion before being put into dumpster for disposal by trash hauler, BFI or others. Amounts and dates unknown.

We do not have information for periods before 1980.

- c. Description of how Waste was Collected & Stored Prior to Disposal (Gihlstorff, 1994 Response)

Waste described in "b" above was collected in 55-gallon drums and either mixed with sawdust to solidify the contents or the drum was pumped into a larger tanker and then transported. Waste drums were stored on cement floors. Regular trash was collected and disposed of in a dumpster.

- d. Person(s) Responsible for Collecting & Managing Each Type of Waste (Gihlstorff, 1994 Response)

Gus Herman - Plant Superintendent 1938-1978 (Deceased); Howard Rust - Plant Superintendent 1959-1985 (Deceased); Mark Stairs - Plant Superintendent 1981-1987. (See attachment for additional identifying information.)

- e. Surveys or Studies About Waste Management Practices (Anderson, Gihlstorff, Papenfuss)

None.

- f. Former or Current Employees or Other Persons with Knowledge

John Gihlstorff

Richard Papenfuss

We are not aware of anyone who had contact with Whitney Barrel Company.

5. Disposal/Treatment/Storage/Recycling/Sale of Waste

- a. Individuals who Currently Have or Have Had Responsibility for Disposal of Waste (Anderson, Gihlstorf, 1994 Response)

Richard Papenfuss, Plant Superintendent, currently has such responsibility. Persons with responsibilities in earlier periods are listed in “4d” above.

- b. Individuals who Currently Have or Have Had Knowledge of Disposal of Waste (Anderson, Gihlstorf)

See “5a.” above. Also Edward Doherty, Senior Lab Technician, has knowledge of empty barrels.

- c. Individuals who Currently Have or Have Had Responsibility for Environmental Matters (Anderson, Gihlstorf, Papenfuss, 1994 Response)

Brendan Lane – Process Engineer	2002 - present
Richard Papenfuss - Plant Superintendent Newburyport operations	1987 - present
John Gihlstorf - Manufacturing Manager Chelsea & Newburyport operations (Retired)	1980 – 1997
Howard Rust – Plant Superintendent Chelsea operations (Deceased)	1959 - 1985
Mark Stairs – Plant Superintendent Chelsea & Newburyport operations (No longer employed)	1970 - 1987
Gus Herman - Plant Superintendent (Deceased)	1938 - 1978

- d. For the Previous Three Responses Provide each Individual’s Job Description. Length of Time on Job & Nature of Information Possessed by Individual (Anderson, Gihlstorf; 1994 Response)

See “5c.” above and the attached job descriptions.

- e. Waste Containers (Papenfuss)

For most of the periods we do not have information. For materials on manifest:

In order of decreasing volume, waste was shipped in 55-gallon drums, tank trucks, dumpsters, bags, and cartons.

The drums were black open-head 17H drums. Very few were any other color. There were no distinctive markings on the drums. The only labeling would be the standard hazardous waste label with the Company name and address, EPA ID number, content description, and UN/NA number. Most of these drums were purchased from a drum recycler with a limited number coming from the use of raw materials in the plant.

The tank trucks were the standard over-the-road, 5,000-7,000 gallon capacity tankers as supplied by the waste haulers.

The dumpsters used were 30 yd., open top, roll off containers as supplied by the waste hauler.

Very small shipments of asbestos were contained in poly bags. Lab pack chemicals were contained in corrugated and wooden cartons.

f. Contracts/Agreements for Waste Disposal (Papenfuss)

Typically, a licensed handler of hazardous waste is contacted and told of a waste needing disposal. As a rule, there is no contract or agreement beyond the understanding they are licensed and insured to handle the particular waste. BFI contract dated 1985 included. We have no information for earlier periods.

g. Copies of Contracts/Agreements (Gihlstorf)

See "5f."

h. Locations Where Waste was Sent (Doherty, Gihlstorf, Papenfuss)

1950-1985 - Chelsea: Attempts to locate information on Chelsea trash hauler have failed. The trash hauler was purchased by a larger company, and we cannot determine the buyer. Empty barrels were on occasion sent to American Barrel on Canter Street in Chelsea, Massachusetts. Mr. Doherty and Mr. Gihlstorf recall that in 1980 there were several hundred barrels with wash solvent that had been collected over the years at the Chelsea plant. The wash solvent was subsequently used in the manufacturing process, and the number of barrels then was reduced by shipments to American Barrel.

1985 - Newburyport: Browning Ferris Industries (BFI). Plant trash was sent to either the incinerator in North Andover, MA, or to a Boston-area collection point for further disposal. See Appendix III.

i. Waste Carriers (Doherty, Papenfuss, 1994 Response)

Those we are aware of are:

Suffolk Services Incorporated
98 Taylor Street
Boston, MA 02122
617/825-9045 617/825-9043
MAD049440951

Clean Industry Incorporated
Peabody Clean Industry Incorporated
170 Border Street
E. Boston, MA 02128
617/567-6500
MAD0066588906

Price Trucking
67 Beacon Street
Buffalo, NY 14220
800/828-1043
NYD046765574

Solvent Recovery Services of NE Incorporated
Lazy Lane
Southington, CT 06489
203/628-8084
CTD009717604

SCA Chemical Services Incorporated (Clean Harbors of Boston)
385 Quincy Avenue
Braintree, MA 02184
617/849-1800
MADD053452637

Emergency Technical Services Corp.
Rte. 515
Vernon, NJ
201 /697-4424
NJD000692053

Clean Harbors
P.O. Box 193
Kingston, MA 02364
617/585-5111
MAD039322250

Environmental Transfer Corp. NJD99129184 (No additional information known.
May be part of Advanced Environmental Technical Corp., Goldmine Road,
Flanders, NJ 07836; NJD080631369.)

Clean Harbors of Natick Incorporated
10 Mercer Road
Natick, MA 01760
MAD980523203

Environmental Waste Resources
130 Freight Street
Waterbury, CT 06725
203/755-2283 _
CTD072138969

Northeast Solvents Reclamation Corp.
300 Canal Street 221 Sutton Street
Lawrence, MA 01840 N. Andover, MA 01845
MAD000604447 508/683-1002

Browning-Ferris Industries
164 Market Street
Brighton, MA 02135

Barrels were picked up by
American Barrel
Carter Street
Chelsea, MA 02150

j. Transported Waste (Papenfuss)

Samuel Cabot Incorporated did not transport any of its own wastes from 1981-1985. Information on prior periods is unknown, but it is unlikely any waste was transported.

k. Waste Type Waste Carrier (Papenfuss, Doherty)

See Appendix III.

l. Frequency Waste was Picked Up (Papenfuss, Doherty)

See Appendix III. We do not know how frequently American Barrel picked up barrels.

m. Volume of Waste Picked Up (Papenfuss, Doherty)

See Appendix III. We have no information on the volume of barrels disposed of.

n. Dates Waste was Picked Up (Papenfuss)

See Appendix III. We do not know the dates on which American Barrel picked up barrels.

o. Documents Containing Information Regarding Previous Seven Questions (Papenfuss)

See Waste Manifests.

p. Waste Carriers' Employees who Collected Waste (Papenfuss)

See Appendix III.

q. Ultimate Disposal Site (Papenfuss)

The ultimate disposal site for the waste is chosen by the waste handler and in many cases is unknown to us. Those that are known include:

Naphthalene: Sent to a secure landfill near Baltimore, MD
 Flammable Solids: Sent to SCA Chemical Services secure landfill in Pinewood, SC

Combustible Liquids, Sludges, Solids to: Rollins Environmental - Incineration
 Norlite Corp. - Incineration
 Marine Shale Processors - Thermal Oxidation
 Heritage Environmental - Thermal Oxidation
 Tricil Incorporated - Incineration

Non-Hazardous Latex: Sent to GSX Services of SC - Secure landfill

Trash sent to incinerator in North Andover, MA, or Boston area collection station.

r. Documents Indicating Ultimate Disposal Location (Papenfuss)

See Appendix III.

s. How Samuel Cabot Incorporated Managed Pickups of Waste (Papenfuss, Doherty)

Waste was segregated by type. When a determination was made that the material had no rework potential, the decision was made to dispose of it. A waste handler would be called for a quote if it was a new waste stream. If the price was agreeable, a call would be made for pickup and disposal of the waste. When an invoice for the pickup and disposal was received, the Accounting Dept. would issue a check after a signoff by the appropriate staff member. The check was sent directly to the waste carrier. See enclosed invoices for the amount of each check.

No records were kept of who was contacted at the waste carriers' business for pickup. No records are kept of which person in accounting issues which checks, so we do not know which individual paid which bills. Checks are sent to the waste carrier and only indicate a company name and address, not an individual name.

For barrels, we believe calls were made to American Barrel when there were empty barrels which the Company wished to send for reworking.

t. Individual/Organization who Selected Location of Waste Disposal (Papenfuss)

In all cases, the waste carrier picked the location where the wastes were to be taken.

u. Basis for/Documents Supporting Answer to Previous Question (Papenfuss)

There are no documents to support this, but it is common industry practice.

v. Former or Current Employees and Other Persons with Knowledge

Edward Doherty

John Gihlstorf

Richard Papenfuss

6. **Environmental Reporting**

a. RCRA I D Numbers Issued by EPA or State for Operations (Anderson)

EPA #MAD981067515 (Newburyport); MAD 001021732 (Chelsea)

b. Identify all Federal Offices to Which Samuel Cabot Incorporated has Sent or Filed Hazardous Substance or Hazardous Waste Information (Gihlstorf; 1994 Response)

U.S. EPA Region I
JFK Federal Building
Boston, MA 02203-2211

U.S. Coast Guard
Boston, MA (we believe)

c. Years in Which Information was Sent or Filed (Gihlstorf)

Information regarding hazardous waste and other hazardous substances was sent during the years 1981 – 1985. Filings with the Coast Guard were for spills in 1983, 1984 and 1985.

d. Identify all State Offices to Which Samuel Cabot Incorporated has Sent or Filed Hazardous Substance or Hazardous Waste Information (Gihlstorf, 1994 Response)

Dept. of Environmental Protection
10 Commerce Way
Woburn, MA 01801

MA Dept. of Environmental Protection
P.O. Box 4062
Boston, MA 02211

MA Dept. of Environmental Protection
One Winter St., 5th Floor
Boston, MA 02108

e. Years in Which Information was Sent or Filed (Gihlstorf)

1981 - 1985

- f. List all Federal & State Environmental Laws and Regulations Under Which Samuel Cabot Incorporated has Reported to Federal or State Governments
 (Gihlstorf, 1994 Response)

310 CMR 30.000 Hazardous Waste Regulations Annual Report
 Sent to: Dept. of Environmental Quality Engineering
 Div. of Solid & Hazardous Waste
 One Winter St., 5th Floor
 Boston, MA 02108

National Pollution Discharge & Elimination System MA003344
 Federal Water Pollution Control Act;
 Section 43-44 of M.G.L. Chapter 21
 Sent to: EPA Region I Permit Branch JFK Federal Building
 Boston, MA 02203-2211

MA Water Resource Commission
 Div. of Water Pollution Control
 Leveritt Saltonstall Bldg.
 Boston, MA 02202

MA Air Pollution Control Regulation 310 CMR 7.12
 Sent to: Dept. of Environmental Protection
 Bureau of Waste Prevention
 10 Commerce Way
 Woburn, MA 01801

U.S. EPA Annual Pesticide Report Section 7 under FIFRA - 000043-MA-01
 Sent to: U.S. EPA Region I
 Pesticide Section APP
 JFK Federal Building
 Boston, MA 02203-2211

- g. Federal & State Offices Information was Sent To (Gihlstorf)

See "6f." above.

7. Information concerning Association with Whitney Barrel Company (Anderson, Gihlstorf, Papenfuss, Svnott, Doherty)

- a. Samuel Cabot Incorporated business association with Whitney Barrel Company?

We are unaware of any business association with Whitney Barrel Company, and we have no information about Whitney Barrel Company.

- b. Did association involve buying of drums or other containers?

See "7a."

- c. Did association involve shipping, transport or selling of drums or containers?

See "7a."

- d. Did association involve cleaning or reconditioning of drums or other containers?

See "7a."

- e. Did Whitney Barrel ever perform any other service for Samuel Cabot Incorporated?

See "7a."

- f. Did Samuel Cabot Incorporated ever pick up materials from other parties which were taken directly or indirectly to Whitney Barrel Company?

No.

- g. Identify all persons and entities from whom Samuel Cabot Incorporated picked up materials which were taken to Whitney Barrel Company?

Not applicable.

- h. Identify all such customers.

Not applicable.

- i. Former or current employees and other persons with knowledge or information about the forgoing or who had contact with Whitney Barrel Company.

We have no information concerning Whitney Barrel Company.

8. **Information About Others**

- a. Information Concerning the Operation of the Site (Anderson, Gihlstorf)

None.

We note that the request for information was directed to Samuel Cabot Construction. We have never used that name, and we do not know who Samuel Cabot Construction is. We are responding to the information request as if it were addressed to Samuel Cabot Incorporated.

- b. Availability of Additional Information (Anderson)

Samuel Cabot Incorporated believes there are no other people with knowledge of our operation who would provide additional information or documents.

- c. Current & Former Employees who have Information Concerning the Site (Anderson)

We are not aware of anyone.

9. Compliance with this Request Describe all Sources Reviewed or Consulted in Responding to this Request. including but not Limited to (1994 Response, Anderson, Papenfuss):

i. Names of all Individuals Consulted & Current Titles

John Gihlstorf
Retired

William F. McGonigle
Treasurer and Vice President-Finance

Richard Papenfuss
Plant Superintendent

Burt Synnott
Retired

Jean-Yves Gourlay
Technical Director

Edward Doherty, Jr.
Retired

John Anderson
Vice President-Manufacturing

ii. Current Job Title & Job Description

See enclosed job descriptions for the following positions:

Manufacturing Manager
Controller
Plant Superintendent
Purchasing & Distribution Manager
Technical Director
Sr. Lab Technician
Director of Quality Control

iii. Job Title & Job Description During the Period Being Investigated

John Gihlstorf
Manufacturing Manager

William F. McGonigle
Controller

Burt Synnott
Purchasing & Distribution Manager

Edward Doherty, Jr.
Sr. Lab Technician

iv. Current or Past Employee

John Gihlstorff:	Past
William F. McGonigle:	Current
Richard Papenfuss:	Current
Burt Synnott:	Past
Jean-Yves Gourlay:	Current
Edward Doherty, Jr.:	Past
John Anderson	Current

v. Names of all Divisions of Samuel Cabot, Incorporated for which Records were Reviewed

Division records for Chelsea and Newburyport.

vi. Nature of all Documents Reviewed

Product formulations, Sales order forms, Employment records, Various reports to EPA, DEQE, and DEP, Waste manifests, 1994 Response.

vii. Locations where Documents were Kept before Review

Newburyport

viii. Location where Documents are Currently Kept

Newburyport

WELLS G & H

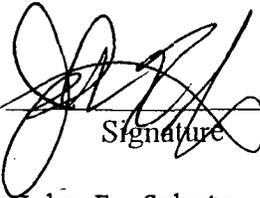
ENCLOSURE H - DECLARATION

I declare under penalty of perjury that I am authorized to

respond on behalf of Samuel Cabot Incorporated and that the
Respondent

foregoing is complete, true, and correct to the best of my knowledge, information
and belief.

Executed on January 30, 2004



Signature

John E. Schutz

Type Name

President

Title [initials]

ENCLOSURE E - WASTE SURVEY

Name of Respondent: Samuel Cabot Inc. Respondent's Location: Chelsea, MA Date: 1/30/04
 Newburyport, MA

Substance	Physical State when Disposed/Type of Container (e.g., Liquid/5 gal. pails, Sludge/55 gal. drums, Solid/directly in dumpster)	Trade Name/Chemical Composition (e.g., Nitric acid/HNO ₃ , Tetrahydrofuran/C ₄ H ₈ O)	Volume	Disposal Method and Location (year) (e.g., dumpster ('55-68), [Name] Landfill ('69-81), [Name] Solvent Reclaimer ('82-'91)
Acids				
Adhesives				
Asbestos	Solid/Disposal Bags		4 ft ³ 1984 4 ft ³ 1985	1984 Suffolk Services Boston 1985 Consolidate Waste Services Norridgewock, Maine
Absorbents (from spills, leaks, etc.)	Solid into dumpster	Speedi Dry/Attapulgate Clay	Variable	Prior Unknown 1985 BFI Landfill/Incinerator
Automotive Related Wastes:				
Antifreeze				
Batteries				
Brake Fluids				
Degreasers				
Lubricants				
Oils				
Oil Filters				
Transmission fluids				

Substance	Physical State when Disposed/Type of Container (e.g., Liquid/5 gal. pails, Sludge/55 gal. drums, Solid/directly in dumpster)	Trade Name/Chemical Composition (e.g., Nitric acid/HNO ₃ , Tetrahydrofuran/C ₄ H ₈ O)	Volume	Disposal Method and Location (year) (e.g., dumpster ('55-68), [Name] Landfill ('69-81), [Name] Solvent Reclaimer ('82-'91)
Other:				
Batteries				
Bleaches				
Caustic/Alkalis				
Chemicals	Solid/Dumpsters	Napthalene/C ₁₀ H ₈	65 Yds. ³ /1 time	BFI landfill Baltimore, MD - 1981
Cleaning compounds or fluids				
Coolants				
Degreasers				
Disinfectants				
Distillation Byproducts (Still Bottoms)				
Dyes				
Etching Solutions				
Filters				
Flammable, Reactive, or Explosive Materials				
Fungicides				

Substance	Physical State when Disposed/Type of Container (e.g., Liquid/5 gal. pails, Sludge/55 gal. drums, Solid/directly in dumpster)	Trade Name/Chemical Composition (e.g., Nitric acid/HNO ₃ , Tetrahydrofuran/C ₄ H ₈ O)	Volume	Disposal Method and Location (year) (e.g., dumpster ('55-68), [Name] Landfill ('69-81), [Name] Solvent Reclaimer ('82-'91)
Herbicides				
Insecticides				
Insulating/Fire Proofing Materials				
Laboratory Wastes				
Lubricants				
Metals:				
grindings				
powders				
shavings				
sludges				
solutions				
other:				
Paint and Coating Wastes:				
paint				
pigments				
stripper				
stains				
thinner				

Substance	Physical State when Disposed/Type of Container (e.g., Liquid/5 gal. pails, Sludge/55 gal. drums, Solid/directly in dumpster)	Trade Name/Chemical Composition (e.g., Nitric acid/HNO ₃ , Tetrahydrofuran/C ₄ H ₈ O)	Volume	Disposal Method and Location (year) (e.g., dumpster ('55-68), [Name] Landfill ('69-81), [Name] Solvent Reclaimer ('82-'91)
turpentine				
varnish				
other:				
PCB's (polychlorinated biphenyls)				
Pesticides				
Photocopying Wastes:				
toners				
other:				
Photography Wastes:				
developers				
fixers				
other:				
Plating Solutions:				
Pretreatment Sludges/Solutions (Sewage)				
Printing Wastes:				
inks				

Substance	Physical State when Disposed/Type of Container (e.g., Liquid/5 gal. pails, Sludge/55 gal. drums, Solid/directly in dumpster)	Trade Name/Chemical Composition (e.g., Nitric acid/HNO ₃ , Tetrahydrofuran/C ₄ H ₈ O)	Volume	Disposal Method and Location (year) (e.g., dumpster ('55-68), [Name] Landfill ('69-81), [Name] Solvent Reclaimer ('82-'91)
dyes				
other:				
Rags, Used (Indicate prior use)	Solid directly into dumpster	Cotton rages used to wipe up oils, grease, stains	Variable	Prior unknown 1985 BFI – landfill or incinerator
Rodenticides				
Septic System Wastes				
Sludges				
Soldering Solutions				
Solutions of Polymers, resins, plastics				
Solvent Extracts				
Solvents				
Waste Oils				
Wood Preservatives				
Other:				
Waste Stains/Sawdust	Solid/55 gal. drums	Sawdust/mineral spirits/linseed oil/pigments	1,524 drums/2 years	1984=85 SCA Chemical/GSX Landfill, Pinewood, S.C.

Substance	Physical State when Disposed/Type of Container (e.g., Liquid/5 gal. pails, Sludge/55 gal. drums, Solid/directly in dumpster)	Trade Name/Chemical Composition (e.g., Nitric acid/HNO ₃ , Tetrahydrofuran/C ₄ H ₈ O)	Volume	Disposal Method and Location (year) (e.g., dumpster ('55-68), [Name] Landfill ('69-81), [Name] Solvent Reclaimer ('82-'91)
Latex Wash/Water	Liquid/Tank Truck Drums	Rhoplex/Water H ₂ O	75 Drums, 1,750 Gal/1 Time	Clean Harbors, Braintree, MA 1984-85
Wash Solvents	Liquid/Tank Truck	High Aromatic Naptha Mineral Spirits/Kerosene	3,500 Gal.	Clean Harbors, Braintree, MA 1985
Mixed Solvents	Liquid/Tank Truck	Mineral Spirits/Aromatic Naptha	4,129 Gal.	1985 Solvent Recovery Services, Southington, CT
Sawdust/Linseed Oil	Solid/Drums	Sawdust/Linseed Oil Menhaden Oil	76 Drums	1984-85 SCA Chemical Services, Pinewood, SC
Off Spec Stain	Liquid/Tank Truck	Petroleum Distillates/Linseed Oil/Alkyd Resin	3,932 Gal	1984 Solvent Recovery Services, Southington, CT
Waste Stains/Sawdust	Solid/Drums	Sawdust/Mineral Spirits//Linseed Oil/Pigments	232 Drums	1983 SCA Chemical Services, Model City, NY
Tank Bottoms	Liquid/Drums	Asphalt/Coal Tar	233 Drums	1983 CECOS International, Niagara Falls, NY
Oily Dirt from Spill	Solid/Dumpster	Petroleum Oil/Dirt	68,360 lbs and 40 Yds. ³	1983 CECOS International, Niagara Falls, NY
Tank Cleanings	Sludge/Drums Tank Truck	Petroleum Oil	60 Drums and 600 Gal.	1981 Suffolk Services, Boston, MA. 1983 Peabody Clean Ind., E. Boston, MA

Substance	Physical State when Disposed/Type of Container (e.g., Liquid/5 gal. pails, Sludge/55 gal. drums, Solid/directly in dumpster)	Trade Name/Chemical Composition (e.g., Nitric acid/HNO ₃ , Tetrahydrofuran/C ₄ H ₈ O)	Volume	Disposal Method and Location (year) (e.g., dumpster ('55-68), [Name] Landfill ('69-81), [Name] Solvent Reclaimer ('82-'91)
Oil/Water from Spill	Liquid/Tank Truck	Petroleum Oil	9,600 Gal.	1983 Peabody Clean Ind., E. Boston, MA
Fiber Drums	Solid Directly into Dumpster	Brown 30/55 gal. Fiber Drums from Raw Materials	Varied	Prior – Unknown 1985 BFI Landfill/Incinerator
Steel Cans, Pails, Drums	Solid Directly into Dumpster	1 gal. Steel Cans, 5 gal., Pails, 30/55 gl. drums damaged, used for processing/raw materials	Varied	Prior – Unknown 1985 BFI Landfill/Incinerator
Corrugated Boxes/Sheets	Solid Directly into Dumpster	Corrugated Kraft Paper from Packaging	Varied	Prior – Unknown 1985 BFI Landfill/Incinerator
Plastic Wrap	Solid Directly into Dumpster	Clear/Colored Polyethylene Over Wrap from Raw Materials	Varied	Prior – Unknown 1985 BFI Landfill/Incinerator
Paper Bags	Solid Directly into Dumpster	Brown/White Kraft Paper Bags from Raw Materials	Varied	Prior – Unknown 1985 BFI Landfill/Incinerator

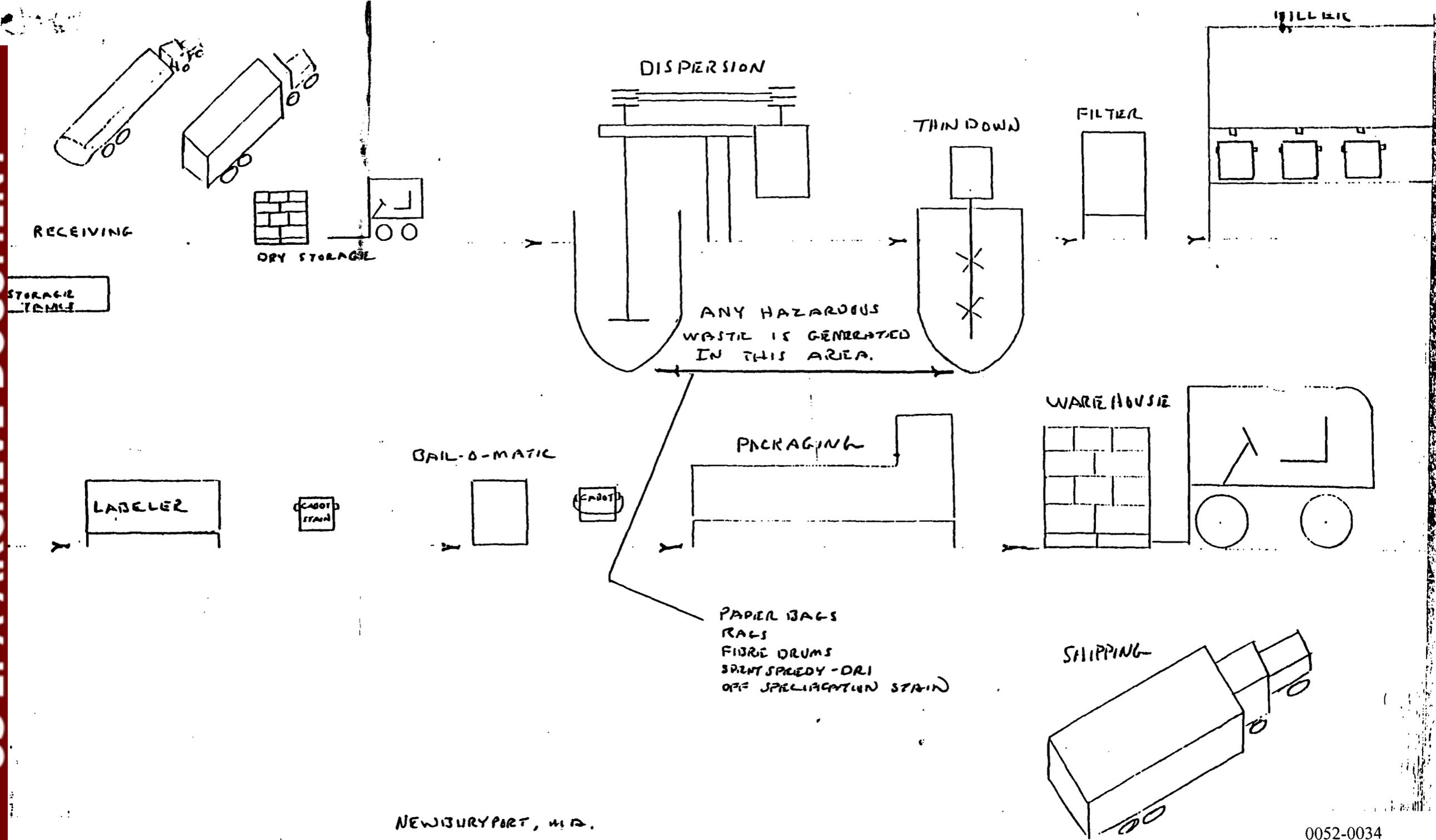
Question 3e

APPENDIX I

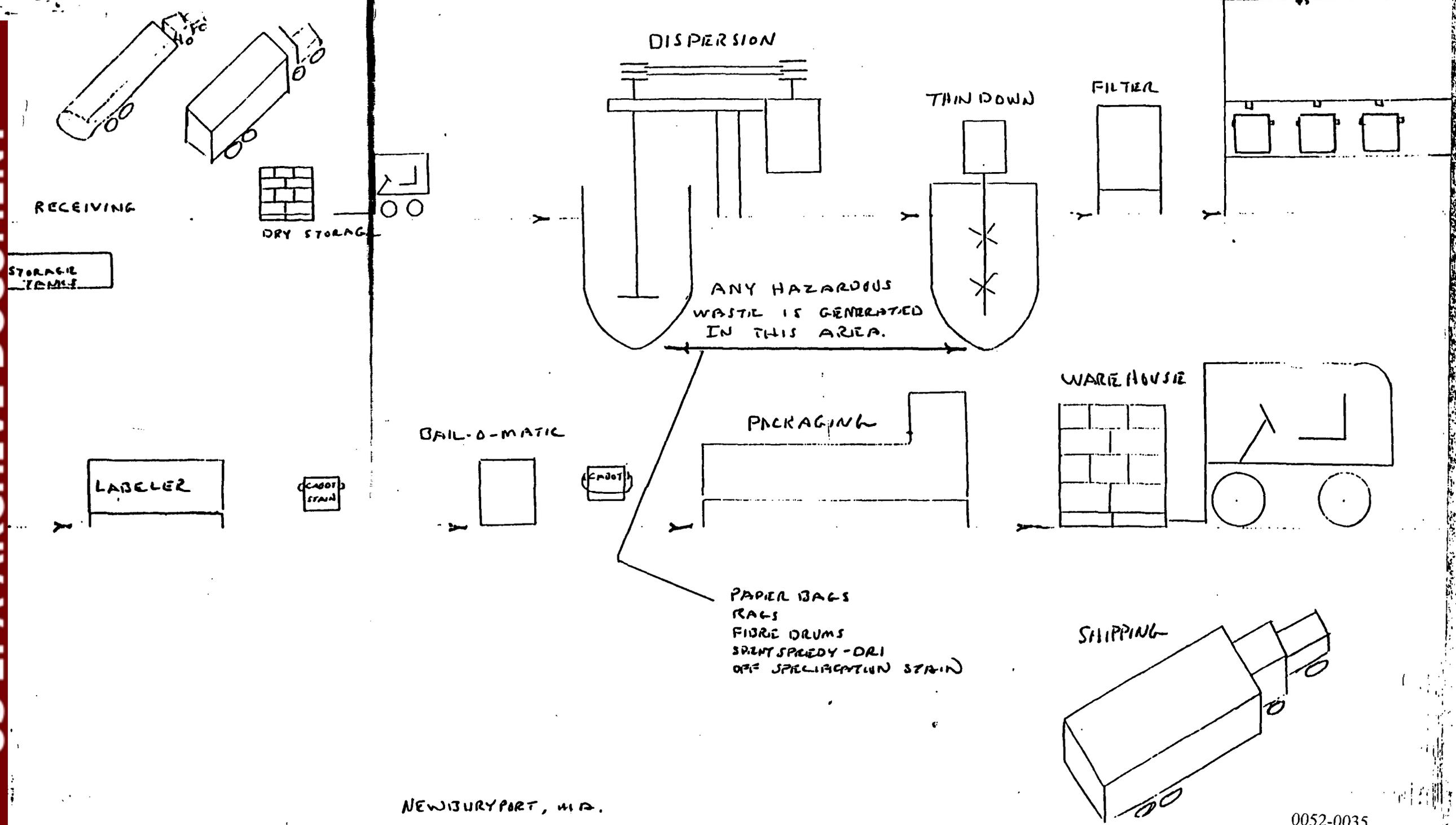
The following is a list of those items manufactured by Samuel Cabot Incorporated during the period of 1950 to 1985.

380 Wood Preservative	House & Trim Paint
3810 Green Wood Preservative	Interior Stain Wax
5% Silicone Waterproofing	Latex Stains
Bar D.K. Preservative	Lubri Tasgon
Barn Board	Marble Crete Waterproofing
Bleaching Oil	Northern Lights
Bleaching Stain	O.V.T.
Brick Waterproofing	Paste Wax
Brush Cleaner	Patio Furniture Finish
Cabothane	Penta-Wood Seal
Canvas & Awning Paint	Ping Pong Green
Cedartone	Plasgon
Cement Floor Stain	PTW Stain
Clear Cement Silicone Waterproofing	Roofing Collopokes
Clear Cement Waterproofing w/o Silicone	69 Oil
Clear Solution	Semi-Solid Stain
Colorless Creosote	Semi-Transparent Stain
Conservo	Stucco and Brick Stains
Cresote Stain	Tasgon
Danish Oil	Timbercote
Decking Stains	Tree Healing Paint
Double White	Vinyl Primer
Flexiblac	Weathering Stain
Foundation Coating	White Creosote Stain
Gutter Paint	Wood Sealer
Hammer Tone	

Question 3i



NEWBURYPORT, MA.



NEWBURYPORT, MA.

Documents Responsive to Questions 5o and 5r

HAZARDOUS WASTE, MANIFEST AND SHIPPING PAPER

MA 0000350
MANIFEST NUMBER

GENERATOR COMPLETES

GENERATOR <i>WASTE OIL AND STAIN</i>	MAILING ADDRESS <i>WILSON ST. CHILLI MA</i>	PHONE NUMBER <i>(617) 841-147</i>	STATE / EPA ID NO. <i>MA D00102172</i>
PRIMARY TRANSPORTER			<i>MA D 00440151</i>
CONTINUING TRANSPORTER			
H.W.F.	<i>15 THOMAS ST BOSTON MA</i>	<i>(617) 555-1111</i>	<i>MA D 00102151</i>

IF MORE THAN ONE MANIFEST SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE <input type="checkbox"/> THIS FORM NO IS <input type="checkbox"/>	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
				<i>01</i>	<i>11</i>	<i>81</i>		<i>02</i>	<i>11</i>	<i>81</i>

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN. / NA. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		EPA WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
<i>NATURAL GAS</i>	<i>2.1</i>		<i>30</i>	<i>1</i>	<i>1</i>	<i>102</i>	<i>101</i>	<i>101</i>	

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>[Signature]</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR <i>01 11 81</i>	STATE COMPANY NO. FOR TRAILER, MARINE OR RAIL <i>MA</i>	DATE OF DELIVERY MONTH DAY YEAR <i>01 11 81</i>
PLACARDS REQUIRED <input checked="" type="checkbox"/>	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH _____ DAY _____ YEAR _____

HANDLING METHOD	
1	<input type="checkbox"/>
2	<input type="checkbox"/>
3	<input type="checkbox"/>

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NUMBER (IF DIFFERENT FROM ABOVE)

DATE

GENERATOR'S SIGNATURE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0000356

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE/E.P.A. I.D. NO.
GENERATOR LADST PAINT AND STAIN	MARQUINE ST CHELSEA MA	(617) 84 1247	MA D091021732
PRIMARY TRANSPORTER SUNFLEX SERVICES INC	18 THURLE ST BOSTON MA	(617) 25-1013	MA D045440951
CONTINUING TRANSPORTER		()	
H.W.F. SUNFLEX SERVICES INC	18 THURLE ST BOSTON MA	(617) 25-1013	MA D045440951

IF MORE THAN ONE MANIFEST / TOTAL NO. OF THIS FORM MANIFEST NO. OF FIRST FORM DATE SHIPPED EXPECTED ARRIVAL

SHIPPING PAPER IS USED: FORMS ARE NO. IS NO. IS DATE MONTH DAY YEAR DATE MONTH DAY YEAR

04 11 81 04 11 81

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
1. NAITHILLINE	ORM-A	UN1280	20	Y	Y	001	QT	14145	
2.									
3.									
4.									
5.									
6.									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

OPEN TO... 1/11

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 4 11 81	STATE COMPANY NO. FOR TRAILER, MARINE OR RAIL MA — A1041	DATE OF DELIVERY MONTH DAY YEAR 4 11 81
	PLACARDS REQUIRED None	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	SIGNATURE OF TRANSPORTER <i>Don McLean</i>	SIGNATURE OF TRANSPORTER	DATE OF DELIVERY MONTH DAY YEAR

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT.

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ DATE MONTH DAY YEAR

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE

DATE

GENERATOR SIGNATURE

sheet 1

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0000356
MANIFEST NUMBER

GENERATOR NAME CABOT PAINT AND STAIN	MAILING ADDRESS MARGINAL ST CHELSEA MA	PHONE NUMBER (617) 825-9247	STATE / E.P.A. I.D. NO. MA D091021733
PRIMARY TRANSPORTER SUFFOLK SERVICES INC	98 TAYLOR ST BOSTON MA	(617) 825-9043	MA D049440951
CONTINUING TRANSPORTER			
H.W.F. SUFFOLK SERVICES INC	98 TAYLOR ST BOSTON MA	(617) 825-9043	MA D049440951

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE <input type="checkbox"/>	THIS FORM NO. IS <input type="checkbox"/>	MANIFEST NO. OF FIRST FORM <input type="checkbox"/>	DATE SHIPPED MONTH <input type="text" value="04"/> DAY <input type="text" value="11"/> YEAR <input type="text" value="81"/>	EXPECTED ARRIVAL DATE MONTH <input type="text" value="04"/> DAY <input type="text" value="11"/> YEAR <input type="text" value="81"/>
---	---	---	---	---	--

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
1. NAPHTHALENE	ORM-A	UN1331	20	yd³	Y	001	OT	V145	
2.									
3.									
4.									
5.									
6.									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:
OPEN TOP Roll-off container 30yd³ capacity, 2/3 full

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

GENERATOR COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 4 11 81	STATE COMPANY NO. FOR TRAILER, MARINE OR RAIL MA - A10775	DATE OF DELIVERY MONTH DAY YEAR 4 11 81
PLACARDS REQUIRED NONE	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT.

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Douglas A. Martin
SIGNATURE

DATE
MONTH DAY YEAR
4 11 81

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

Thomas J. McHenry
TRANSPORTER SIGNATURE
DATE **4/11/81**
GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE

1	2	3	4
5	6	7	8

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0000355

MANIFEST NUMBER

GENERATOR COMPLETES

GENERATOR CABOT PAINT & STAIN	MAILING ADDRESS MARGINAL ST CHELSEA MA	PHONE NUMBER (617) 884-1247	STATE/E.P.A. I.D. NO. MA 1001021732
PRIMARY TRANSPORTER SUFFOLK SERVICES INC.	98 TAYLOR ST BOSTON MA	(617) 825-9043	MA D049440951
CONTINUING TRANSPORTER			
H.W.F. SUFFOLK SERVICES INC.	98 Taylor St. Boston MA	(617) 825-9043	MA D049440951

IF MORE THAN ONE MANIFEST/SHIPPING PAPER IS USED: TOTAL NO. OF FORMS ARE 1 THIS FORM NO. IS 1 MANIFEST NO. OF FIRST FORM DATE SHIPPED MONTH 4 DAY 11 YEAR 81 EXPECTED ARRIVAL DATE MONTH 4 DAY 11 YEAR 81

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN. / N.A. NO.	WT. / VOL.	UN. TO	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
NAPHTHALENE	ORM-A	1334	20 yds³	Y	U01	OT	HAZ		
								U165	

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION; AND EMERGENCY RESPONSE INFORMATION:
CONTAINER 30 yd³ capacity 2/3 full

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. Ken McLean SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH <u>4</u> DAY <u>11</u> YEAR <u>81</u>	STATE <u>MA</u> COMPANY NO. FOR TRAILER, MARINE OR RAIL <u>A10775</u>	DATE OF DELIVERY MONTH <u> </u> DAY <u> </u> YEAR <u> </u>
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH <u> </u> DAY <u> </u> YEAR <u> </u>	STATE <u> </u> COMPANY NO. FOR TRAILER, MARINE OR RAIL <u> </u>	DATE OF DELIVERY MONTH <u> </u> DAY <u> </u> YEAR <u> </u>

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT.

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Las A. Martin
SIGNATURE

MONTH 4 DAY 11 YEAR 81

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

DATE 7/10/81 GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE

SIGNATURE Las A. Martin GENERATOR SIGNATURE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0000355

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR <i>East Point - Stone</i>	<i>18 Taylor St Boston MA</i>	<i>(617) 554-1244</i>	<i>MA D-111111</i>
PRIMARY TRANSPORTER <i>...</i>	<i>18 Taylor St Boston MA</i>	<i>(617) 225-1243</i>	<i>MA D-111111</i>
CONTINUING TRANSPORTER			
H.W.F.	<i>18 Taylor St Boston MA</i>	<i>(617) 554-1243</i>	<i>MA D-111111</i>

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE
DATE

GENERATOR COMPLETES

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:		TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED: MONTH DAY YEAR	EXPECTED ARRIVAL DATE: MONTH DAY YEAR			
U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
<i>...</i>	<i>...</i>	<i>...</i>	<i>...</i>	<i>...</i>	<i>...</i>	<i>...</i>	<i>...</i>	<i>...</i>	<i>...</i>

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR <i>11 11 81</i>	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR
PLACARDS REQUIRED <i>N/A</i>	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

Alan McLean
SIGNATURE OF TRANSPORTER

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT	HANDLING METHOD
I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.	1. <input type="checkbox"/> 4. <input type="checkbox"/>
	2. <input type="checkbox"/> 5. <input type="checkbox"/>
	3. <input type="checkbox"/> 6. <input type="checkbox"/>
SIGNATURE	MONTH DAY YEAR

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0000300

MANIFEST NUMBER

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR East Point - Boston	11th Ave St Boston MA	(617) 884-1247	MA D-01021734
PRIMARY TRANSPORTER Sullivan Services Inc	18 Taylor St Boston MA	(617) 225-7043	MA D049440751
CONTINUING TRANSPORTER			
H.W.F. Sullivan Services Inc	18 Taylor St Boston MA	(617) 225-7043	MA D049440751

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
				4	11	81		4	11	81	

	U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN / N/A NO.	WT. / VOL	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
							NO.	TYPE		
1	METHANOL	ORM-A	1004	23	gals	Y	448	OT	1163	
2									U163	
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	SIGNATURE OF TRANSPORTER <i>Ken McLean</i>	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 11 11 81	STATE MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL 410775	DATE OF DELIVERY MONTH DAY YEAR
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT.

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____

MONTH DAY YEAR

HANDLING METHOD	
1	4
2	5
3	6

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE
DATE
GENERATOR SIGNATURE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER

GENERATOR CABOT PAINT AND STAIN	MAILING ADDRESS MARGINAL ST. CHELSEA, MA.	PHONE NUMBER (617) 884-1247	STATE / E.P.A. I.D. NO. MA D001021732
PRIMARY TRANSPORTER Suffolk SERVICES, INC.	98 TAYLOR ST. BOSTON, MA 02122	(617) 825-9040	MA D049440951
CONTINUING TRANSPORTER			
H.W.F. Suffolk SERVICES, INC.	98 TAYLOR ST. BOSTON, MA. 02122	(617) 825-9040	MA D049440951

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE 1	THIS FORM NO. IS 1	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
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U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		EPA WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
1 NAPHTHALENE	ORM-A	UN 1334	20 yds³	1	000	OT	U165		
2									
3									
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:
OPEN TOP ROLL-off CONTAINER *Contains several large 25 yds³*

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. Kenneth McLean SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 4 10 91	STATE COMPANY NO. FOR TRAILER, MARINE OR RAIL MA A10715	DATE OF DELIVERY MONTH DAY YEAR
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Douglas A. Tjundra
SIGNATURE

MONTH DAY YEAR
04 10 91

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

Alonso Hernandez
GENERATOR SIGNATURE

DATE
4 16 91

GENERATOR'S EMERGENCY PHONE NO. IF DIFFERENT FROM ABOVE
617-884-1247

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER 1111 0000000

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR		()	
PRIMARY TRANSPORTER		()	
CONTINUING TRANSPORTER			
H.W.F.			

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
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U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 4 16 81	STATE MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL MA 01 9775	DATE OF DELIVERY MONTH DAY YEAR
PLACARDS REQUIRED <input type="checkbox"/>	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT.

H.W.F. COMPLETES

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ DATE _____

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

DATE _____ GENERATOR'S EMERGENCY PHONE # _____

SUFFOLK SERVICES, INC.

COMPLETE COMPACTION AND
CONTAINERIZED DISPOSAL SERVICES
LICENSED HAZARDOUS WASTE SERVICES

98 Taylor Street • Boston (Neponset), Mass. 02122 • 825-9043 PAGE 1



INVOICE NO: 021970
INVOICE DATE: 05/04/81
CUSTOMER PO:
TERMS: NET 7 DAYS

BILL TO:

00100

SHIP TO:

CADDT PAINTS & STAIN
209 MARGINAL ST
CHELSEA, MA. 02150

NAPHTHALENE

REMOVAL OF

LINE	DATE	QUANTITY	DESCRIPTION	PRICE	AMOUNT
	04/11	3	3 15 IRON TO BART	1350.00	4050.00
		65	CU YDS NAPHTHALENE SOLIDS	750.00	4875.00
		1	332 OVER STAIRS OVERLOAD ZONE	445.50	445.50
			MANIFESTS 332-56-43		
				TOTAL	9370.50

THE DEPT. OF PUBLIC UTILITIES REQUIRES US BY LAW TO BILL OUR CUSTOMERS
EVERY 7 DAYS WITH PAYMENT BEING RECEIVED WITHIN 7 ADDITIONAL DAYS

PLEASE PAY LAST AMOUNT IN THIS COLUMN 4

0052-0045

SUFFOLK SERVICES, INC. • Trucking and Disposal



98 Taylor Street
Boston, Mass. 02122
Telephone: 825-9043

March 27, 1981

Mr. Howard Rust
Cabot Paint & Stain
Marginal Street
Chelsea, Mass. 02150

Dear Mr. Rust:

Confirming today's telephone conversation, the cost for disposal of the naphthalene solids being stored at your location is \$75.00 per cubic yard. The transportation cost is \$1350.00 per trip. Our weight limitation is 18 ton, which means we should be able to carry 25-30 cubic yards and be within legal weight limits.

The material would be landfilled in the vicinity of Baltimore, Maryland at a secure chemical landfill, owned and operated by Browning-Ferris Industries. The only stipulation is that there can be no free liquids present. Due to this, I feel it necessary to unload the container and reload it immediately. This would allow for the removal of any liquids, and make certain that the contents would dump. Freely. We could also load a second container with the remaining material at the same time.

If you have any further questions, please contact me.

Very truly yours,
SUFFOLK SERVICES, INC.

Rick Shaffer
RS/sr

0052-0046

March 26, 1981

Advised this date by Rick Schaffer of Suffolk Services the Napthalene can be disposed of at a landfill site in Maryland, near Baltimore owned by Browning Ferris Industries, known as D.F.I.

2 days notice must be given before shipment. Rick feels that the material in the container should be dumped on the ground and reloaded, (our front end loader) so we will know the material will not stick in the container and any liquid will be removed here.

The load will have to be covered in transit.

The disposal cost will be \$75.00 per yard. Rick estimates there will be 25-30 cu yds per container.

Transportation will cost \$1350.00

30 yards @ \$75.00 per yard
\$2250.00

\$3600.00

~~80~~ yards @ \$.75⁰⁰
- \$ 6000⁰⁰

Transportation
3 loads @ \$1350⁰⁰
\$ 4050⁰⁰

\$ 10,050⁰⁰

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0072789

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
Cabot Paint Co	224 Marginal St Chelsea MA 02150	(617) 884 1427	MA D001021732
PRIMARY TRANSPORTER Suffolk Services Inc	98 Taylor St Boston 02122	(617) 825-9045	MA D045440951
CONTINUING TRANSPORTER			
H.W.F. Suffolk Services Inc	98 Taylor St Boston 02122	(617) 825-9045	MAD 045440951

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO. OF FORMS ARE THIS FORM NO IS MANIFEST NO OF FIRST FORM DATE SHIPPED MONTH 12 DAY 29 YEAR 81 EXPECTED ARRIVAL MONTH 12 DAY 29 YEAR 81

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
1. Petroleum Oil	Flammable	120	03500	GA	G	069	DR	D001	waste oils + sludges from holding tanks
2.									
3.									
4.									
5.									
6.									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	SIGNATURE OF TRANSPORTER <u>Wesley Williams</u>	DATE SHIPMENT ACCEPTED MONTH <u>12</u> DAY <u>29</u> YEAR <u>81</u>	STATE <u>MA</u>	COMPANY NO. FOR TRAILER, MARINE OR RAIL <u>ST 100</u>	DATE OF DELIVERY MONTH <u> </u> DAY <u> </u> YEAR <u> </u>
	PLACARDS REQUIRED <u>Flammable</u>	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH <u> </u> DAY <u> </u> YEAR <u> </u>	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH <u> </u> DAY <u> </u> YEAR <u> </u>

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

H.W.F. COMPLETES	I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.						SIGNATURE <u>D.A. Martini</u>			DATE MONTH <u>12</u> DAY <u>29</u> YEAR <u>81</u>		
	HANDLING METHOD											
	1	<u>505</u>										
2												
3												

FNE LABELMASTER CHICAGO, IL 60626

GENERATOR COMPLETED COPY

0052-0048

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE
DATE
GENERATOR SIGNATURE
Thomas Williams 12/29/81

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0072789

MANIFEST NUMBER

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR	221 W. Madison St. - Chicago, IL 60606	(312) 467-1111	MA 0072789
PRIMARY TRANSPORTER	ACT, Inc. - Boston, MA 02122	(617) 552-1111	MA 00159405
CONTINUING TRANSPORTER			
H.W.F.			

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE <input type="checkbox"/>	THIS FORM NO IS <input type="checkbox"/>	MANIFEST NO. OF FIRST FORM <input type="checkbox"/>	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL	MONTH	DAY	YEAR
								DATE			

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
1. Petroleum Oil	1.2	159	100	1	15	000	04	000	Petroleum Oil
2.									
3.									
4.									
5.									
6.									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. _____ SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 1 1 87	STATE MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL T-100	DATE OF DELIVERY MONTH DAY YEAR 1 1 87
PLACARDS REQUIRED 2	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. _____ SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 1 1 87	STATE MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR 1 1 87

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

 SIGNATURE

MONTH DAY YEAR
 1 1 87

HANDLING METHOD	1	4	7
	2	5	8
	3	6	9

FNE LABELMASTER CHICAGO, IL 60626

GENERATOR COPY

0052-0049

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE

DATE

GENERATOR SIGNATURE

Generator: **Bo-Pa Co.** 224 Marginal St. - 02114-2701 MA Dept. of Energy
 93 Taylor St. - 02114-5017 MA Dept. of Energy

Generator: **Suffolk County Inc.** 90 Taylor St. - 02114-5017 MA Dept. of Energy
 Expected Arrival: 12/27/01

Generator Name	Quantity	Material	Weight	Volume	Remarks
Robertson Oil	1270	Oil	25000	25000	Waste oil - sludge from hold tank

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER MARKINGS AND EMERGENCY RESPONSE INFORMATION.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD - 800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input checked="" type="checkbox"/> HAZARDOUS WASTE <input type="checkbox"/> OTHER	I CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED RECIPIENT.	DATE SHIPMENT ACCEPTED MONTH: 12 DAY: 27 YEAR: 2001	STATE: MA	COMPANY NAME FOR TRANSPORTER:	DATE OF DELIVERY MONTH: JAN YEAR:
I HAVE RECEIVED FROM THE GENERATOR AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED RECIPIENT.	SIGNATURE OF RECIPIENT:	DATE SHIPMENT ACCEPTED MONTH: DAY: YEAR:	STATE:	COMPANY NAME FOR TRANSPORTER:	DATE OF DELIVERY MONTH: DAY: YEAR:

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT
 I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

HANDLING METHOD	
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE TO BE FULLY CONTAINED, DESCRIBED, PACKAGED, LABELED AND A FIELD APPROVED PREPARED TO BE TRANSPORTED ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION FOR THE ENVIRONMENTAL PROTECTION AGENCY.

Signature: *Thomas J. [unclear]* 11/11/01

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 5741
MANIFEST NUMBER

NAME <i>Cabot Paints</i>	MAILING ADDRESS <i>729 Main Street, Chelsea, MA</i>	PHONE NUMBER <i>(617) 723-7740</i>	STATE / EPA ID NO. <i>MA 0001021732</i>
PRIMARY TRANSPORTER <i>Clean Industry, Inc</i>	<i>170 Bridge Street, E. Boston, MA</i>	<i>(617) 567-6500</i>	<i>MA 0066588906</i>
CONTINUING TRANSPORTER			
<i>Triology Clean Ind. Inc</i>	<i>170 Bridge Street, E. Boston, MA</i>	<i>(617) 567-6500</i>	<i>MA 0066588906</i>

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED	TOTAL NO. OF FORMS ARE 7	THIS FORM NO IS 1	MANIFEST NO. OF FIRST FORM MA 5741	DATE SHIPPED MONTH 02 DAY 6 YEAR 83	EXPECTED ARRIVAL DATE MONTH 02 DAY 6 YEAR 83
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U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN. I.D. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		EPA WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
<i>Hazardous waste, mixed, MSW</i>	<i>DRME</i>	<i>1270</i>	<i>9600</i>	<i>total</i>	<i>25</i>	<i>1</i>	<i>TR</i>	<i>DRM1</i>	<i>Contents are water and oil resulting from oil spill</i>
2									
3									
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

Oil and water

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8602

TRANSPORTER COMPLETES	REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>[Signature]</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	STATE MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL <i>198286</i>	DATE OF DELIVERY MONTH DAY YEAR <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	PLACARDS REQUIRED <i>Combustible</i>	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>[Signature]</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 02 6 83	STATE MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL <i>198286</i>	DATE OF DELIVERY MONTH DAY YEAR 02 4 83

H.W.F. COMPLETES	INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT	HANDLING METHOD 501
	I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE. <i>[Signature]</i> SIGNATURE	DATE MONTH DAY YEAR 2 6 83

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NUMBER: _____ DATE: _____ GENERATOR'S SIGNATURE: _____

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0141
MANIFEST NUMBER

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR			
PRIMARY TRANSPORTER			
CONTINUING TRANSPORTER			
H.W.F.			

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
---	------------------------	------------------	----------------------------	--------------	-------	-----	------	-----------------------	-------	-----	------

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
1									
2									
3									
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. _____ SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR _____	STATE _____	COMPANY NO. FOR TRAILER, MARINE OR RAIL _____	DATE OF DELIVERY MONTH DAY YEAR _____
PLACARDS REQUIRED _____	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. _____ SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR _____	STATE _____	COMPANY NO. FOR TRAILER, MARINE OR RAIL _____	DATE OF DELIVERY MONTH DAY YEAR _____

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE

MONTH DAY YEAR

HANDLING METHOD		
1	4	
2	5	
3	6	

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NUMBER IF DIFFERENT FROM ABOVE

DATE

GENERATOR SIGNATURE

DATE Feb 10, 1983
Thursday

COASTAL SERVICES, INC.
DAILY JOB REPORT

BRANCH 02 JOB NUMBER CUSTOMER NUMBER JOB TYPE DATE STARTED 2/10/83 DATE COMPLETED 2/10/83 CUSTOMER P.O. NUMBER

CUSTOMER Cabot Paint & stains

BILLING ADDRESS

LOCATION Tank # 204, no. 4 Heating oil. Industrial clean tank
bottoms removing sludge, oil & water for disposal.
Job complete.

MATERIAL USED:

Coastal Paks _____ Soda Ash _____ Boots 2 pr Miscellaneous _____
 Loose Absorb. _____ Rain Gear _____ Disposable _____ 35 gal #2 fuel
 Quick Wick _____ Absorb Boom _____ Suits 4 for cutting sludge
 Speedi Dri _____ Gloves 4 pr 3M Type _____ 10 lbs rags
 Other: _____ Garbage Bags 3 3M Type _____

EQUIPMENT	HOURS/ MILES	NUMBER	TOLLS	EQUIPMENT	HOURS/ MILES	NUMBER	TOLLS
<u>1 Rack Truck/craw-cab</u>	<u>5.6</u>	<u>1516</u>	<u> </u>		<u>1</u>	<u> </u>	<u> </u>
<u>1 Rack Truck/skid mt.</u>	<u>5.6</u>	<u>70016</u>	<u> </u>		<u>1</u>	<u> </u>	<u> </u>
	<u>1</u>	<u> </u>	<u> </u>		<u>1</u>	<u> </u>	<u> </u>
	<u>1</u>	<u> </u>	<u> </u>		<u>1</u>	<u> </u>	<u> </u>

EMPLOYEE NUMBER	NAME	START	FINISH	EMPLOYEE NUMBER	NAME	START	FINISH
<u>F 77141</u>	<u>Scott H. Poulton</u>	<u>7:00</u>	<u>12:00</u>				
<u>O 56837</u>	<u>Mitch McWilliams</u>	<u>7:00</u>	<u>12:00</u>				
<u>C 413878</u>	<u>Paul La Croix</u>	<u>7:00</u>	<u>12:00</u>				
<u>C 28919</u>	<u>Pete Hanigan Jr</u>	<u>7:00</u>	<u>12:00</u>				

SUB-CONTRACTOR: None

DISPOSAL: 600 gals OIL & WATER MANIFEST # 1182209 FOREMAN Scott H. Poulton

DATE: 2/10/83 CUSTOMER'S APPROVAL: [Signature]

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER

GENERATOR NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
Label Paint	229 Main Street, Chelsea, Ma	(417) 723-7740	MA 0001021732
PRIMARY TRANSPORTER	170 Border Street, E. Boston, Ma	(417) 567-6500	MA 004458906
CONTINUING TRANSPORTER			
Embroid Clean Industry	170 Border Street, E. Boston, Ma	617 567-6500	MA 004458906

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO. OF FORMS ARE 2; THIS FORM NO. IS 1; MANIFEST NO. OF FIRST FORM MA 2209; DATE SHIPPED MONTH 2 DAY 10 YEAR 93; EXPECTED ARRIVAL MONTH 2 DAY 10 YEAR 93

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
Waste Oil - W.O.S	ORME	1270	600	Gal	8	1	TR	0001	Contents are Tank Bottoms and Wash Materials from Tank cleaning

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

Tank Bottoms

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH 2 DAY 10 YEAR 93	STATE MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL C14599	DATE OF DELIVERY MONTH 2 DAY 10 YEAR 93
PLACARDS REQUIRED Compendable	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature: *A. Pauli*

DATE: MONTH 2 DAY 10 YEAR 93

HANDLING METHOD	
1	301
2	
3	

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR SIGNATURE: *[Signature]*

DATE: 2/10/93

GENERATOR'S EMERGENCY PHONE: IF DIFFERENT FROM ABOVE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO
GENERATOR		()	
PRIMARY TRANSPORTER		()	
CONTINUING TRANSPORTER		()	
H.W.F.		()	

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
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U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S
						NO.	TYPE		
			600						

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____

MONTH DAY YEAR

HANDLING METHOD					
1	2	3	4	5	6

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR SIGNATURE _____ DATE _____ GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE _____

See cover sheet for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY 299850 3

Part A:

GENERATOR NAME Cabot Paint	PHONE 617 884-1247	EPA ID NO. MA0001102117132
SITE ADDRESS 229 Marginal Street Chelsea, MA 02155		
TRANSPORTER NO. 1 Peabody Clean Industry	PHONE 617-547-6500	EPA ID NO. MA001665889106
SITE ADDRESS 170 Border St E Boston, MA 02128		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cecos International	PHONE 716-731-3281	EPA ID NO. NYD108103362141
SITE ADDRESS 4528 Royal Ave Niagara Falls, N.Y		

THIS FORM IS NO. 0001 OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS NY

	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1	Haz Waste Solid	ORME	9189		620160	lbs	1	TR		D001
2										
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION. This is to certify that the herein named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>[Signature]</i> Please type name also E. J. THEL	DATE SHIPPED Mo. Day Yr. 6 21 83	EXPECTED ARRIVAL DATE Mo. Day Yr. 7 14 83
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>[Signature]</i>	TRANSPORTER NO. 1 PERMIT NUMBER DE 6	DATE RECEIVED Mo. Day Yr. 6 21 83

COPY 3 Generator—Retained by Generator

Tear at this Perforation

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 5744
MANIFEST NUMBER

GENERATOR COMPLETES

NAME CABOT PAINT	MAILING ADDRESS 229 MARGINAL STREET, CHELSEA, MA	PHONE NUMBER (617) 338-1247	STATE / E.P.A. I.D. NO. MA D001021732
PRIMARY TRANSPORTER PRABODY CLEAN INDUSTRY, INC.	170 Border Street, E. Boston, MA	(617) 567-6500	MA D066588906
CONTINUING TRANSPORTER			
H.W.F. CECOS INTERNATIONAL	4528 Royal Ave. Niagra Falls, N.Y. 14302	(716) 731-3281	NY D080336241

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO. OF FORMS ARE 7 THIS FORM NO IS 1 MANIFEST NO. OF FIRST FORM MA 5744 DATE SHIPPED MONTH 11 DAY 14 YEAR 83 EXPECTED ARRIVAL MONTH 1 DAY 15 YEAR 83

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
1. HAZ WASTE SOLID	ORME	9189	62060 35880	LBS		1	TR	D001	OILY DEBRIS RESULTING FROM Oil Spill
2.									
3.									
4.									
5.									
6.									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

W04 50490
PC 53-P

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE: 24-83

DATE: 11/14/83

GENERATOR SIGNATURE: *[Signature]*

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH <u>11</u> DAY <u>14</u> YEAR <u>83</u>	STATE <u>MA</u>	COMPANY NO. FOR TRAILER, MARINE OR RAIL <u>TUG</u>	DATE OF DELIVERY MONTH <u>02</u> DAY <u>15</u> YEAR <u>83</u>
PLACARDS REQUIRED 9189	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH <u> </u> DAY <u> </u> YEAR <u> </u>	STATE <u> </u>	COMPANY NO. FOR TRAILER, MARINE OR RAIL <u> </u>	DATE OF DELIVERY MONTH <u> </u> DAY <u> </u> YEAR <u> </u>

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE

[Signature]
SIGNATURE

MONTH 11 DATE 15 YEAR 83

HANDLING METHOD	
1. <u>DS1</u>	2. <u> </u>
3. <u> </u>	4. <u> </u>
5. <u> </u>	6. <u> </u>

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 5144
MANIFEST NUMBER

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR CABOT PAINT	HEXX 229 MARGINAL STREET, CHELSEA, MA	(617) 222-884-1247	MA D 0 0 1 0 2 1 7 3 2
PRIMARY TRANSPORTER PRABODY CLEAR INDUSTRY, INC.	170 Border Street, E. Boston, MA	(617) 567-6500	MA D 0 6 6 5 8 8 9 0 6
CONTINUING TRANSPORTER			
H.W.F. CACOS INTERNATIONAL	4528 Royal Ave. Niagara Falls, N.Y. 14302	(716) 731-3281	NY D 0 8 0 3 3 6 2 4 1

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S
						NO.	TYPE		
1. HAZ WASTE SOLID	ORM3	9189				1	TR	D 0 0 1	OILY DEBRIS RESULTING FROM Oil spill
2.									
3.									
4.									
5.									
6.									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR
PLACARDS REQUIRED 9189	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH DAY YEAR

HANDLING METHOD	
1	4
2	5
3	6

0052-0059

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NUMBER IF DIFFERENT FROM ABOVE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 5745
MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR CABOT CHROMIUM PAIN	229 Marginal Street, Chelsea, MA 02155	(617) 884-1247	MA D001021732
PRIMARY TRANSPORTER PEABODY CLEAN INDUSTRY, INC.	170 Border Street, E. Boston, MA 02128	(617) 567-6500	MA D066588906
CONTINUING TRANSPORTER			
H.W.F. CECOS INTERNATIONAL	4528 Royal Ave. Niagra Falls, NY 14302	(716) 731-3281	NY D080336241

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO. OF FORMS ARE 7 THIS FORM NO. IS 1 MANIFEST NO. OF FIRST FORM 5779 DATE SHIPPED MONTH DAY YEAR EXPECTED ARRIVAL MONTH DAY YEAR

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN. / N.A. NO.	WT. / VOL	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
1. HAZ WASTE SOLID	ORNE	9189	1600 3250	LBS		1	TR	D, O, O, I	OILY DEBRIS RESULTING FROM OIL SPILL
2.									
3.									
4.									
5.									
6.									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

*with 50496
PC 537*

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER: <i>[Signature]</i>	DATE SHIPMENT ACCEPTED MONTH <u>2</u> DAY <u>11</u> YEAR <u>83</u>	STATE <u>MA</u> COMPANY NO. FOR TRAILER, MARINE OR RAIL <u> </u>	DATE OF DELIVERY MONTH <u> </u> DAY <u> </u> YEAR <u> </u>
PLACARDS REQUIRED 9189	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER: <u> </u>	DATE SHIPMENT ACCEPTED MONTH <u> </u> DAY <u> </u> YEAR <u> </u>	STATE <u> </u> COMPANY NO. FOR TRAILER, MARINE OR RAIL <u> </u>	DATE OF DELIVERY MONTH <u> </u> DAY <u> </u> YEAR <u> </u>

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE FOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: *[Signature]* MONTH 10 DAY 13

HANDLING METHOD	
1. <u> </u>	<u> </u>
2. <u> </u>	<u> </u>
3. <u> </u>	<u> </u>

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE

DATE 2/11/83 GENERATOR SIGNATURE *[Signature]*

GENERATOR COMPLETES

GENERATOR CAROL CHEMICALS PAPER	MAILING ADDRESS 229 Marginal Street, Chelsea, MA 02155	PHONE NUMBER (617) 884-1747	STATE / E.P.A. I.D. NO. MA 000102712
PRIMARY TRANSPORTER FRANCOY CLEAN INDUSTRY, INC.	170 Border Street, E. Boston, MA 02128	(617) 567-6500	MA 000102712
CONTINUING TRANSPORTER			
H.W.F. CRCOS INTERNATIONAL	4528 Royal Ave. Niagara Falls, NY 14302	(716) 731-3281	NY 0000314241

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO. OF THIS FORM MANIFEST NO. OF FIRST FORM DATE SHIPPED MONTH DAY YEAR EXPECTED ARRIVAL MONTH DAY YEAR

FORMS ARE NO. IS

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
HAZ WASTE SOLID	DMR	9189					T	D.S.S.1	OILY DEBRIS RESULTING FROM OIL SPILL

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>[Signature]</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 2 11 89	STATE: MA VEHICLE I.D. 7	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR
PLACARDS REQUIRED 9189	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE: MA VEHICLE I.D.	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ DATE _____

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE _____ DATE _____ GENERATOR SIGNATURE _____

Part B: GEN NAME CAROT PAINT

GEN EPA ID# NY2018013216XV

Transporter - FILL OUT

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>[Signature]</i>		DATE DELIVERED Mo. <u>02</u> Day <u>15</u> Year <u>13</u>
TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>[Signature]</i>	TRANSPORTER NO. 2 PERMIT NUMBER <u>W04 504 90 3C 53-P</u>	DATE RECEIVED Mo. Day Year
TRANSPORTER NO. 3 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."		DATE DELIVERED Mo. Day Year

TSD Facility - FILL OUT

TSD NAME <u>CFCS</u>	TSD EPA ID # <u>NY2018013216XV</u>	HANDLING METHOD
TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS		1 <u>DB</u> 2 3 4 5 6
TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form." <i>[Signature]</i>	SIGNATURE <i>[Signature]</i> Please print or type name also <u>BOCK</u>	DATE RECEIVED Mo. Day Year
In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.		DOCUMENT NO. <u>NY 299850-3</u>

COPY 3 Generator-Mailed by TSD Facility

See cover sheet for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

HAZARDOUS WASTE MANIFEST

PLEASE TYPE

Part A:

DOCUMENT NO. NY **299851 2**

GENERATOR NAME	PHONE	EPA ID NO.
SITE ADDRESS		
TRANSPORTER NO. 1	PHONE	
SITE ADDRESS		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY	PHONE	
SITE ADDRESS		

THIS FORM IS NO. OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS NY

	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1					22.7	20				
2										
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION. This is to certify that the herein named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>E. T. Tuel</i>	DATE SHIPPED Mo. Day Yr.	EXPECTED DATE Mo.
--	-----------------------------	----------------------

TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the

TRANSPORTER NO. 1 PERMIT NUMBER

To Be TYPED by Generator

CECOS
INTERNATIONAL
CHEMICAL AND ENVIRONMENTAL CONSERVATION SYSTEMS, INC.

2321 Kenmore Avenue
Buffalo, New York 14207
(716) 873-4200

February 18, 1983

Cabot Paint
229 Marginal Street
Chelsea, Mass. 02155

RE: Manifest #NY 299851 2
part A, Facility Copy

Attn: E. J. Thel, Plant Engineer

Dear Mr. Thel:

Upon receiving the New York State Manifest #NY 299851 2 along with your Massachusetts Manifest #MA 5745 that was shipped February 11, 1983, I find that the Facility Copy part A is missing and your Generator Copy part A is in my possession. If you have in your possession part A of Copy 4 would you please forward it to me and I'll send to you, part A and B of copy 3, the Generator copy.

Also, I sent to the New York State Department of Environmental Conservation your part A of the Disposal Copy along with part B and to the State of Massachusetts Division of Hazardous Waste I sent your part A of the Generator State Copy along with part B.

Please call me to let me know if you have kept our Retainer Copy by mistake. I can be reached at 716-282-2676.

Very truly yours

Marie A. Savage

Marie A. Savage
Environmental Health &
Safety Department

cc: file

*signed away on
phone call from Marie
on 2/22. No exchange
will be necessary*

48-14-1

See cover sheet
for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY 299887 2

Part A:

GENERATOR NAME CABOT STAIN	PHONE 617-723-7740	EPA ID NO. MA D001021732
SITE ADDRESS 229 Marginal Street, Chelsea, MA 02150		
TRANSPORTER NO. 1 Peabody Clean Industry, Inc.	PHONE 617-567-6500	EPA ID NO. MA D066582006
SITE ADDRESS 170 Border Street, East Boston, MA 02128		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cocos International	PHONE 716-731-3281	EPA ID NO. NY D084336241
SITE ADDRESS 4528 Royal Ave. Niagara Falls, N.Y.		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS _____ NY _____

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
						NO.	TYPE		
1 Asphalt Solids	091-C	1989			1ba		5		N/A
2									
3									
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION. This is to certify that the herein named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>Thomas Manning</i> Please type name also THOMAS MANNING	DATE SHIPPED 02 29 83 Mo. Day Yr.	EXPECTED ARRIVAL DATE 02 25 83 Mo. Day Yr.
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>Ray Kensch</i>	TRANSPORTER NO. 1 PERMIT NUMBER MA 1021	DATE RECEIVED Mo. Day Yr.

To Be TYPED by Generator

0052-0066

See cover sheet
for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY 299870 1

PLEASE TYPE

Part A:

GENERATOR NAME Cabot Stain, Tom Manning	PHONE 617-723-7740	EPA ID NO. MAD0000207BR
SITE ADDRESS 229 Marginal St. Chelsea Ma		
TRANSPORTER NO. 1 Clean Industry Inc	PHONE 617-567-6500	MAD0000000
SITE ADDRESS 170 Border St. East Boston, Ma.		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cecos Intl Inc	PHONE 716-731-3281	MAD0000000
SITE ADDRESS Niagara Falls Blvd. Niagara Falls, N.Y.		

THIS FORM IS NO. 001 OF A TOTAL OF 1 THE FIRST MANIFEST DOCUMENT NO. IS NY

	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1	Oily Debris solids	ORM-E	N/A	02	20		1	03		N/A
2	For sanitary disposal									
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

Material is Non-hazardous according to RCRA
Material is from Clean-up of a #4 oil spill
Cecos Product Code #53-AE, Cecos Workorder # 5-2062

GENERATOR'S CERTIFICATION. This is to certify that the herein named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>Tom Manning</i> Please type name also	DATE SHIPPED 03 30 83 Mo. Day Yr.	EXPECTED ARRIVAL DATE 03 31 83 Mo. Day Yr.
	TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."	TRANSPORTER NO. 1 PERMIT NUMBER MAD021

COPY 3 Generator-Retained by Generator

Tear at this Perforation

To Be TYPED by Generator

GENERATOR COMPLETES

GENERATOR NAME Cabot Stain	MAILING ADDRESS 229 Marginal Street Chelsea, MA	PHONE NUMBER (617) 723-7740	STATE / E.P.A. I.D. NO. MA 0001021732
PRIMARY TRANSPORTER Peabody Clean Industry, Inc.	170 Border Street East Boston, MA	(617) 567-6500	MA 0066500900
CONTINUING TRANSPORTER			
H.W.F. CECOS International	4528 Royal Ave. Niagara Falls, NY	(716) 731-3261	NY 0080935241

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NO. () DATE GENERATOR SIGNATURE

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL	MONTH	DAY	YEAR
U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.		
						NO.	TYPE				
1. Asphalt Solids	ORM-C	1939		gal	G		DR	N/A	Tank Bottoms of Asphalt and Coal Tar Solids (flash point greater than 140°F) with sawdust.		
2.											
3.											
4.											
5.											
6.											

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR <i>T. J. ...</i>	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR
PLACARDS REQUIRED NONE	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT.

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ DATE _____

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
Sender	229 Marginal Street Chelsea, MA	(517) 723-7740	MA 0001021732
REPORTER Clean Industry, Inc.	170 Jordan Street East Boston, MA	(617) 567-5500	MA 0066588904
TRANSPORTER			
International	4529 Royal Ave. Niagara Falls, NY	(716) 731-3201	NY 0080336241

ONE MANIFEST / TOTAL NO. OF THIS FORM MANIFEST NO. OF FIRST FORM DATE SHIPPED MONTH DAY YEAR EXPECTED ARRIVAL MONTH DAY YEAR
 IS USED: FORMS ARE NO. IS NO. IS DATE DATE

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
Solids	ORM-C	1739		gal	G		DR	H/A	Tank Bottoms of Asphalt and Coal Tar Solids (flash point greater than 140°F) with sawdust.

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

UNDELIVERED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER: <i>[Signature]</i>	DATE SHIPMENT ACCEPTED: MONTH DAY YEAR MONTH: [] DAY: [] YEAR: []	STATE: MA VEHICLE I.D.: []	COMPANY NO. FOR TRAILER, MARINE OR RAIL: []	DATE OF DELIVERY: MONTH DAY YEAR MONTH: [] DAY: [] YEAR: []	DELIVERY: YEAR YEAR: []
	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER: _____	DATE SHIPMENT ACCEPTED: MONTH DAY YEAR MONTH: [] DAY: [] YEAR: []	STATE: [] VEHICLE I.D.: []	COMPANY NO. FOR TRAILER, MARINE OR RAIL: []	DATE OF DELIVERY: MONTH DAY YEAR MONTH: [] DAY: [] YEAR: []	DELIVERY: YEAR YEAR: []

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

HANDLING METHOD

1	4
2	3
3	6

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS

MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: _____
 MONTH: [] DAY: [] YEAR: []

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NUMBER: ()
 GENERATOR'S EMERGENCY PHONE: ()

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0841
MANIFEST NUMBER

GENERATOR Cabot Stain	MAILING ADDRESS 229 Marginal Street, Chelsea, MA	PHONE NUMBER (617) 723-7740	STATE/E.P.A. I.D. NO. MA 0001021732
PRIMARY TRANSPORTER Peabody Clean Industry, Inc	170 Border Street East Boston, MA	(617) 567-65000	MA 0066588906
CONTINUING TRANSPORTER			
H.W.F. CECOS International	4528 Royal Ave. Niagara Falls NY	(716) 731-3281	MA NY 0080336241

IF MORE THAN ONE MANIFEST/ SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE 2	THIS FORM NO. IS 1	MANIFEST NO. OF FIRST FORM MA 5347	DATE SHIPPED MONTH 2 DAY 24 YEAR 93	EXPECTED ARRIVAL DATE MONTH 2 DAY 25 YEAR 93
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U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. /N.A. NO.	WT. /VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
Asphalt Solids	ORM-C	1989		LGS	LB	77	DR	N/A	Tank Bottoms of Asphalt and Coat Tar Solids (Flash point greater than 140°) with sawdust Product Code - 53-K W.D # 50549

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH 2 DAY 24 YEAR 93	STATE MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL 98289	DATE OF DELIVERY MONTH 2 DAY 25 YEAR 93
	PLACARDS REQUIRED NONE	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

H.W.F. COMPLETES

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

[Signature]
SIGNATURE

MONTH **2** DAY **25** YEAR **93**
DATE

1	
2	
3	
4	
5	
6	

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE
DATE
GENERATOR SIGNATURE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 5847
MANIFEST NUMBER

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR Cabot Staia	229 Marginal Street, Chelsea, MA	(617) 723-7740	MA 0001021733
PRIMARY TRANSPORTER Peabody Clean Industry, Inc	170 Border Street East Boston, MA	(617) 567-65000	MA 0000530905
CONTINUING TRANSPORTER			
H.W.F. CECOS International	4528 Royal Ave. Niagara Falls NY	(716) 731-3281	NY 0000336241

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF THIS FORMS ARE	NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
---	-----------------------------	--------	----------------------------	--------------	-------	-----	------	-----------------------	-------	-----	------

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
Asphalt Solids	000-C	1989		oil	6		DR	N/A	Tank Bottoms of Asphalt and Coat Tar Solids (Flash point greater than 140°) with sawdust

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	VEHICLE I.D.	DATE OF DELIVERY MONTH DAY YEAR
PLACARDS REQUIRED NONE	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	VEHICLE I.D.	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, AND LIST REJECTED MATERIALS, AND LIST REJECTED MATERIALS, AND LIST REJECTED MATERIALS.

CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE

MONTH DAY YEAR

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE
DATE
GENERATOR SIGNATURE

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY 299888 1

See cover sheet
for instructions

PLEASE TYPE

Part A:

GENERATOR NAME CABOT STAIN	PHONE 617-723-7740	EPA ID NO. MA 1001021732
SITE ADDRESS 119 Marginal Street, Chelsea, MA 02150		
TRANSPORTER NO. 1 Peabody Clean Industry, Inc.	PHONE 617-567-6500	EPA ID NO. MA 0066588906
SITE ADDRESS 170 Border Street, East Boston, MA 02128		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY X Cecos International	PHONE 716-731-3281	EPA ID NO. NY 0000000000
SITE ADDRESS 4528 Royal Ave. Niagara Falls, N.Y.		

THIS FORM IS NO. 27 OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY _____

1	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1	ASPHALT SOLIDS	ORM-C	1989			lbs	15	DR		N/A
2										
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION. This is to certify that the herein named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>Thomas Manville</i> Please type name also THOMAS MANVILLE	DATE SHIPPED 12 24 87 Mo. Day Yr.	EXPECTED ARRIVAL DATE 1 25 88 Mo. Day Yr.
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>Tom French</i>	TRANSPORTER NO. 1 PERMIT NUMBER 012021	DATE RECEIVED 12 24 87 Mo. Day Yr.

COPY 3 Generator—Retained by Generator

Tear at this Perforation

Part B: GEN NAME

CABOT STAIN

GEN EPA ID#

WA 6001021732

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."

[Handwritten Signature]

WCF 50549
PC 53-K

DATE DELIVERED

Mo. Day Yr. 12 13 013

TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."

TRANSPORTER NO. 2 PERMIT NUMBER

[Empty boxes for permit number]

DATE RECEIVED

Mo. Day Yr. [Empty boxes]

TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."

DATE DELIVERED

Mo. Day Yr. [Empty boxes]

TSD NAME

[Handwritten Name]

TSD EPA ID #

WA 6001021732

HANDLING METHOD

TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS

1	DS	2			
3		4			
5		6			

TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form."

SIGNATURE

Please print or type name also

[Handwritten Signature]

DATE RECEIVED

Mo. Day Yr. 12 13 013

In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.

DOCUMENT NO. NY 299888

COPY 3 Generator-Mailed by TSD Facility

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

1414 MANIFEST NUMBER 0070

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR Cabot Stan	229 Marginal Street Chelsea, MA	(617) 728-7740	MA 0001021734
PRIMARY TRANSPORTER Peabody Clean Industry, Inc.	178 Border Street East Boston, MA	(617) 567-0500	MA 0066586900
CONTINUING TRANSPORTER		()	
H.W.F. CECOS International	452E Royal Ave. Niagara Falls, NY	716 731-3281	NY 0080336241

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
---	------------------------	------------------	----------------------------	--------------	-------	-----	------	-----------------------	-------	-----	------

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S
						NO.	TYPE		
1. Asphalt Solids	ORM-C	1989		DRUM	15	22	DR	N/A	Tank bottoms of Asphalt & Coal Tar Solids (flash point greater than 140°) with sawdust debris
2.									
3.									
4.									
5.									
6.									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8602

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED: MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY: MONTH DAY YEAR
PLACARDS REQUIRED NONE	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED: MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY: MONTH DAY YEAR

SIGNATURE OF TRANSPORTER

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH DAY YEAR

HANDLING METHOD		
1	4	
2	5	
3	6	

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NUMBER (SEE PAGE ABOVE)

DATE

GENERATOR SIGNATURE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 5848
MANIFEST NUMBER

US EPA ARCHIVE DOCUMENT

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR Cabot Stein	229 Marginal Street Chelsea, MA	(617) 723-7740	MA 0001021732
PRIMARY TRANSPORTER Peabody Clean Industry, Inc.	179 Border Street East Boston, MA	(617) 567-6500	MA 0055588906
CONTINUING TRANSPORTER			
H.W.F. CECOS International	4528 Royal Ave. Niagara Falls, NY	716 731-3281	NY 0000336241

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						TYPE			
1. Asphalt Solids	ORM-C	1989		485	LD5	DR	DR	N/A	Tank Bottoms of Asphalt & Coal Tar Solids (flash point greater than 140°) with sawdust debris Product Code 53-K W.O 50550
2.									
3.									
4.									
5.									
6.									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:
W.O 50550
PC 53-K

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>Michael Williams</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 2 28 83	STATE MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL 98259	DATE OF DELIVERY MONTH DAY YEAR 03 01 83
PLACARDS REQUIRED NONE	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Thomas L...
SIGNATURE

03 01 83
MONTH DAY YEAR

HANDLING METHOD	
1. DR1	
2.	
3.	

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE

DATE

GENERATOR SIGNATURE

See cover sheet for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY 290880 9

PIEASE TYPE

Part A:

GENERATOR NAME CABOT STAIN	PHONE 617-723-7740	EPA ID NO MA D001001700
SITE ADDRESS 119 Marginal Street, Chelsea, MA 02150		
TRANSPORTER NO. 1 Peabody Clean Industry, Inc.	PHONE 617-567-6500	MA D055588006
SITE ADDRESS 170 Border Street, East Boston, MA 02128		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cocos International	PHONE 716-731-3281	NY D000000001
SITE ADDRESS 4528 Royal Ave. Niagara Falls, N.Y.		

THIS FORM IS NO. 1 OF A TOTAL OF 1 THE FIRST MANIFEST DOCUMENT NO. IS NY 290880 9

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
						NO.	TYPE		
ASPHALT SOLIDS	ORM-C	1989			lbs	1	DR		N/A

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION. This is to certify that the herein named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>Thomas J. ...</i> Please type name also THOMAS J. ...	DATE SHIPPED Mo. Day Yr.	EXPECTED ARRIVAL DATE Mo. Day Yr.
	TRANSPORTER NO. 1 SIGNATURE <i>Michael ...</i> To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description of the manifest.	TRANSPORTER NO. 1 PERMIT NUMBER 11111111

COPY 3 Generator - Retained by Generator
Tear at this Perforation

To Be Typed by Generator

US EPA ARCHIVE DOCUMENT

Transporter—FILL OUT

Part-B: GEN NAME **CABOT STAIN** GEN EPA ID# **WA6661621732**

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>Mitchell McWilliam</i>	11-01-85 50550 20-53-K	DATE DELIVERED Mo: 11 Day: 01 Y: 85
TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."	TRANSPORTER NO.2 PERMIT NUMBER	DATE RECEIVED Mo: Day: Y:
TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."		DATE DELIVERED Mo: Day: Y:

TSD Facility—FILL OUT

TSD NAME <i>CFMS</i>	TSD EPA ID # <i>WA00013221001</i>	HANDLING METHOD
TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS		1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/>
TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form."	SIGNATURE <i>Mitchell McWilliam</i> Please print or type name also	DATE RECEIVED Mo: 11 Day: 01 Y: 85
In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7362.		DOCUMENT NO. NY 299880-9

COPY 3 Generator—Mailed by TSD Facility

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER 10000

GENERATOR COMPLETES

GENERATOR Cabot Stain, Tom Manning	MAILING ADDRESS 229 Marginal St. Chelsea, Ma	PHONE NUMBER (617) 723-7740	STATE/EPA I.D. NO. MA D001021732
PRIMARY TRANSPORTER Peabody Clean Industry	170 Border St. East Boston, Ma	(617) 567-6500	MA D066588906
CONTINUING TRANSPORTER			
H.W.F. Cecos International	Niagara Falls Blvd, Niagara Falls, N.Y.	(716) 731-3281	NY D080336241

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	EXPECTED ARRIVAL DATE
				MONTH: 03, DAY: 30, YEAR: 83	MONTH: 03, DAY: 31, YEAR: 83

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN. /NA NO.	WT. /VOL.	UNITS	UNIT CODE	CONTAINER		EPA WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
1. Hazardous Waste Solid WOS	ORM-E	9189	20	yd	4	LO	TR	M001	Oily Debris Resulting from oil spill Cecos product code 53-AE Cecos Work Order # 52062
2.									
3.									
4.									
5.									
6.									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

Material in Non-Hazardous by RCRA, but Massachusetts DEQE deems oily dirt & debris as a hazardous waste

WCE 52162
PC 53-AE

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR SIGNATURE: *[Signature]* DATE: *03/31/83* EMERGENCY PHONE: *723-7740*

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>[Signature]</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH: 03, DAY: 30, YEAR: 83	STATE: MA VEHICLE I.D.: 21781	DATE OF DELIVERY MONTH: 03, DAY: 31, YEAR: 83
PLACARDS REQUIRED <input type="checkbox"/>	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH: , DAY: , YEAR:	STATE: VEHICLE I.D.:	DATE OF DELIVERY MONTH: , DAY: , YEAR:

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

[Signature]
SIGNATURE

MONTH: 03, DAY: 31, YEAR: 83

HANDLING METHOD	
1. <i>DS</i>	
2.	
3.	

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

10556

MANIFEST NUMBER

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE/E.P.A. I.D. NO.
GENERATOR Cabot Stain, Tom Hanning	229 Marginal St. Chelsea, Ma	(617) 723-7740	
PRIMARY TRANSPORTER Peabody Clean Industry	170 Border St. East Boston, Ma	(617) 567-6500	
CONTINUING TRANSPORTER			
H.W.F. Cocos International	Niagara Falls Blvd, Niagara Falls, N.Y.	(716) 731-3281	

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
					03	30	83		03	31	83

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
1. Hazardous Waste Solid NOS	ORM-E	9189	20	yd	1	TR	TR	RC001	Oily Debris Resulting from oil spill Cocos product code 53-AE Cocos Work Order #
2.									
3.									
4.									
5.									
6.									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

Material is Non-Hazardous by RCRA, but Massachusetts DEQE deems oily dirt & debris as a hazardous waste

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	SIGNATURE OF TRANSPORTER	03 30 83	MA		
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY
	SIGNATURE OF TRANSPORTER				

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ DATE _____

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR SIGNATURE _____ DATE _____ GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE _____

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

10001
MANIFEST NUMBER

GENERATOR COMPLETES

NAME GENERATOR Cabot Strin - Tom Manning	MAILING ADDRESS 229 Marginal St. Chelsea, Ma.	PHONE NUMBER (517) 723-7740	STATE, E.P.A. I.D. NO. MA 0001021732
NAME PRIMARY TRANSPORTER Peabody Clean Industry	MAILING ADDRESS 170 Border St. East Boston, Ma.	PHONE NUMBER (517) 367-6500	STATE, E.P.A. I.D. NO. MA 0066500906
CONTINUING TRANSPORTER			
NAME H.W.F. Cecos International	MAILING ADDRESS Niagara Falls Blvd, Niagara Falls, N.Y.	PHONE NUMBER (716) 731-3291	STATE, E.P.A. I.D. NO. NY 0080335241

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
					03	19	83		03	31	83

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
Hazardous Waste Solid #05	ORM-E	9139	2.0	yd	Y		TR	W001	Oily Debris Resulting from oil spill Cecos product code 53-AE Cecos Work Order #

SPECIAL HANDLING INSTRUCTIONS (INCLUDING ANY CONTAINER EXEMPTION) AND EMERGENCY RESPONSE INFORMATION:

Material is Non-Hazardous by RCRA, but Massachusetts DEDE deems dirt & debris as a hazardous waste.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER _____	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 03 30 83	STATE VEHICLE I.D. MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR
PLACARDS REQUIRED -----	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER _____	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE VEHICLE I.D.	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS; INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____

MONTH DAY YEAR

1	4
2	5
3	6

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE A.P.I. I.C.A.B.I.E REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR SIGNATURE _____ DATE _____

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE _____

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER 10001

GENERATOR Cabot Swin - Tom Manning	MAILING ADDRESS 229 Marginal St. Chelsea, Ma.	PHONE NUMBER (617) 723-7740	STATE E.P.A. I.D. NO. MA D001021732
PRIMARY TRANSPORTER Peabody Clean Industry	170 Border St. East Boston, Ma.	(617) 567-6500	MA D066588906
CONTINUING TRANSPORTER			
H.W.F. Cecos International	Niagara Falls Blvd, Niagara Falls, N.Y.	(716) 731-3291	NY D080336241

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE
DATE

GENERATOR COMPLETES

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL	MONTH	DAY	YEAR
					03	30	83		03	31	83

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
Hazardous Waste Solid NOS	ORM-E	9139	2.0	yd	Y	Q	TR	M001	Oily Debris Resulting from oil spill Cecos product code 53-AE Cecos Work Order # 52061

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

Material is Non-Hazardous by RCRA, but Massachusetts DEQE deems dirt & debris as a hazardous waste.

WORK 52061
PC 53-AE

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE-CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>[Signature]</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 03 30 83	STATE VEHICLE I.D. NO. MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR 03 31 83
PLACARDS REQUIRED -----	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE VEHICLE I.D.	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

[Signature]
SIGNATURE

03 31 83
MONTH DAY YEAR

HANDLING METHOD	DS	<input type="checkbox"/>
2	<input type="checkbox"/>	<input type="checkbox"/>
3	<input type="checkbox"/>	<input type="checkbox"/>

48-14-1 (4/81)

See cover sheet for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY 312904 8

Part A:

GENERATOR NAME Cabot Stain, Tom Manning	PHONE 617-723-7740	EPA ID NO. MA0001021782
SITE ADDRESS 229 Marginal St. Chelsea, Ma		
TRANSPORTER NO. 1 Clean Industry Inc	PHONE 617-567-5500	EPA ID NO. MA00066500006
SITE ADDRESS 170 Border St. East Boston, Ma.		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY Cecos Intl Inc	PHONE 716-731-3281	EPA ID NO. NY0080386241
SITE ADDRESS Niagara Falls Blvd. Niagara Falls, N.Y.		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY [] [] [] [] [] []

To Be TYPED by Generator

PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
						NO.	TYPE		
1 Oily Debris solids	ORM-E	N/A	02	20		1	03		N/A
2 For sanitary disposal									
3									
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

Material is Non-Hazardous according to RCRA
Material is from clean-up of a #9 oil spill
Cecos Product Code #53-AE, Cecos Workorder # 52061

0052-0083

GENERATOR'S CERTIFICATION. This is to certify that the herein named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>[Signature]</i> Please type name also	DATE SHIPPED 03/30/83 Mo. Day Yr.	EXPECTED ARRIVAL DATE 03/31/83 Mo. Day Yr.
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>[Signature]</i>	TRANSPORTER NO. 1 PERMIT NUMBER MA021	DATE RECEIVED 03/30/83 Mo. Day Yr.

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR Samuel Cabot Inc.	229 Marginal Street, Chelsea, MA	(617) 723-7740	MA 0001021732
PRIMARY TRANSPORTER Clean Industry Inc.	170 Border Street, Boston, MA	(617) 567-6500	MA 0980669345
CONTINUING TRANSPORTER			
H.W.F. S C A Chemical Services	1135 Balmer Road, Model City, NY	716 754-8231	NY 0049836679

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO OF FORMS ARE 7 THIS FORM NO IS 1 MANIFEST NO OF FIRST FORM MA 0198462 DATE SHIPPED MONTH 6 DAY 27 YEAR 83 EXPECTED ARRIVAL MONTH 6 DAY 28 YEAR 83

U.S. DOT. SHIPPING NAME	DOT. HAZARD CLASS	UN / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
Hazardous Waste Solid NDS	ORM-E	9189	55 GAL.	DRUM	DR	77	DR	0001	Material is solidified and contains approximately the following concentrations: Mineral Spirits 40% Sawdust 20% Talc 10% Titanium 10% Iron Oxide 10% Linseed oil 7% Zinc Oxide 2% Organic Pigments 1%
2									
3									
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION.

WORK ORDER # 81239

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH <u>6</u> DAY <u>27</u> YEAR <u>83</u>	STATE VEHICLE ID <u>MA</u>	COMPANY NO. FOR TRAILER, MARINE OR RAIL <u>98289</u>	DATE OF DELIVERY MONTH <u>6</u> DAY <u>28</u> YEAR <u>83</u>
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH <u> </u> DAY <u> </u> YEAR <u> </u>	STATE VEHICLE ID <u> </u>	COMPANY NO. FOR TRAILER, MARINE OR RAIL <u> </u>	DATE OF DELIVERY MONTH <u> </u> DAY <u> </u> YEAR <u> </u>

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Lynn Puchowski SIGNATURE MONTH 06 DAY 28 YEAR 83

HANDLING METHOD	
1	<u>DS1</u>
2	<u> </u>
3	<u> </u>

F.N.L. LABELMASTER CHICAGO, IL 60626

2 GENERATOR COMPLETED COPY

0052-0085

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY

DATE 6/27/83 GENERATOR SIGNATURE Lynn Puchowski GENERATOR'S EMERGENCY PHONE NO. 617-723-7740

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE/E.P.A. I.D. NO.
GENERATOR Samuel Cabot Inc.	229 Marginal Street, Chelsea, MA	(617) 723-7740	MA 10001021732
PRIMARY TRANSPORTER Clean Industry Inc.	170 Border Street, Boston, MA	(617) 567-6500	MA 10980669345
CONTINUING TRANSPORTER			
H.W.F. S C A Chemical Services	1135 Dalmer Road, Yonkers City, NY	(716) 754-8231	NY 0049836679

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE

IF MORE THAN ONE MANIFEST SHIPPING PAPER IS USED: TOTAL NO OF FORMS ARE THIS FORM NO. MANIFEST NO. OF FIRST FORM DATE SHIPPED: MONTH DAY YEAR EXPECTED ARRIVAL DATE: MONTH DAY YEAR

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. NO.	WT/VOL	UNITS	UNIT CODE	CONTAINER		EPA WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
Hazardous Waste Solid NOS	ORM-E	9139		1b	42	1	D.R.	0001	Material is solidified and contains approximately the following concentrations: Mineral Spirits 40% Sawdust 20% Talc 10% Titanium 10% Iron Oxide 10% Linseed oil 7% Zinc Oxide 2% Organic Pigments 1%

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input checked="" type="checkbox"/> 155 <input type="checkbox"/> 156	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>	STATE <input type="checkbox"/>	COMPANY NO. FOR TRAILER, MARINE OR RAIL <input type="checkbox"/>	DATE OF DELIVERY MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>	STATE <input type="checkbox"/>	COMPANY NO. FOR TRAILER, MARINE OR RAIL <input type="checkbox"/>	DATE OF DELIVERY MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH DAY YEAR

HANDLING METHOD	
1 <input type="checkbox"/>	4 <input type="checkbox"/>
2 <input type="checkbox"/>	3 <input type="checkbox"/>
5 <input type="checkbox"/>	6 <input type="checkbox"/>

FNE LABELMASTER CHICAGO, IL 60625

7 GENERATOR COPY

0052-0086

See cover sheet
for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

HAZARDOUS WASTE MANIFEST

PLEASE TYPE

Part A:

DOCUMENT NO. NY 312963 3

GENERATOR NAME Samuel Cabot Inc.	PHONE 617-723-7740	EPA ID NO. MAD001021732
SITE ADDRESS 223 Marginal Street, Chelsea, MA		
TRANSPORTER NO. 1 Clean Industry Inc.	PHONE 617-567-6500	MAD980669345
SITE ADDRESS 170 Border Street, E. Boston, MA 02128		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY SCA Chemical Services	PHONE 716-754-8231	NYD049826679
SITE ADDRESS 1135 Balmer Road, Model City, N.Y.		

THIS FORM IS NO. 312963 OF A TOTAL OF 3 THE FIRST MANIFEST DOCUMENT NO. IS NY 111111

	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1	Hazardous Waste Solid NOS	ORM-E	9189	02	77	03	155	02		DDDT
2										
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION. This is to certify that the herein named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>Thomas J. Manning</i> Please type name also Thomas J. Manning	DATE SHIPPED 16 27 83 Mo. Day Yr.	EXPECTED ARRIVAL DATE 16 28 83 Mo. Day Yr.
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."	TRANSPORTER NO. 1 PERMIT NUMBER 111111	DATE RECEIVED 16 28 83 Mo. Day Yr.

COPY 3 Generator—Retained by Generator

Year at this Perforation.

To Be TYPED by Generator

Tr: .ster - FILL OUT

Part B: GEN NAME **Samuel Cabot Inc.** GEN EPA ID# **MA10101021732**

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment." <i>Ted Munch</i>		DATE DELIVERED Mo. <u>6</u> Day <u>21</u> Yr. <u>83</u>
TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."	TRANSPORTER NO.2 PERMIT NUMBER [] [] [] [] [] [] [] [] [] []	DATE RECEIVED Mo. <u>6</u> Day <u>27</u> Yr. <u>83</u>

TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."	DATE DELIVERED Mo. [] Day [] Yr. []
--	---

TSD Facility - FILL OUT

TSD NAME SCA Chemical Services	TSD EPA ID # NYD049836679	HANDLING METHOD																		
TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS Net quantity and container No. reversed on manifest. Total drums received is 77 drums.		<table border="1"> <tr><td>1</td><td>D</td><td>8</td><td>1</td><td>2</td><td></td></tr> <tr><td>3</td><td></td><td></td><td></td><td>4</td><td></td></tr> <tr><td>5</td><td></td><td></td><td></td><td>6</td><td></td></tr> </table>	1	D	8	1	2		3				4		5				6	
1	D	8	1	2																
3				4																
5				6																
TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description on the manifest except those discrepancies noted on this form."	SIGNATURE <i>Lynn Pecher</i> <small>Please print or type name also</small>	DATE RECEIVED Mo. <u>10</u> Day <u>28</u> Yr. <u>81</u>																		
In case of emergency or spill immediately call the National Response Center (800) 424-8802 and the N.Y. Department of Transportation (518) 457-7382.		DOCUMENT NO. NY 312963 3																		

COPY 3 Generator-Mailed by TSD Facility

Clean Industry Inc.

DAILY JOB REPORT

DATE 6-27-83

BRANCH <u>1712</u>	JOB NUMBER <u>01675</u>	CUSTOMER NUMBER <u> </u>	JOB TYPE <u> </u>	DATE STARTED MO. DAY YR. <u> </u>	DATE COMPLETED MO. DAY YR. <u> </u>	CUSTOMER P.O. NUMBER <u> </u>
-----------------------	----------------------------	--------------------------------	-------------------------	--	--	-------------------------------------

CUSTOMER CABOT STAIN

BILLING ADDRESS 223 MARGENALL ST.
CHELSEA MASS. 02182

LOCATION REPACKED AND LOADED 135 55 GAL. DRUMS

MATERIAL USED:

Coastal Pak	Soda Ash	Boots	Miscellaneous
Loose Absorb.	Rain Gear	Disposable	<u>SCANS SPRAY PAINT</u>
Quick Wick	Absorb Boom	Suits	
Speedi Dri	Gloves	3M Type	
Other:	Garbage Bags	3M Type	

EQUIPMENT	HOURS/MILES	NUMBER	TOLLS	EQUIPMENT	HOURS/MILES	NUMBER	TOLLS
1 PICK-UP TRUCK	<u>7 1/2, 5</u>						
Box TRAILER	<u>1</u>						
Box TRAILER	<u>1</u>						
	<u>1</u>						

EMPLOYEE NUMBER	NAME	START	FINISH	EMPLOYEE NUMBER	NAME	START	FINISH
	<u>R. REYENGER</u>	<u>8:30</u>	<u>15:30</u>		<u>R. S. REYENGER</u>		
	<u>F. EMMETT</u>	<u>8:30</u>	<u>15:30</u>				
	<u>P. HANIFAN</u>	<u>8:30</u>	<u>15:30</u>				

SUB-CONTRACTOR: MA0198462 & MA0198463 R. S. Reyenger

QUANTITY TYPE MANIFEST # FOREMAN

DISPOSAL:

DATE: 6-27-83 CUSTOMER'S APPROVAL: [Signature]

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA - 0198463

MANIFEST NUMBER

GENERATOR COMPLETES

GENERATOR Samuel Cabot Inc.	MAILING ADDRESS 229 Marginal Street, Chelsea, MA	PHONE NUMBER (617) 723-7740	STATE / E.P.A. I.D. NO. MA 000103172
PRIMARY TRANSPORTER Clean Industry Inc.	170 Broder Street, Boston, MA	(617) 567-6500	MA 0980559315
CONTINUING TRANSPORTER			
H.W.F. B C A Chemical Services	1135 Balmer Road, Model City, NY	(716) 754-8231	NY 0049836579

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO. OF FORMS ARE THIS FORM NO. IS **MA 0198463** DATE SHIPPED: MONTH **06** DAY **27** YEAR **83** EXPECTED ARRIVAL: MONTH **06** DAY **28** YEAR **83**

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
Hazardous Waste Dolid NOS	ORM-E	9189	55	1b	Gp	78	D R	0001	Material is solidified and contains approximately the following concentrations:
									Mineral Spirits 40%
									Sawdust 20%
									Talc 10%
									Titanium 10%
									Iron Oxide 10%
									Linseed Oil 7%
									Zinc Oxide 22%
									Organic Pigments 1%

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>W.A. H. G. III</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH 06 DAY 27 YEAR 83	STATE MA COMPANY NO. FOR TRAILER, MARINE OR RAIL TR10031	DATE OF DELIVERY MONTH 06 DAY 28 YEAR 83
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

FNE LABELMASTER CHICAGO, IL 60626

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.
Lynn Puchowski
SIGNATURE

DATE: MONTH **06** DAY **28** YEAR **83**

HANDLING METHOD	
081	

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

Thomas J. Williams
GENERATOR SIGNATURE

DATE **06/28/83** (117) 723-7740
GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 38453
MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR Samuel Cabot Inc.	229 Marginal Street, Chelsea, MA	(617) 723-7740	MA 0001021722
PRIMARY TRANSPORTER Clean Industry Inc.	170 Broder Street, Boston, MA	(617) 567-6500	MA 0980669345
CONTINUING TRANSPORTER			
H.W.F. B C A Chemical Services	1135 Balmer Road, Model City, NY	(716) 754-8231	NY 10049636679

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO. OF FORMS ARE 1 THIS FORM NO IS 1 MANIFEST NO. OF FIRST FORM 1011903 DATE SHIPPED MONTH 04 DAY 27 YEAR 03 EXPECTED ARRIVAL DATE MONTH 04 DAY 28 YEAR 03

U.S. D.O.T. SHIPPING NAME	DOT HAZARD CLASS	UN. NO.	WT./VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OF WASTE ANALYSIS IF WASTE IS NOS
						NO.	TYPE		
Hazardous Waste Dolid NOS	ORH-E	9189	5	1b	G P	1	DR	0001	Material is solidified and contains approximately the following concentrations: Mineral Spirits 40% Sawdust 20% Talc 10% Titanium 10% Iron Oxide 10% Linseed Oil 7% Zinc Oxide 22% Organic Pigments 1%

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <div style="text-align: center;"> SIGNATURE OF TRANSPORTER</div>	DATE SHIPMENT ACCEPTED MONTH <u>04</u> DAY <u>27</u> YEAR <u>03</u>	STATE <u>MA</u> COMPANY NO. FOR TRAILER <u>TRUCK</u> MARINE ID.	DATE OF DELIVERY MONTH <u>04</u> DAY <u>28</u> YEAR <u>03</u>
	PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <div style="text-align: center;"> SIGNATURE OF TRANSPORTER</div>	DATE SHIPMENT ACCEPTED MONTH <u> </u> DAY <u> </u> YEAR <u> </u>	STATE <u> </u> COMPANY NO. FOR TRAILER <u> </u> MARINE ID.	DATE OF DELIVERY MONTH <u> </u> DAY <u> </u> YEAR <u> </u>

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH DAY YEAR

HANDLING METHOD			
1	2	3	4
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

FINE LABEL MANIFEST CHICAGO, IL 60626

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

HAZARDOUS WASTE MANIFEST

DOCUMENT NO. NY 312962 4

See cover sheet
for instructions

PLEASE TYPE

Part A:

GENERATOR NAME Samuel Cabot Inc.	PHONE 617-723-7740	EPA ID NO. MA0001021732
SITE ADDRESS 223 Marginal Street, Chelsea, MA		
TRANSPORTER NO. 1 Clean Industry Inc.	PHONE 617-567-6500	MA090609348
SITE ADDRESS 170 Border Street, E. Boston, MA 02128		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS SCA Chemical Services		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY 1135 Balmer Road, Model City, N.Y.	PHONE	NY0049836679
SITE ADDRESS		

THIS FORM IS NO. _____ OF A TOTAL OF _____ THE FIRST MANIFEST DOCUMENT NO. IS NY _____

To be TYPED by Generator

	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1	Hazardous Waste Solid NOS	ORM-E	9189	02	55	03	78	LD2		01011
2										
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION. This is to certify that the herein named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>Thomas J. Manning</i> Please type name also Thomas J. MANNING	DATE SHIPPED 06 28 83 Mo. Day Yr.	EXPECTED ARRIVAL DATE 06 28 83 Mo. Day Yr.
TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>Will H. Gatt</i>	TRANSPORTER NO. 1 PERMIT NUMBER TR100311	DATE RECEIVED 06 27 83 Mo. Day Yr.

COPY 3 Generator—Retained by Generator

Tear at this Perforation

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER

GENERATOR Samuel Cabot Inc.	MAILING ADDRESS 229 Marginal Street, Chelsea, MA	PHONE NUMBER (617) 723-7740	STATE/E.P.A. I.D. NO. MA D001021732
PRIMARY TRANSPORTER Clean Industry Inc.	170 Border Street, E. Boston, MA 02128	(617) 567-6500	MA D980669345
CONTINUING TRANSPORTER			
H.W.F. S C A Chemical Services	1135 Balmer Road, Model City, N.Y.	716 754-8231	NY D049836679

GENERATOR COMPLETES

IF MORE THAN ONE MANIFEST SHIPPING PAPER IS USED: TOTAL NO. OF FORMS ARE THIS FORM NO IS MANIFEST NO OF FIRST FORM _____ DATE SHIPPED MONTH _____ DAY _____ YEAR _____ EXPECTED ARRIVAL MONTH _____ DAY _____ YEAR _____ DATE _____

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN / NA NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OF WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
Hazardous Waste Solid NOS	ORM-E	9189	SS	DRUMS	P	77	DR	D001	Material is solidified and contains approximately the following concentrations:
									Mineral Spirits 40%
									Sawdust 20%
									Talc 10%
									Iron Oxide 10%
									Titanium dioxide 10%
									Iron Oxide 7%
									Zinc Oxide 2%
									Organic Pigments 1%

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

WORK ORDER # 81287

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>Teof Mamed</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 6 30 83	STATE VEHICLE I.D. MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL 229	DATE OF DELIVERY MONTH DAY YEAR 7 1 83
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE VEHICLE I.D.	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Janis Puchowski
SIGNATURE

07 01 83
MONTH DAY YEAR

F.N.E. LABELMASTER CHICAGO, IL 60624

HANDLING METHOD
1 **D81**
2
3
4
5
6

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

Michael J. ...
GENERATOR SIGNATURE

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE

DATE **6 30 83**

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

14444

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR Samuel Cabot Inc.	229 Marginal Street, Chelsea, MA	(617) 723-7740	MA D001021732
PRIMARY TRANSPORTER Clean Industry Inc.	170 Border Street, E. Boston, MA 02128	(617) 567-6500	MA D980669345
CONTINUING TRANSPORTER			
H.W.F. S C A Chemical Services	1135 Balmer Road, Model City, N.Y.	716 754-8231	NY D049836679

IF MORE THAN ONE MANIFEST TOTAL NO. OF THIS FORM MANIFEST NO. OF FIRST FORM DATE SHIPPED MONTH DAY YEAR EXPECTED ARRIVAL MONTH DAY YEAR	SHIPPING PAPER(S) USED FORMS ARE
---	----------------------------------

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. NO.	VOL.	UNITS	UN. CODE	CONTAINER		WASTE NO.	DESCRIPTION OF WASTE ANALYSIS IF WASTE IS LIQ.
						NO.	TYPE		
Hazardous Waste Solid NOS	004-E	9189		1b	P		DR	D001	Material is solidified and contains approximately the following concentrations: Mineral Spirits 40% Sawdust 20% Talc 10% Iron Oxide 10% Titanium dioxide 10% Iron Oxide 10% Zinc Oxide 2% Organic Pigments 2%

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

REQUIRED LABEL <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. _____ SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR [] [] []	VEHICLE ID _____	COMPANY NO. FOR TRAILER MARKING OR TAG	DATE OF DELIVERY MONTH DAY YEAR [] [] []
PLACARDS REQUIRED _____	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. _____ SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR [] [] []	VEHICLE ID _____	COMPANY NO. FOR TRAILER MARKING OR TAG	DATE OF DELIVERY MONTH DAY YEAR [] [] []

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS

MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE

MONTH DAY YEAR
[] [] []

HANDLING METHOD	
4	5
2	3

FINE
TABLE MASTER
CHICAGO IL 60621

7 GENERATOR COPY

0052-0095

THIS IS TO CERTIFY THAT THE ABOVE MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

IF YOU HAVE AN EMERGENCY PHONE CALL FROM ABOVE

DATE

See cover sheet
for instructions

STATE OF NEW YORK
DEPARTMENT OF ENVIRONMENTAL CONSERVATION

PLEASE TYPE

HAZARDOUS WASTE MANIFEST

Part A:

DOCUMENT NO. NY 312960 6

GENERATOR NAME Samuel Cabot Inc.	PHONE 617-723-7740	EPA ID NO. MA0101021732
SITE ADDRESS 229 Marginal Street, Chelsea, MA		
TRANSPORTER NO. 1 Clean Industry Inc.	PHONE 617-567-6500	MA0980669345
SITE ADDRESS 170 Border Street, E. Boston, MA 02128		
TRANSPORTER NO. 2	PHONE	
SITE ADDRESS		
TREATMENT, STORAGE OR DISPOSAL (TSD) FACILITY SCA Chemical Services	PHONE 716-754-8231	NY049836679
SITE ADDRESS 1135 Balmer Road, Model City, N.Y.		

THIS FORM IS NO. OF A TOTAL OF THE FIRST MANIFEST DOCUMENT NO. IS NY

1	PROPER US DOT SHIPPING NAME	US DOT HAZARD CLASS	UN/NA NUMBER	FORM	NET QUANTITY	UNITS	CONTAINERS		EPA HAZ CODE	EPA WASTE TYPE
							NO.	TYPE		
1	Hazardous Waste Solid NOS	ORM-E	9189	02	55	03	177	02		01011
2										
3										
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING CONTAINER EXEMPTION (i.e. IDENTIFICATION OF ADDITIONAL WASTES INCLUDED IN SHIPMENT OF A NONHAZARDOUS NATURE WHICH DO NOT HAVE TO BE MANIFESTED)

GENERATOR'S CERTIFICATION. This is to certify that the herein named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA. The wastes described herein were consigned to the transporter named. The TSD Facility can and will accept the shipment of hazardous waste, and has a valid permit to do so. This shipment also conforms with all applicable State regulations. I certify that the foregoing is true and correct.

GENERATOR'S SIGNATURE <i>Thomas J. M... Please type name also Thomas J. M...</i>	DATE SHIPPED 6/30/83 Mo. Day Yr.	EXPECTED ARRIVAL DATE 7/1/83 Mo. Day Yr.
	TRANSPORTER NO. 1 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest." <i>Tom M...</i>	TRANSPORTER NO. 1 PERMIT NUMBER <u> </u>

COPY 3 Generator—Retained by Generator

Tear at this Perforation

To Be TYPED by Generator

Transporter—FILL OUT

TRANSPORTER NO. 1 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."

Joe M...

DATE DELIVERED

Mo. Day Yr. 12 17 83

TRANSPORTER NO. 2 SIGNATURE "To the best of my knowledge the contents of the shipment I have accepted for transport conforms with the description on this manifest."

TRANSPORTER NO.2 PERMIT NUMBER

[- - - - -]

DATE RECEIVED

Mo. Day Yr. 8 31 83

TRANSPORTER NO. 2 SIGNATURE "I certify that I have not tampered with or materially altered the contents of this shipment."

DATE DELIVERED

Mo. Day Yr. [] [] []

Facility—FILL OUT

TSD NAME

SCA Chemical Services

TSD EPA ID #

NY 0049836679

HANDLING METHOD

1	D	8	1	2		
3				4		
5				6		

TREATMENT STORAGE OR DISPOSAL FACILITY INDICATION OF ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT OR LISTING OF REASONS FOR AND DISPOSITION OF REJECTED MATERIALS

TREATMENT STORAGE OR DISPOSAL FACILITY SIGNATURE "Upon visual inspection, I certify that the contents of this shipment conform with the description of the manifest except those discrepancies noted on this form."

SIGNATURE

James P...
Please print or type name also

DATE RECEIVED

Mo. Day Yr. 12 17 83

In case of emergency or spill immediately call the National Response Center 1-800-424-9302 and the N.Y. Department of Transportation (518) 457-7362.

DOCUMENT NO. NY 312960 6

COPY 3 Generator—Mailed by TSD Facility

Clean Industry Inc.

DATE THURSDAY July 7, 1983

DAILY JOB REPORT

BRANCH <u>9212</u>	JOB NUMBER <u>0709</u>	CUSTOMER NUMBER [] [] [] []	JOB TYPE []	DATE STARTED MO. DAY YR. [] [] [] [] [] []	DATE COMPLETED MO. DAY YR. [] [] [] [] [] []	CUSTOMER P.O. NUMBER [] [] [] [] [] []
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CUSTOMER Samuel Cabot Inc.
 BILLING ADDRESS 229 Michoud Street
Chelsea Mass
 LOCATION →

MATERIAL USED:

Coastal Paks _____	Soda Ash _____	Boots _____	Miscellaneous _____
Loose Absorb. _____	Rain Gear _____	Disposable _____	
Quick Wick _____	Absorb Boom _____	Suits _____	
Speedi Dri _____	Gloves _____	3M Type _____	
Other: _____	Garbage Bags _____	3M Type _____	

EQUIPMENT	HOURS/ MILES	NUMBER	TOLLS	EQUIPMENT	HOURS/ MILES	NUMBER	TOLLS
<u>pick up truck</u>	<u>N/A</u>	<u>15116</u>	<u>1.30</u>		/	[] [] [] []	[] [] [] []
	/	[] [] [] []	[] [] [] []		/	[] [] [] []	[] [] [] []
	/	[] [] [] []	[] [] [] []		/	[] [] [] []	[] [] [] []
	/	[] [] [] []	[] [] [] []		/	[] [] [] []	[] [] [] []

EMPLOYEE NUMBER	NAME	START	FINISH	EMPLOYEE NUMBER	NAME	START	FINISH
<u>01110</u>	<u>Steve Reyerger</u>	<u>1500</u>	<u>1600</u>	[] [] [] []		[] [] [] []	[] [] [] []
[] [] [] []		[] [] [] []	[] [] [] []	[] [] [] []		[] [] [] []	[] [] [] []
[] [] [] []		[] [] [] []	[] [] [] []	[] [] [] []		[] [] [] []	[] [] [] []
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[] [] [] []		[] [] [] []	[] [] [] []	[] [] [] []		[] [] [] []	[] [] [] []

SUB-CONTRACTOR: _____
 (MA 0198465)

DISPOSAL: _____
 QUANTITY TYPE MANIFEST # FOREMAN

DATE: July 7, 1983 CUSTOMER'S APPROVAL: _____

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

28112

MANIFEST NUMBER

GENERATOR Samuel Cabot Inc.	MAILING ADDRESS 229 Marginal St., Chelsea, MA	PHONE NUMBER (617) 723-7740	STATE / E.P.A. I.D. NO. MA D001021732
PRIMARY TRANSPORTER Clean Industry, Inc.	170 Border St., East Boston, MA	(617) 567-6500	MA 0980669346
CONTINUING TRANSPORTER			
H.W.F. SCA Recycling Industry	385 Quincy Ave., Braintree, MA	617 849-1800	MA D053452637

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO IS	MANIFEST NO OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
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U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN. / NA NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
1 Sodium Cyanide, solid	Poison B	1689	1	1b	P	1	CA	P030	
2 Potassium Cyanide, solid	Poison B	1680	1	1b	P	1	CA	P030	
3 Potassium Thiocyanide, solid	Poison B	1680	1	1b	P	1	CA	P080	
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

GENERATOR COMPLETES

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

DATE **7/7/83** GENERATOR SIGNATURE *Robert S. Ryerson*
 GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE **617 723-7740**

TRANSPORTER COMPLETES

REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>Robert S. Ryerson</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH 7 DAY 7 YEAR 83	STATE MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL 1516	DATE OF DELIVERY MONTH 7 DAY 7 YEAR 83
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE. <i>Doug Landis</i> SIGNATURE	HANDLING METHOD <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>1</td><td><input checked="" type="checkbox"/></td><td>4</td><td><input type="checkbox"/></td></tr> <tr><td>2</td><td><input type="checkbox"/></td><td>5</td><td><input type="checkbox"/></td></tr> <tr><td>3</td><td><input type="checkbox"/></td><td>6</td><td><input type="checkbox"/></td></tr> </table>	1	<input checked="" type="checkbox"/>	4	<input type="checkbox"/>	2	<input type="checkbox"/>	5	<input type="checkbox"/>	3	<input type="checkbox"/>	6	<input type="checkbox"/>
1	<input checked="" type="checkbox"/>	4	<input type="checkbox"/>										
2	<input type="checkbox"/>	5	<input type="checkbox"/>										
3	<input type="checkbox"/>	6	<input type="checkbox"/>										

MONTH **07** DAY **07** YEAR **83**

F.N.E. LABELMASTER CHICAGO, IL 60621

GENERATOR COMPLETED COPY

0052-0099

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR Samuel Cabot Inc.	229 Marginal St., Chelsea, MA	(617) 723-7740	MA 0001021732
PRIMARY TRANSPORTER Clear Industry, Inc.	170 Border St., East Boston, MA	(617) 567-6500	MA 0980669346
CONTINUING TRANSPORTER			
H.W.F. SCA Recycling Industry	385 Quincy Ave., Braintree, MA	617 849-1200	MA 0053452637

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO IS	MANIFEST NO OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL	MONTH	DAY	YEAR
---	------------------------	-----------------	---------------------------	--------------	-------	-----	------	------------------	-------	-----	------

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UNSP 173A NO.	WT. VOL.	UNITS	UNIT CODE	CONTAINER		EPA WASTE		DESCRIPTION OF WASTE ANALYSIS IF WASTE IS I.C.S.
						NO.	TYPE	NO.	NO.	
1 Sodium Cyanide, solid	Poison B	1689	1	lb	P	1	CA	P	030	
2 Potassium Cyanide, solid	Poison B	1680	1	lb	P	1	CA	P	030	
3 Potassium Thiocyanide, solid	Poison B	1680	1	lb	P		CA	P	080	
4										
5										
6										

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1-800-424-8802

REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH: [] DAY: [] YEAR: []	STATE: []	COMPANY NO. FOR TRAILER, MARINE OR RAIL: []	DATE OF DELIVERY MONTH: [] DAY: [] YEAR: []
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH: [] DAY: [] YEAR: []	STATE: []	COMPANY NO. FOR TRAILER, MARINE OR RAIL: []	DATE OF DELIVERY MONTH: [] DAY: [] YEAR: []

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS

MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE

MONTH: [] DAY: [] YEAR: []

HANDLING METHOD	
1	4
2	5
3	6

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR SIGNATURE _____ DATE _____ GENERATOR'S EMERGENCY PHONE # _____

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

FNE LABELMASTER CHICAGO, IL 60626

Clean Industry Inc.

170 Border Street | East Boston, MA 02128 | Telephone 617-567-6500

July 7, 1983

Mr. Tom Manning
Samuel Cabot Inc.
1 Union Street
Boston, MA 02108

Dear Tom,

As we discussed today, Clean Industry will transport and dispose of 3 cartons of cyanide waste, classified as hazardous waste solids from your Chelsea facility.

The price for disposal is \$25 per carton, plus \$25 for transportation to a licensed hazardous waste disposal facility.

Thank you very much. Should you have any questions please feel free to call me at 567-6500.

Sincerely,
Clean Industry, Inc.



Michael Long
Sales Representation

ML/lmp

0052-0101

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0005900
MANIFEST NUMBER

NAME CABOT INC.	MAILING ADDRESS 229 Marginal St., Chelsea, MA 02150	PHONE NUMBER (617) 884 1249	STATE / ZIP / COUNTRY MA 02150
PRIMA TRANSPORTER			
Price Trucking CONTINUING TRANSPORTER	67 BEACON ST, BUFFALO, NY 14220	(800) 828 1043	NY 14220
H.W.F.			
SCA CHEMICAL SERVICES INC.	Route #1 Box 255, Pinewood, S.C. 29125	803 452 5003	SC D070375985

HAZARDOUS WASTE SOLID NOS	ORNE	9189	4400gal	gal	g	80	dr	D001	mineral spirits 36%	36%
									sawdust	30
									titanium dioxide	8
									linseed oil	8
									talc	8
									iron oxide	8
									zinc oxide	2
									other pigments	1
										100%

these are approximate

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1-800-424-8802

GENERATOR COMPLETES

TRANSPORTER COMPLETES

RECEIVED LABELS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. Signature: <i>Edward [unclear]</i>	DATE SHIPMENT ACCEPTED MONTH: 3 DAY: 23 YEAR: 84	VEHICLE LICENSE ME 677-651	DATE OF DELIVERY MONTH: 03 DAY: 26 YEAR: 84
RECEIVED RECEIPTS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. Signature: <i>Paul [unclear]</i>	DATE SHIPMENT ACCEPTED MONTH: 3 DAY: 25 YEAR: 84	VEHICLE LICENSE ME 677-651	DATE OF DELIVERY MONTH: 03 DAY: 26 YEAR: 84

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

(CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.)
 Signature: *Nepi Bauwisk*
 MONTH: 03 DAY: 26 YEAR: 84

HANDLING METHOD

DEL

THIS IS TO BE USED FOR HAZARDOUS WASTE MANIFESTS THAT ARE PROPERLY CLASSIFIED, DESCRIBED, AND LABELLED AND ARE BEING TRANSPORTED FOR RECYCLING OR REUSE. IT IS NOT TO BE USED FOR HAZARDOUS WASTE MANIFESTS THAT ARE BEING TRANSPORTED TO A TREATMENT, STORAGE, OR DISPOSAL FACILITY.

Signature: *Thomas Manning* 3/23/84
 EMERGENCY PHONE NUMBER: 1-800-424-8802

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 000590
MANIFEST NUMBER

NAME GENERATOR SAMUEL CABOT INC.	MAILING ADDRESS 229 Marginal St., Chelsea, MA. 02150	PHONE NUMBER 617) 884 1249	STATE / E.P.A. ID NO MA D-11-01160
PRIMARY TRANSPORTER Price Trucking		800) 828 1043	001021732
CONTINUING TRANSPORTER			046765574
H.W.F. SCA CHEMICAL SERVICES INC.	Route #1 Box 755, Pinewood, S.C. 29125	803) 452 5003	SC : D070375985

IF MORE THAN ONE MANIFEST IS USED, TOTAL NO. OF THIS FORM: **SC** MANIFEST NO. OF FIRST FORM: **SC**

DATE SHIPPED: MONTH DAY YEAR EXPECTED ARRIVAL: MONTH DAY YEAR

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. NO.	WT / VOL	UNITS	UNIT CODE	CONTAINER		EPA WASTE NO.		DESCRIPTION OF WASTE ANALYSIS IF WASTE ID NOS
						NO.	TYPE	NO.	NO.	
HAZARDOUS WASTE SOLID NOS	ORNI	9189	4400gal	gal	0	80	45	D001		mineral apixite 362
										sawdust 30
										titanium dioxide 8
										linseed oil 8
										talc 8
										iron oxide 8
										zinc oxide 2
										other pigments 1
1002										

These are approximate

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

REQUIRED LABELS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER _____	DATE SHIPMENT ACCEPTED MONTH <input type="text"/> DAY <input type="text"/> YEAR <input type="text"/>	VEHICLE ID <input type="text"/>	STATE <input type="text"/>	COMPANY, ADDRESS AND PHONE NO. <input type="text"/>	DATE OF DELIVERY MONTH <input type="text"/> DAY <input type="text"/> YEAR <input type="text"/>
PLACARDS REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER _____	DATE SHIPMENT ACCEPTED MONTH <input type="text"/> DAY <input type="text"/> YEAR <input type="text"/>	VEHICLE ID <input type="text"/>	STATE <input type="text"/>	COMPANY, ADDRESS AND PHONE NO. <input type="text"/>	DATE OF DELIVERY MONTH <input type="text"/> DAY <input type="text"/> YEAR <input type="text"/>

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____

MONTH DAY YEAR

HANDLING METHOD	
1 <input type="checkbox"/>	4 <input type="checkbox"/>
2 <input type="checkbox"/>	5 <input type="checkbox"/>
3 <input type="checkbox"/>	6 <input type="checkbox"/>

0052-0103

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

THIS IS TO BE FILLED IN BY THE ASSESSOR. MANIFESTS ARE PROPERLY CLASSIFIED, DESCRIBED, AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORT TO THE APPROPRIATE TREATMENT, STORAGE, OR DISPOSAL AGENCY.

WHAT IS EMERGENCY PHONE NUMBER FROM ABOVE

HAZARDOUS WASTE MANIFEST

31340

Manifest Document Number
No 36137

Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator SAMUEL CABOT INC.	MAD001021732	229 Marginal St. Chelsea, Ma. 02150	617- 384 1249	84 / March / 23 <small>year month day</small>
(2) Transporter No. 1 Price Trucking	NYD046765574	67 Beacon St. Buffalo, N. Y. 14220	800- 828 1043	84 March / 23 <small>year month day</small>
Transporter No. 2				1 / 1 / 1 <small>year month day</small>
(3) TSDF SCA CHEMICAL SERVICES	SCD070375985	Route #1 Box 255 Pinewood, S. C. 29125	(803) 452- 5003	84 / 3 / 26 <small>year month day</small>

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	Drum	WASTE Flammable Solid, NOS UN1325	80	4400 gal	D001	80	Drums	28,070

Emergency Response Information:
 In event of an emergency, phone the Generator at:
 (617) 889-1249
 In event of a spill in South Carolina,
 call the Department at (803) 758-5531

D. Special Handling Instructions: Per. Thomas Manning 3/26/84

E. Comments: 1838-4461
Enclosed Van

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Signature THOMAS MANNING, PROJECT MGR Name and Title March 23, 1984 Date

I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above

Transporter No. 1: Edward Foye Signature Edward Foye Name MARCH 23 1984 Date

Transporter No. 2: Paul Belli Signature Paul Belli Name MARCH 25 1984 Date

I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Nore Barwick Signature SCA Services, Records Coordinator Name and Title 3-26-84 Date

HAZARDOUS WASTE MANIFEST

Manifest Document Number
No 36138

A. Name		I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.		MAD001021232	Chelsea 229 Marginal St. 02150	617-884-1249	84 / March / 28
(2) Transporter No. 1 Price Trucking		NYD046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	84 / March / 28
Transporter No. 2					year / month / day
(3) TSDF SCA Chemical Ser., Inc.		SCD070375985	P.O. Box 255 Route #1 Pinewood, S.C. 20125	803-452-5003	84 / 4 / 12

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	Drum	waste flammable solid, NOS UN1325	4400	gal	ID#D001	80	Drums	27,920

C. Emergency Response Information: In event of an emergency, phone the Generator at: (617) 884-1249 In event of a spill in South Carolina, call the Department at (803) 758-5531	D. Special Handling Instructions: 1838-4401	E. Comments: W/O 31592 Enclosed Van
--	--	---

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. DSC and the S.C. DHEC.

Signature: Thomas J. Manning Name and Title: THOMAS J. MANNING PROJECT Mgr. Date: March 28, 1984

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above

Transporter No. 1: Signature: Paul Ghelli Name: Paul Ghelli Date: March 28, 84

Transporter No. 2: Signature: _____ Name: _____ Date: _____

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Signature: Nora Barwick Name and Title: SCA Services, Records Coordinator Date: 4-2-84 ✓

HAZARDOUS WASTE MANIFEST

Manifest Document Number
No 36138

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator SOUTH CAROLINA CARBON TREATMENT	HAH D 001021232	229 HANCOCK ST, CHELSEA, MA 01938	617-204-1244	84 APR 1 1984
(2) Transporter No. 1 PRICE TRUCKING	NYD 046765574	67 BEACON ST, BUFFALO, N.Y. 14220	560-825-1043	84 APR 1 1984
Transporter No. 2				
(3) TSDF SCA CHEMICAL SERVICES INC	SCD 070375985	PO BOX 205 ROUTE 41, PINELAND, S.C. 29125	803-452-5003	

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
	DRUM	WASTE MANIFEST SOLID, NCS UN 1325			1838 ID# D001 4401			

C. Emergency Response Information:
 In event of an emergency, phone the Generator at: (617) 884-1244
 In event of a spill in South Carolina, call the Department at (803) 758-5531

D. Special Handling Instructions:

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Signature: THOMAS J. MANNING, PROJECT MANAGER Date: April 24, 1984

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above

Transporter No. 1: _____
 Signature: _____ Name: _____ Date: _____

Transporter No. 2: _____
 Signature: _____ Name: _____ Date: _____

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Signature: _____ Name and Title: _____ Date: _____

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER
 1111 0000204

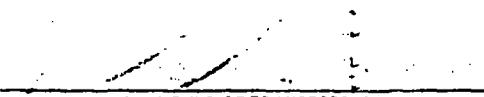
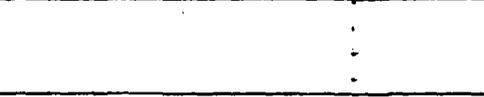
NAME	MAILING ADDRESS	PHONE NUMBER	STATE / EPA I.D. NO.
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, MA 02150	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER Price Trucking	67 Beacon St. Buffalo, N.Y. 14220	(800) 628-1043	NY D046765574
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 20125	803 452-5003	SC D07D375985

IF MORE THAN ONE MANIFEST/ SHIPPING PAPER IS USED	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
					03	28	84				

U.S. DOT. SHIPPING NAME	DOT HAZARD CLASS	UN. NO.	WT./VOL.	UNIT	UNIT CODE	CONTAINER		EPA WASTE		DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.	
						NO.	TYPE	NO.	NO.		
1. Hazardous Waste Solid NOS	OR01	9189	1000	GAL	G	20	4	D001		Mineral Spirits	36%
2.										Saw Dust	10
3.										Linseed Oil	8
4.										Titanium Dioxide	8
5.										Talc	8
6.										Iron Oxide	8
										Zinc Oxide	2
										other pigments	< 1
100%											

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED	STATE	COMPANY NO. FOR TRAILER, MARKING OR V.A.L.	DATE OF DELIVERY
	<input type="checkbox"/> YES <input type="checkbox"/> NO	 SIGNATURE OF TRANSPORTER	MONTH: <input type="text"/> DAY: <input type="text"/> YEAR: <input type="text"/>	STATE: <input type="text"/>	VEHICLE I.D. <input type="text"/>	MONTH: <input type="text"/> DAY: <input type="text"/> YEAR: <input type="text"/>
TRANSPORTER COMPLETES	PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED	STATE	COMPANY NO. FOR TRAILER, MARKING OR V.A.L.	DATE OF DELIVERY
		 SIGNATURE OF TRANSPORTER	MONTH: <input type="text"/> DAY: <input type="text"/> YEAR: <input type="text"/>	STATE: <input type="text"/>	VEHICLE I.D. <input type="text"/>	MONTH: <input type="text"/> DAY: <input type="text"/> YEAR: <input type="text"/>

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____
 MONTH: DAY: YEAR:

HANDLING METHOD					
1	<input type="checkbox"/>	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	<input type="checkbox"/>	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	<input type="checkbox"/>	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION AS REQUIRED BY THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NUMBER: _____ TELEPHONE: _____

GENERATOR COMPLETES

H.W.F. COMPLETES

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

111A 0005204

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / EPA I.D. NO.
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, MA 02150	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER Price Trucking	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046765574
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 20125	803 452-5003	SC D070375985

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
					03	28	84				

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. NO.	VOL.	UNITS	UNIT CODE	CONTAINER		HAZ. WASTE NO.	DESCRIPTION OF WASTE ANALYSIS IF WASTE IS N.O.S.	
						NO.	TYPE			
Hazardous Waste Solid NOS	ORMB	9189	440.0	GAL	0	80	PK	D001	Mineral Spirits	362
									Saw Dust	30
									Linseed Oil	8
									Titanium Dioxide	8
									Talc	8
									Iron Oxide	8
									Zinc Oxide	2
									other pigments	< 1
										1002

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:
 Work order # 31592
 PO # 32910
 IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8902

TRANSPORTER COMPLETES	REQUIRED LABELS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	SIGNATURE OF TRANSPORTER <i>[Signature]</i>	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 03 28 84	STATE VEHICLE NO. ME 677-651	DATE OF DELIVERY MONTH DAY YEAR 04 02 84
	PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE VEHICLE NO.	DATE OF DELIVERY MONTH DAY YEAR

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

[Signature]
 MONTH DAY YEAR
 04 02 84

HANDLING METHOD	
1	<input checked="" type="checkbox"/> D311
2	<input type="checkbox"/>
3	<input type="checkbox"/>

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

THIS IS TO BE FILLED IN BY THE ABOVE NAMED PARTY. IT IS TO BE PROPERLY CLASSIFIED, DESCRIBED, AND LABELLED ACCORDING TO THE PROPER CONDITION FOR TRANSPORTATION. IT IS TO BE FILLED IN BY THE APPLICABLE FEDERAL AGENCY OF THE DEPARTMENT OF TRANSPORTATION OR THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

EMERGENCY PHONE NO. (SEE INSTRUCTIONS ABOVE)

Shirley Manning 508 374

US EPA ARCHIVE DOCUMENT

30 Bull Street, Columbia, SC 29201
 Phone: (803) 758-3681
 Emergency & Holidays: (803) 758-5531

HAZARDOUS WASTE MANIFEST

No 36139

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MAD 001021732	229 Marginal St. Chelsea, Ma 02150	(617)884-1249	84 / April / 6 <small>year month day</small>
(2) Transporter No. 1 Price Trucking	NYD 046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	84 / April / 6 <small>year month day</small>
Transporter No. 2				<small>year month day</small>
(3) TSDF SCA Chemical Ser., Inc.	SCD070375985	P.O. Box 255, Route 1 Pinewood, S.C. 29125	(803)452-5003	<small>year month day</small>

B. (1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	DRUM	Waste Flammable Solid NOS, flammable solid UN 1325	4400	Gal.	D001 ¹⁸³⁸ 4401			

C. Emergency Response Information: In event of an emergency, phone the Generator at: (617) 884-1249 In event of a spill in South Carolina, call the Department at (803) 758-5531	D. Special Handling Instructions:	E. Comments: NO # 31896
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F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas J. Manning Signature Thomas J. Manning, Project Manager Name and Title April 6, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above

Transporter No. 1: Douglas R. Hampton Signature DOUGLAS R HAMPTON Name April 6, 1984 Date

Transporter No. 2: _____ Signature _____ Name _____ Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Signature _____
Name and Title _____
Date

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

IWA 0000011
MANIFEST NUMBER

US EPA ARCHIVE DOCUMENT

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. ID NO.
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER Price Trucking	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046765574
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	(803) 452-5003	SC D070375985

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. NO.	WT / VOL.	UNITS	UNIT CODE	CONTAINER		WASTE NO.	DESCRIPTION OF WASTE ANALYSIS IF WASTE IS H.C.	QUANTITY
						NO.	TYPE			
Waste Flammable Solid H08	Flammable Solid	1325			S		DR	D001	Mineral Spirits	36%
									Sawdust	30
									Linseed Oil	8
									Titanium Dioxide	8
									Talc	8
									Iron Oxide	8
									Zinc Oxide	2
									other pigments	<1
100%										
These figures are approximate										

THIS IS TO LET YOU KNOW THAT ALL THE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION. FOR MORE INFORMATION, CONTACT THE APPLICABLE REGULATORY AGENCIES OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

FOR RATES AND EMERGENCY PHONE NUMBERS, REFER TO THE BACK OF THIS FORM.

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD - 800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH: 04 DAY: 06 YEAR: 84	STATE: MA	VEHICLE ID: 11-2-1001	DATE OF DELIVERY MONTH: 04 DAY: 09 YEAR: 84
PLACARDS REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH: DAY: YEAR:	STATE:	VEHICLE ID:	DATE OF DELIVERY MONTH: DAY: YEAR:

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH: _____ DAY: _____ YEAR: _____

HANDLING METHOD					
1	2	3	4	5	6

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER 0000011

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. ID. NO.
GENERATOR Samuel Cabot, Inc. PRIMARY TRANSPORTER	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
Price Trucking CONTINUING TRANSPORTER	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046765574
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC D070375985

IF MORE THAN ONE MANIFEST, TOTAL NO. OF THIS FORM, MANIFEST NO. OF FIRST FORM, DATE SHIPPED, MONTH, DAY, YEAR, EXPECTED ARRIVAL, MONTH, DAY, YEAR.

SHIPPING PAPER IS USED: FORMS ARE NO. 18 DATE: 04 06 84 DATE: 04 09 84

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	NO.	WT. VOL.	UNITS	UNIT CODE	CONTAINER NO.	TYPE	WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS NOS
Waste Flammable Solid NOS	Flammable Solid	1325	4400	80	C		DR	D001	Mineral Spirits 36Z Sawdust 30 Linseed Oil 8 Titanium Dioxide 8 Talc 8 Iron Oxide 8 Zinc Oxide 2 other pigments <1
									100Z
									These figures are approximate

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 04 06 84	STATE VEHICLE NO. NY S 76049	DATE OF DELIVERY MONTH DAY YEAR 04 09 84
	PLACARDS REQUIRED 9 thousand people school		DATE SHIPMENT ACCEPTED MONTH DAY YEAR [] [] []	STATE VEHICLE NO. [] [] []	DATE OF DELIVERY MONTH DAY YEAR [] [] []

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHPMNT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE

Signature: Nepo Barwick
 MONTH DAY YEAR: 04 09 84

THIS IS TO BE FILLED IN BY THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, AND LABELLED AND ARE BEING SHIPPED IN PROPER CONDITION FOR TRANSPORTATION. CONTACT THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY FOR FURTHER INFORMATION.
 4684
 Signature: Therese Williams
 DATE: 04 09 84

GENERATOR COMPLETES

H.W.F. COMPLETES

HAZARDOUS WASTE MANIFEST

Manifest Document Number
Nº 36140

Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot Inc.	MAD 001021732	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	84 / April / 10 <small>year month day</small>
(2) Transporter No. 1 Price Trucking	NYD 046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	84 / April / 10 <small>year month day</small>
Transporter No. 2				/ / <small>year month day</small>
(3) TSDF SCA Chemical Ser., Inc.	SCD 070375985	P.O. Box 255, Route #1 Pinewood, S.C. 29125	803-452-5003	84 / 4 / 10 <small>year month day</small>

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	DRUM	Waste Flammable solid NOS, Flammable solid UN 1325	4400	Gal	1838 D001 4401	80	Drums	28,030

C. Emergency Response Information: In event of an emergency, phone the Generator at: (617) 884-1249
 In event of a spill in South Carolina, call the Department at (803) 758-5531

D. Special Handling Instructions:

E. Comments: W/ 31996

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. DSC and the S.C. DHEC.

Thomas J. Manning Thomas J. Manning, Project Manager April 10, 1984
Signature Name and Title Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above

Transporter No. 1: Larry Perkins LARRY PERKINS DRIVER 4/10/84
Signature Name Date

Transporter No. 2: _____
Signature Name Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Noel Barwick Lead Services, Records Coordinator 4-10-84
Signature Name and Title Date

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 000010
MANIFEST NUMBER

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE	E.P.A. ID NO.
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA	D001021732
PRIMARY TRANSPORTER Price Trucking	67 Beacon St. Buffalo, N.Y. 14220	(800) 8281043	NY	D046765574
CONTINUING TRANSPORTER				
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC	D070375985

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
				04	10	84		04	12	84	

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. NA. NO.	WT. VOL.	UNITS	UNIT CODE	CONTAINER		EPA WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.D.
						NO.	TYPE		
Waste Flammable Solid NOS	Flammable Solid	1325	477	1	G		DR	D001	Mineral Spirits 36Z Sardust 30 Linseed Oil 8 Titanium Dioxide 8 Talc 8 Iron Oxide 2 Zinc Oxide 2 other pigments 1
									100Z
									These figures are approximate

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD - 800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, RAILROAD	DATE OF DELIVERY MONTH DAY YEAR
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	SIGNATURE OF TRANSPORTER	1 14 84			
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, RAILROAD	DATE OF DELIVERY MONTH DAY YEAR
Flammable Solid	SIGNATURE OF TRANSPORTER				

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH _____ DAY _____ YEAR _____

HANDLING METHOD	
1	4
2	5
3	6

THIS IS TO BE FILLED IN BY THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION TO THE APPLICABLE REGULATORY AGENCY OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NUMBER (SEE ITEM 10) ABOVE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

0006078

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / EPA ID NO.
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER Price Trucking	67 Beacon St. Buffalo, N.Y. 14220	(800) 8281043	NY D046765574
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC D070375985

IF MORE THAN ONE MANIFEST THIS FORM	TOTAL NO. OF THIS FORM	MANIFEST NO. OF THIS FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL	MONTH	DAY	YEAR
SHIPPING PAPER IS USED	FORMS ARE	NO. IS		04	10	84	DATE	04	12	84

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. ID. NO.	VOL.	UNITS	UNIT CODE	CONTAINER		DESCRIPTION OF WASTE ANALYSIS IF WASTE IS H.C.S.
						NO.	TYPE	
Waste Flammable Solid NOS	Flammable Solid	1325	7400 gal			80	DR	D001
								Mineral Spirits 36%
								Sawdust 30
								Linseed Oil 8
								Titanium Dioxide 8
								Talc 8
								Iron Oxide 8
								Zinc Oxide 2
								other pigments < 1
								100Z

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION

W.O. # 31796
877-1800 P.O. 33142

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS	THE I.C. CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED	STATE	VEHICLE ID.	DATE OF DELIVERY
	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<i>Samuel Cabot</i> SIGNATURE OF TRANSPORTER	04 10 84	NY	NY N69540
TRANSPORTER COMPLETES	PLACARDS REQUIRED	THE I.C. CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED	STATE	VEHICLE ID.	DATE OF DELIVERY
	<input checked="" type="checkbox"/> Flammable <input checked="" type="checkbox"/> Solid		SIGNATURE OF TRANSPORTER			

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE

Nora Barwick
SIGNATURE

(CH) 12 84
MONTH DAY YEAR

THIS IS TO BE FILED WITH THE ABOVE NAMED MATERIALS AND PROPERLY CLASSIFIED
 DESCRIBED WASTE(S) AND APPROPRIATE CONTAINER FOR
 TRANSPORT TO THE U.S. ENVIRONMENTAL PROTECTION AGENCY.
 TELEPHONE EMERGENCY CENTER
 (SEE INSTRUCTIONS ON REVERSE SIDE)

4/10/84
Theresa Manning

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

HANDLING METHOD			
1	2	3	4
PE 1			

HAZARDOUS WASTE MANIFEST

Manifest Document Number
Nº 36140

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MAD 001021732	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	84 / April / 10 <small>year month day</small>
(2) Transporter No. 1 Price Trucking	NYD 046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	84 / April / 10 <small>year month day</small>
Transporter No. 2				____ / ____ / ____ <small>year month day</small>
(3) TSDf SCA Chemical Ser., Inc.	SCD 070375985	P.O. Box 255, Route #1 Pinewood, S.C. 29125	803-452-5003	____ / ____ / ____ <small>year month day</small>

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDf Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	DRUM	Waste Flammable solid NOS, Flammable solid UN 1325	4400	Gal	1838 D001 4401			

C. Emergency Response Information:
 In event of an emergency, phone the Generator at:
(617) 884-1249
 In event of a spill in South Carolina,
 call the Department at (803) 758-5531

D. Special Handling Instructions:

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. DEP and the S.C. DHEC.

Thomas J. Manning Thomas J. Manning, Project Manager April 10, 1984
Signature Name and Title Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDf identified above

Transporter No. 1: Larry Perkins LARRY PERKINS DRIVER 4/10/84
Signature Name Date

Transporter No. 2: _____
Signature Name Date

H. I hereby certify that I am an authorized representative of the TSDf identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Signature Name and Title Date

HAZARDOUS WASTE MANIFEST

Manifest Document Number
Nº 36141

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MAD001021732	229 Marginal St. Chelsea	617-884-1249	84 / April / 24 <small>year month day</small>
(2) Transporter No. 1 Price Trucking	NYD046765574	67 Beacon St. Ma 02150	800-828-1043	84 / April / 24 <small>year month day</small>
Transporter No. 2				
(3) TSDF SCA Chemical Services, Inc	SCD070375985	P.O. Box 255 Route #1 Pinewood, S.C. 29125	803-452-5003	84 / 4 / 25 <small>year month day</small>

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	DRUM	Waste Flammable Solid NOS UN 1325	80 DRUM	4400 gal	1838 ID# D001 4401	80	DRUMS	26,950

C. Emergency Response Information: In event of an emergency, phone the Generator at: <u>617-884-1249</u> In event of a spill in South Carolina, call the Department at (803) 758-5531	D. Special Handling Instructions:	E. Comments:
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F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. DSC and the S.C. DHEC.

Thomas J. Manning Thomas J. Manning, Project Manager April 24, 1984
Signature Name and Title Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above

Transporter No. 1: Perry Detti PERRY D CETTI 4/24/84
Signature Name Date

Transporter No. 2: _____
Signature Name Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Nope Barwick SCA Services Records Coordinator 4-25-84
Signature Name and Title Date

US EPA ARCHIVE DOCUMENT

2600 Bull Street, Columbia, SC 29201
 Phone: (803) 758-5681
 Emergency & Holidays: (803) 758-5531

HAZARDOUS WASTE MANIFEST

Manifest Document Number
Nº 36141

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MAD001021732	229 Marginal St. Chelsea	617-884-1249	84 / April / 24 <small>year month day</small>
(2) Transporter No. 1 Price Trucking	NYD046765574	67 Beacon St. Ma 02150	800-828-1043	84 / April / 24 <small>year month day</small>
Transporter No. 2				
(3) TSDF SCA Chemical Services, Inc	SCD070375985	P.O. Box 255 Route #1 Pinewood, S.C. 29125	803-452-5003	

B. (1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	DRUM	Waste Flammable Solid NOS UN 1325	80 DRUM	4400 gal	1838 ID# D001 4401			

C. Emergency Response Information: In event of an emergency, phone the Generator at: <u>(617) 884-1249</u> In event of a spill in South Carolina, call the Department at (803) 758-5531	D. Special Handling Instructions:	E. Comments:
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F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. DSC and the S.C. DHEC.

Thomas J. Manning Thomas J. Manning, Project Manager April 24, 1984
Signature Name and Title Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above

Transporter No. 1: Perry D Cetti PERRY D CETTI 4/24/84
Signature Name Date

Transporter No. 2: _____ _____ _____
Signature Name Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Signature Name and Title Date

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER
00000000

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. ID NO
GENERATOR Sammel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER Price Trucking	67 Mason St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046765574
CONTINUING TRANSPORTER SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	(803) 452-5003	SC D070375985
H.W.F.			

GENERATOR COMPLETES

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO OF FORMS ARE THIS FORM NO IS MANIFEST NO OF FIRST FORM DATE SHIPPED MONTH DAY YEAR EXPECTED ARRIVAL MONTH DAY YEAR

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. NA NO	WT/VOL	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE		DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO	TYPE	NO	NO	
Waste Flammable Solid H03	Flammable Solid	1325			2		PR	D001		Mineral Spirits 36Z Sawdust 30 Linseed Oil 8 Titanium Dioxide 8 Talc 8 Iron Oxide 8 Zinc Oxide 2 other products 1
2										
3										
4										
5										
6										

100Z
These figures are approximate

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD - 800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. _____ SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>	STATE <input type="checkbox"/> COMPANY NO. FOR TRAILER, MARINE OR RAIL <input type="checkbox"/>	DATE OF DELIVERY MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>
PLACARDS REQUIRED Flammable Solid	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. _____ SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>	STATE <input type="checkbox"/> COMPANY NO. FOR TRAILER, MARINE OR RAIL <input type="checkbox"/>	DATE OF DELIVERY MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE

MONTH DAY YEAR

HANDLING METHOD	
1 <input type="checkbox"/>	4 <input type="checkbox"/>
2 <input type="checkbox"/>	5 <input type="checkbox"/>
3 <input type="checkbox"/>	6 <input type="checkbox"/>

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND Labeled AND IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NUMBER (IF DIFFERENT FROM ABOVE)

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA J U U D U I S
MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR Sammel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER Price Trucking	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046765574
CONTINUING TRANSPORTER SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	(803) 452-5003	SC D070375985

THIS IS TO BE FILLED IN BY THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION. SIGNATURE IS THE APPLICABLE FEDERAL AGENCIES OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

DATE: 4/25/84
GENERATOR'S EMERGENCY PHONE NUMBER: 414-181

GENERATOR COMPLETES

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. IN. NO.	WT. VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OF WASTE ANALYSIS IF WASTE IS H.O.S.
						NO.	TYPE		
Waste Flammable Solid NOS	Flammable Solid	1325	77.00	gal	C	80	FR	D001	Mineral Spirits 36% Sawdust 30 Linseed Oil 8 Titanium Dioxide 8 Talc 8 Iron Oxide 8 Zinc Oxide 2 other products <1
2									
3									
4									
5									
6									

These figures are approximate

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION AND EMERGENCY RESPONSE INFORMATION:

410 32437 P/O 33419

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS M	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 04 24 84	STATE ME	VEHICLE ID 677-657	DATE OF DELIVERY MONTH DAY YEAR 04 25 84
PLACARDS REQUIRED Flammable Solid	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR [] [] []	STATE []	VEHICLE ID []	DATE OF DELIVERY MONTH DAY YEAR [] [] []

Price Trucking
SIGNATURE OF TRANSPORTER

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE

Nope Barwick
SIGNATURE

04 25 84
MONTH DAY YEAR

HANDLING METHOD	
DB11	[]
2	[]
3	[]

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA - 0195095

MANIFEST NUMBER

GENERATOR NAME S. Cabot Co.	MAILING ADDRESS 229 MARGINAL ST. CHELSEA	PHONE NUMBER (617) 884-1249	STATE / E.P.A. I.D. NO. MA D001021232
PRIMARY TRANSPORTER Suffolk Services Inc.	98 TAYLOR ST, BOSTON, MA.	(617) 825-9043	MA D049440951
CONTINUING TRANSPORTER			
H.W.F. Suffolk Services	98 TAYLOR ST, BOSTON, MA.	(617) 825-9043	

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO. OF FORMS ARE NO IS THIS FORM MANIFEST NO. OF FIRST FORM DATE SHIPPED: MONTH **04** DAY **24** YEAR **84** EXPECTED ARRIVAL MONTH DAY YEAR DATE

U.S. DOT. SHIPPING NAME	D.O.T. HAZARD CLASS	UN. / N.A. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
WASTE ASBESTOS	ORM-C	NONE	0.0004	YDS	P		BO	NONE	ASBESTOS SCRAP PIPE COVERING

TOTAL SHIPPED 4 Cubic YDS

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>[Signature]</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 04 24 84	STATE MA	COMPANY NO. FOR TRAILER, MARINE OR RAIL AET9-760	DATE OF DELIVERY MONTH DAY
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.
[Signature]
SIGNATURE

FNE LABELMASTER CHICAGO, IL 60626

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.
[Signature]
GENERATOR SIGNATURE
DATE 4/24/84 617 884 1249
GENERATOR'S EMERGENCY PHONE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR		()	
PRIMARY TRANSPORTER		()	
CONTINUING TRANSPORTER		()	
H.W.F.		()	

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO OF FORMS ARE	THIS FORM NO IS	MANIFEST NO OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
---	-----------------------	-----------------	---------------------------	--------------	-------	-----	------	-----------------------	-------	-----	------

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN / N.A NO.	WT. / VOL	UNITS	UNIT CODE	CONTAINER		E.P.A WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
			000000						

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 11 21 91	STATE VEHICLE I.D.	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR
SIGNATURE OF TRANSPORTER					
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE VEHICLE I.D.	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR
SIGNATURE OF TRANSPORTER					

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____

MONTH DAY YEAR

HANDLING METHOD	
1	4
2	5
3	6

FNE LABELMASTER CHICAGO, IL 60626

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR SIGNATURE _____ DATE _____ GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE _____

US EPA ARCHIVE DOCUMENT

P.O. 33450
 W.O.# ~~322876~~
 32438

Manifest Document Number
 No 66869

HAZARDOUS WASTE MANIFEST

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MAD 001021732	229 Marginal St. Chelsea, Ma 02150	617-884-1249	84 / April / 26 <small>year month day</small>
(2) Transporter No. 1 Price Trucking	NYD 046765574	67 Beacon St. Buffalo N.Y. 14220	800-828-1043	84 / April / 26 <small>year month day</small>
Transporter No. 2				/ / <small>year month day</small>
(3) TSDF SCA Chemical Services, Inc	SCD 070375985	P.O. Box 255 Route #1 Pinewood, S.C. 20125	803-452-5003	84 / 4 / 130 <small>year month day</small>

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	Drum	Waste Flammable Solid Nos UN 1325	4400 gal	1100 gal	ID# D001 1838 4401	80	Drums	26690

C. Emergency Response Information: In event of an emergency, phone the Generator at: 617-884-1249
 In event of a spill in South Carolina, call the Department at (803) 758-5531

D. Special Handling Instructions:

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas J. Manning Signature Thomas J. Manning, Project Manager Name and Title April 26, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: Edward Foye Signature Edward Foye Name 4-26-84 Date

Transporter No. 2: _____ Signature _____ Name _____ Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

[Signature] Signature SCA Services Name and Title 4-30-84 Date ✓

WO# 31896

Manifest Document Number

HAZARDOUS WASTE MANIFEST

No 66869

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MAD 001021732	229 Marginal St. Chelsea, Ma 02150	617-884-1249	84 / April / 26 <small>year month day</small>
(2) Transporter No. 1 Price Trucking	NYD 046765574	67 Beacon St. Buffalo N.Y. 14220	800-828-1043	84 / April / 26 <small>year month day</small>
Transporter No. 2				____ / ____ / ____ <small>year month day</small>
(3) TSDF SCA Chemical Services, Inc	SCD 070375985	P.O. Box 255 Route #1 Pinewood, S.C. 29125	803-452-5003	____ / ____ / ____ <small>year month day</small>

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	Drum	Waste Flammable Solid Nos UN 1325	4409 gal	4409 gal	1838 ID# D001 4401			

C. Emergency Response Information: In event of an emergency, phone the Generator at: (617) 884-1249
 In event of a spill in South Carolina, call the Department at (803) 758-5531

D. Special Handling Instructions:

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas J. Manning Signature Thomas J. Manning, Project Manager Name and Title April 26, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: Edward Foye Signature Edward Foye Name 4-26-84 Date

Transporter No. 2: _____ Signature _____ Name _____ Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Signature _____
Name and Title _____
Date

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0006080

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE (E.P.A. I.D. NO.)
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER Price Trucking	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NYD 046765574
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services, Inc.	P.O. Box 255 Route #1 Pinewood S.C.	803 452-5003	SC D070375985

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED	TOTAL NO. OF FORMS ARE	THIS FORM NO IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
									04	27	84

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		EPA WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
Hazardous Waste Solid NOS	ORM-X	9189	4400	gal	G	060	DR	D001	Mineral Spirits 36Z Sawdust 30 Linseed Oil 8 Titanium Dioxide 8 Talc 8 Iron Oxide 8 Zinc Oxide 2 Other Pigments <1
									100Z

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION **approximate**

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. Signature: <i>Edward J. Foye</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH: 4 DAY: 26 YEAR: 84	STATE: ME COMPANY NO. FOR TRAILER, MARINE OR RAIL: 677-660	DATE OF DELIVERY MONTH: 04 DAY: 30 YEAR: 84
PLACARDS REQUIRED Placards placed	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH: DAY: YEAR:	STATE: VEHICLE I.D.: COMPANY NO. FOR TRAILER, MARINE OR RAIL:	DATE OF DELIVERY MONTH: DAY: YEAR:

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE ABOVE MENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE

Signature: *[Signature]*
SIGNATURE

04 30 84
MONTH DAY YEAR

HANDLING METHOD	
1	D81
2	
3	

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.
 GENERATOR SIGNATURE: *Edward J. Foye*
 DATE: 04/27/84
 EMERGENCY PHONE: 617-884-1249

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0006080

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA 0001021732
PRIMARY TRANSPORTER Price Trucking	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NY 046765574
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services, Inc.	P.O. Box 255 Route #1 Pinewood, S.C.	(803) 452-5003	SC 0070375985

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO OF FORMS ARE	THIS FORM NO IS	MANIFEST NO OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
									06	27	84

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN / NA NO.	WT. / VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE		DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE	NO.	NO.	
1. Hazardous Waste Solid pos.	ORM-Z	9189	4400	gal	Y	099	DR	0001		Mineral Spirits 362 Sawdust 30 Linseed Oil 8 Titanium Dioxide 8 Talc 8 Iron Oxide 8 Zinc Oxide 2 Other Pigments 1
2.										
3.										
4.										
5.										
6.										

100Z

These figures are approximate

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY
	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	SIGNATURE OF TRANSPORTER 	MONTH DAY YEAR [] [] []			
H.W.F. COMPLETES	PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED	STATE	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY
		SIGNATURE OF TRANSPORTER	MONTH DAY YEAR			MONTH DAY YEAR

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE

MONTH DAY YEAR
 [] [] []

HANDLING METHOD	
1	4
2	5
3	6

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NO. (IF DIFFERENT FROM ABOVE)

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

W.O. 33224

Solid and Hazardous Waste Management Division
 2600 Bull Street, Columbia, SC 29201
 Phone: (803) 758-5681
 Emergency & Holidays: (803) 758-5531

Manifest Document Number

HAZARDOUS WASTE MANIFEST ^{PO} 34055 No 71609

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MAD001021732	229 Marginal St. Chelsea, Ma 02150	617-884-1249	6/22 / May / day 22
(2) Transporter No. 1 Price Trucking	NDD046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	6/22 / May / day 22
(2) Transporter No. 2				year / month / day
(3) TSDF SCA Chemical Ser. Inc.	SCD070375985	P.O. Box 255 Route #1 Pinewood, S.C. 20125	803-452-5003	5/24 / 5 / 24

B. (1) Generator Item Count		(2) DOT Proper Shipping Name/Hazrd Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code		(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type						Number	Container Type	
80	Drum	waste flammable solid NOS UN1325	4400	gallons	D001	1838 4401	80	Drums	25,570

C. Emergency Response Information:
 In event of an emergency, phone the Generator at:
 (617) 884-1249
 In event of a spill in South Carolina,
 call the Department at (803) 758-5531

D. Special Handling Instructions:

E. Comments:
 Enclosed Varn

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Project Manager
 Signature Name and Title Date May, 1984

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate/delivery to the TSDF identified above.

Transporter No. 1: Paul Shell Paul Shell May 27-84
 Signature Name Date

Transporter No. 2: _____
 Signature Name Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

SCA Services Records Coordinator 5-24-84
 Signature Name and Title Date

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0006081

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 824-1249	MA 0001021792
PRIMARY TRANSPORTER Price Trucking	67 Benson St. Buffalo, N.Y 14220	(800) 828-1043	NY 0046765574
CONTINUING TRANSPORTER		()	
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803) 452-5003	S.C. 0070375 025

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO IS	MANIFEST NO OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
					04	10	84		04	12	84

U.S. D.G.T. SHIPPING NAME	D.G.T. HAZARD CLASS	U.N. / N.A. NO.	WT. / VOL	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO	TYPE		
Waste Flammable Solid HDG	Flammable Solids	1325	440.0	GAL.	6	20	FR	D001	Mineral Spirits 362 Sawdust 30 Linseed Oil 8 Titanium Dioxide 8 Talc 8 Iron Oxide 8 Zinc Oxide 2 Other pigments 1
2									
3									
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS <input type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE VEHICLE ID	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR
	PLACARDS REQUIRED Flammable Solids	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE VEHICLE ID	COMPANY NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

H.W.F. COMPLETES

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH _____ DAY _____ YEAR _____

HANDLING METHOD	
1	4
2	5
3	6

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE

GENERATOR SIGNATURE

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST

Manifest Document Number
No 71609

A. Name (1) Generator Samuel Cabot, Inc.		I.D. Code MAD001021732	Address 229 Marginal St. Chelsea, Ma 02150	Phone Number (area code & number) 617-884-1249	Date Shipped or Accepted 84 / May / 22
(2) Transporter No. 1 Price Trucking		NDD046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	84 / May / 22
Transporter No. 2					year / month / day
(3) TSDF SCA Chemical Ser, Inc		SCD070375985	P.O. Box 255 Route #1 Pinewood, S.C. 20125	803-452-5003	year / month / day

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	Drum	waste flammable solid NOS UN1325	4400	gallons	D001	1838	4401	

C. Emergency Response Information: In event of an emergency, phone the Generator at: (617) 884-1249 In event of a spill in South Carolina, call the Department at (803) 758-5531	D. Special Handling Instructions:	E. Comments:
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F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Thomas Manning Project Manager May, 1984
 Signature Name and Title Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: *Paul Gheili* Paul Gheili May 27, 1984
 Signature Name Date

Transporter No. 2: _____
 Signature Name Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

 Signature Name and Title Date

HAZARDOUS WASTE MANIFEST

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MAD001021732	229 Marginal St. Chelsea, Ma 02150	617-884-1249	84 / June / 6 <small>year month day</small>
(2) Transporter No. 1 Price Trucking Transporter No. 2	NYD046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	84 / June / 6 <small>year month day</small>
(3) TSDF SCA Chemical Serv. Inc.	SCD070375985	Route #1 Box 255 Pinewood, S.C. 29125	803-452-5003	84 / 6 / 8 <small>year month day</small>

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
20	Drum	Waste Flammable solid NOS -UN1325	1100	Gallons	D001 1838 4401	20	Drums	6,978
26	Drum	Waste Flammable Solid NOS-UN1325	1430	Gallons	D001 1838 4102	26	Drums	9,071
34	Drum	Waste Oil Solid NOS NA 1270	1870	Gallons	D001 1838 4101	34	Drums	11,861

C. Emergency Response Information: In event of an emergency, phone the Generator at: 617-884-1249
 In event of a spill in South Carolina, call the Department at (803) 758-5531

D. Special Handling Instructions: per Mr. Manning

E. Comments: Enclosed

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Signature Thomas Manning, Project Manager Name and Title June 6, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: Jonathan Farnell Signature JONATHAN FARNELL Name JUNE 6, 1984 Date

Transporter No. 2: _____ Signature _____ Name _____ Date _____

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Nope Bonwick Signature SCA Services Records Coordinator Name and Title 6-8-84 Date

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MAD001021732	229 Marginal St. Chelsea, Ma 02150	617-884-1249	84 / June / 6 <small>year month day</small>
(2) Transporter No. 1 Price Trucking	NYD046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	84 / June / 6 <small>year month day</small>
Transporter No. 2				____ / ____ / ____ <small>year month day</small>
(3) TSDF SCA Chemical Serv. Inc.	SCD070375985	Route #1 Box 255 Pinewood, S.C. 29125	803-452-5003	____ / ____ / ____ <small>year month day</small>

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
20	Drum	Waste Flammable solid NOS -UN1325	1100	Gallons	D001 1838 4401			
26	Drum	Waste Flammable Solid NOS-UN1325	1430	Gallons	D001 1838 4102			
34	Drum	Waste Oil Solid NOS NA1270	1870	Gallons	MC01 1838 4101			

C. Emergency Response Information: In event of an emergency, phone the Generator at: 617-884-1249
 In event of a spill in South Carolina, call the Department at (803) 758-5531

D. Special Handling Instructions:

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Signature Thomas Manning, Project Manager Name and Title June 6, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: Jonathan Farnell Signature JONATHAN FARNELL Name JUNE 6, 1984 Date

Transporter No. 2: _____ Signature _____ Name _____ Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

 Signature _____
 Name and Title _____
 Date

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator <i>Samuel Cabot Inc</i>	<i>41AD001021732</i>	<i>229 Manning St Charlotte, N.C. 02150</i>	<i>(617) 884-1249</i>	<i>24 / JUNE / 84</i> year month day
(2) Transporter No. 1 <i>Pire Trucking</i>	<i>NYD046765574</i>	<i>67 Conson St Buffalo, N.Y. 14220</i>	<i>(800)-828-1043</i>	<i>24 / JUNE / 84</i> year month day
Transporter No. 2				<i>1 / 1 /</i> year month day
(3) TSDF <i>JPA Chemical Serv. Inc</i>	<i>SCD070375985</i>	<i>Route #1 Box 253 Pinewood, S.C. 29125</i>	<i>(803) 462-5003</i>	<i>1 / 1 /</i> year month day

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
	<i>Drum</i>	<i>Waste Flammable Solid NOS - UN 1325</i>		<i>gallons</i>	<i>D001 1838 4401</i>			
	<i>DRUM</i>	<i>Waste Flammable Solid NOS - UN 1325</i>		<i>gallons</i>	<i>D001 1858 4102</i>			
	<i>DRUM</i>	<i>Waste Oil Solid NOS</i>		<i>gallons</i>	<i>M001 1858 4101</i>			

C. Emergency Response Information: In event of an emergency, phone the Generator at: (617) 884-1249
 In event of a spill in South Carolina, call the Department at (803) 738-5531

D. Special Handling Instructions:

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Signature: _____ Name and Title: THOMAS MANNING PROJECT MANAGER Date: JUNE, 1984

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: _____ Name: _____ Date: _____
 Signature: _____

Transporter No. 2: _____ Name: _____ Date: _____
 Signature: _____

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Signature: _____ Name and Title: _____ Date: _____

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 000010
MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / EPA ID NO.
GENERATOR Sarnal Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA 000021732
PRIMARY TRANSPORTER Price Trucking	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NY 00467765574
CONTINUING TRANSPORTER			
H.W.F. SCS Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	(803) 452-5003	S.C. 0070175885

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS 1 MA	MANIFEST NO. OF FIRST FORM: 0006076	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL	MONTH	DAY	YEAR
					06	06	84		06	08	84

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. NO.	WT / VOL.	UNITS	PKT. CODE	CONTAINER		EPA WASTE NO.	DESCRIPTION OF WASTE ANALYSIS IF WASTE ID NO.S
						NO.	TYPE		
Waste Flammable Solid HOS	Flammable Solid	1325	1100	GAL.	C	20	DR	0001	Mineral Spirits 36% Sawdust 30% Linseed Oil 8% Titanium Dioxide 8% Talc 8% Iron Oxide 2% Zinc Oxide 2% Other pigments 1%
2									
3									
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD - 800-424-8802

TRANSPORTER COMPLETES REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER:	DATE SHIPMENT ACCEPTED MONTH: 06, DAY: 06, YEAR: 84	STATE: NY, COMPANY NO. FOR TRAILER: 709-711, DATE OF DELIVERY: MONTH: , DAY: , YEAR:
FLACARDS REQUIRED Flammable Solid	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER: _____	DATE SHIPMENT ACCEPTED MONTH: , DAY: , YEAR:	STATE: , COMPANY NO. FOR TRAILER: , DATE OF DELIVERY: MONTH: , DAY: , YEAR:

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: _____ MONTH: _____ DAY: _____ YEAR: _____

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKED, LABELED AND PLACED IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

 EMERGENCY PHONE NUMBER: _____

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

HANDLING METHOD	
1	4
2	5
3	6

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

NVA UUU0002
MANIFEST NUMBER

GENERATOR	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. ID NO.
Samuel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER			
Price Trucking	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	N.Y. D046765574
CONTINUING TRANSPORTER			
H.W.F.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC D070375985

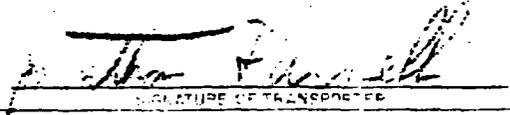
IF MORE THAN ONE MANIFEST / TOTAL NO. OF THIS FORM / DATE SHIPPED / MONTH / DAY / YEAR / EXPECTED ARRIVAL / MONTH / DAY / YEAR

SHIPPING PAPER IS USED / FORM NO. **3** / NO. **2** / MA **0006076** / **6** / **6** / **84**

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	WT / VOL	UNITS	UNIT CODE	CONTAINER		DESCRIPTION OF WASTE ANALYSIS IF WASTE IS BULK
					NO.	TYPE	
Waste Flammable Solid NOS	Flammable Solid 1325	1430	Gal.	0	26	DR	Sawdust 343 Water Gas Cresote Oil 662 <hr/>1002

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-5502

REQUIRED LABELS	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED	STATE	COMPANY / CONTACT NAME	DATE OF DELIVERY
<input checked="" type="checkbox"/> YES	 SIGNATURE OF TRANSPORTER	MONTH: 06 DAY: 06 YEAR: 11	NJ	TVA 77	MONTH: 06 DAY: 06 YEAR: 11
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED	STATE	COMPANY / CONTACT NAME	DATE OF DELIVERY
Flammable solid		MONTH: 06 DAY: 06 YEAR: 11			MONTH: 06 DAY: 06 YEAR: 11

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH _____ DAY _____ YEAR _____

HANDLING METHOD	
4	5
2	6

0052-0136

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, LABELED, AND PLACARDED AND ARE IN PROPER CONDITION FOR TRANSPORTATION AND THAT THE ABOVE INFORMATION IS TRUE TO THE BEST OF THE DEPARTMENT OF TRANSPORTATION'S KNOWLEDGE AND BELIEF. FEDERAL GOVERNMENT AGENCY

EMERGENCY PHONE NUMBER 1-800-424-5502

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0006083
MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR Samuel Cabot, Inc.	229 Marginal St, Chelsea, Ma 02150	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER Price Trucking	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046765574
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC D070375985

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED, TOTAL NO. OF FORMS ARE **3**. THIS FORM NO. **3 MA** MANIFEST NO. OF FIRST FORM **0006076** DATE SHIPPED MONTH **6** DAY **6** YEAR **84** EXPECTED ARRIVAL MONTH **6** DAY **8** YEAR **84**

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. NO.	WT. VOL.	UNITS	UNIT CODE	CONTAINER		DESCRIPTION OF WASTE ANALYSIS IF WASTE IS W.O.S.
						NO.	TYPE	
1 Waste Oily Solids NOS	Waste Oily Solid		1870	Gal.	6	34	DR	M001
2								Sawdust 34%
3								Bodied Linseed or Menhaden Oil 66
4								100%
5								approximate
6								

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD, 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH 06 DAY 06 YEAR 84	STATE NJ	CONTAINER NO. OR TRAILER MARKING OR RAIL T04594	DATE OF DELIVERY MONTH 06 DAY 08 YEAR 84
PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH 06 DAY 06 YEAR 84	VEHICLE ID	DATE OF DELIVERY MONTH 06 DAY 08 YEAR 84	

SIGNATURE OF TRANSPORTER: *Jonathan Farnell*

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: *Hope Barwick* MONTH **06** DAY **08** YEAR **84**

HANDLING METHOD	
P81	

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKED, LABELED AND SHIPPED IN PROPER CONDITION FOR TRANSPORTATION. THIS IS TO BE APPLIED BY THE OFFICIALS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL AGENCY. THE AGENCY HEADQUARTERS IS LOCATED AT 400 ...

EMERGENCY PHONE NO. 1-800-424-8802

6.6.84

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER
 MA 0000003

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E P A I D NO.
GENERATOR Samuel Cabot, Inc.	229 Marginal St., Chelsea, Ma 02150	(617) 884-1249	MA 0001021792
PRIMARY TRANSPORTER Price Trucking	67 Mason St. Buffalo, N.Y. 14220	(800) 828-1043	NY 0046765574
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC 0070375985

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO. OF FORMS ARE **3** THIS FORM NO. **3** OF **3** MANIFEST NO. OF FIRST FORM **0006876** DATE SHIPPED MONTH **6** DAY **6** YEAR **84** EXPECTED ARRIVAL MONTH **6** DAY **8** YEAR **84**

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	NO.	WT./VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS H.C.C.
						NO.	TYPE		
Waste Oily Solids H01	Waste Oily Solid	1270	1870	Gal.	5	38	DR	H001	Sawdust 34% Bedded Linseed or Menhaden Oil 66
									100%
									approximate

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD - 500-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH 06 DAY 06 YEAR 84	STATE NY	COMMUN. NO. FOR THE USE OF THE DRIVER	DATE OF DELIVERY MONTH 06 DAY 08 YEAR 84
	PLACARDS REQUIRED	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH 06 DAY 06 YEAR 84	STATE NY	COMMUN. NO. FOR THE USE OF THE DRIVER	DATE OF DELIVERY MONTH 06 DAY 08 YEAR 84

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH _____ DAY _____ YEAR _____

1	4
2	5
3	6

HANDLING METHOD

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

THIS IS TO BE FILLED IN BY THE TRANSPORTER. THIS FORM IS NOT TO BE REUSED FOR OTHER PURPOSES. THE INFORMATION ON THIS FORM IS TO BE USED FOR THE PURPOSES OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY. GENERATOR'S EMERGENCY PHONE NUMBER (IF DIFFERENT FROM ABOVE)



CUSTOM DISTILLATIONS
FOR INDUSTRY

SHIPPING ORDER

SOLVENTS RECOVERY SERVICE OF NEW ENGLAND, INC.

LAZY LANE • SOUTHINGTON, CONN. 06489 PHONE 203-626-8084

FROM: TO:

Samsel Cabot, Inc.
23 Margenal St
Chelsea, MA

Customer #

DRUMS / Thomas Manning 617-884-1249

DATE 7-1-84	SRS NO. 2228	CUST. NO. 1219	TRACTOR 30716	TRAILER 5611

COMPT.	INCHES	GALLONS	PRODUCT	TOTAL WEIGHTS	PLANT ORDER
1	37"	3930	Flammable liquid #6643-PB	GROSS	# Sp.Gr.
2			UV 1993	TARE	# Sp.Gr.
3				NET	# Sp.Gr.

SPECIAL INSTRUCTIONS

VACUUM TRUCK AT CUSTOMER REQUEST

FLAMMABLE-RED LABEL

TIME - START FINISH

NON-FLAMMABLE

OTHER COMMENTS:

DELAY	TIME IN	TIME OUT	HOURS	FREE	EXCESS	RATE	BILL TO CUSTOMER
LOAD	10:20	11:45					
UNLOAD							

Drums were taken
+ some not returned
Drums #11111 +
some material very thick

REASON FOR DELAY

PUMPING FROM DRUMS

PUMPING INTO DRUMS

OTHER EXPLAIN

Verified By *[Signature]*

Received the above described property in good condition except as noted on this bill of lading. The carrier is not responsible for any loss or damage to the property unless the bill of lading is marked otherwise.

SRS Shipper Or Receiver

SRS Driver *[Signature]*

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0000000
MANIFEST NUMBER

PIN P-6643-FB P.O. #1219

GENERATOR Samuel Cabot, Inc.	MAILING ADDRESS 229 Marginal St. Chelsea, Ma 02150	PHONE NUMBER (617) 884-1249	STATE OR F.A. NO. MA 0001021732
PRIMARY TRANSPORTER Solvents Recovery Service of N.E. Inc	Lazy Lane, Southington, Ct. 06489	203 628-8084	CT 0009717604
CONTINUING TRANSPORTER			
H.W.F. Solvents Recovery Service of N.E. Inc Lazy Lane, Southington, Ct. 06489			
SHIPPING PAPER IS USED		DATE	
FORM ARE L		07 11 84	

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	QTY	UNIT	CONTAINER NO.	TYPE	DESCRIPTION OR ANALYSIS OF WASTE
Waste Flammable Liquid NOS	Flammable Liquid UN1993	3,932	Gal	1	TK	Approximate Petroleum Distillate 63 Water Gas Coal Tar Dist 2 Linseed Oil or Alkyl Resin 15 Inorganic Pigments 17 (TiO2, ZnO, Fe2O3 & silicates) Organic Pigments 2 Penta Chlorophenol 0.5 Paint drier 0.5 Pb, Mn, Ca & Zn
						100.0

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD - 800-424-8802

TRANSPORTER COMPLETES	RECEIVED BY	SIGNATURE OF TRANSPORTER 	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 07 11 84	STATE COMPANY NO. FOR TRAFFIC CONTROL	DATE OF DELIVERY MONTH DAY YEAR 07 11 84
	PLACARDS REQUIRED FLAMMABLE	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	SIGNATURE OF TRANSPORTER	VEHICLE NO. NS TP5835	VEHICLE ID

H.W.F. COMPLETES	INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT	HANDLING METHOD 150
	I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.	SIGNATURE MONTH DAY YEAR 07 11 84

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION AND TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND TO THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE IF DIFFERENT FROM ABOVE
Samuel Cabot
 DATE
7/11/84
 GENERATOR'S SIGNATURE
Thomas Manning

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER 00000000

PH 1-663-FA P.O. 11219

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER Solvents Recovery Service of K.E. Inc	Lazy Lane, Southington, Ct. 06489	(203) 628-8084	CT D009717604
CONTINUING TRANSPORTER			
H.W.F. Solvents Recovery Service of K.E. Inc	Lazy Lane, Southington, Ct. 06489	203 628-8084	CT D009717604

U.S. D.O.T. SHIPPING NAME	DIST HAZARD CLASS	UN. IN A. NO.	NET VOL	UNITS	UNIT CODE	CONTAINER NO.	E.P.A. WASTE TYPE	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS H.C.S.
Waste Flammable Liquid HOS	Flammable Liquid	UN1993	39.32	Gal	6	1	TK D001	Approximate Petroleum Distillate 63 Water Gas Coal Tar Dist 2 Linseed Oil or Alkyl Resin 15 Inorganic Pigments 17 (TiO2, ZNO, Fe2O3 & silicates) Organic Pigments 2 Penta Chlorophenol 0.5 Paint drier 0.5 Pb, Mn, CA & Zr)
2								
3								
4								
5								
6								

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD - 800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>[Signature]</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 05 11 84	STATE COMPANY NO. FOR TRAILER, MARINE OR VESSEL MS TR 235	DATE OF DELIVERY MONTH DAY YEAR
PLACARDS REQUIRED <i>[Signature]</i>	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE COMPANY NO. FOR TRAILER, MARINE OR VESSEL	DATE OF DELIVERY MONTH DAY YEAR

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE

MONTH DAY YEAR

HANDLING METHOD	
1	4
2	5
3	6

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, EACH PACKAGE IS PROPERLY LABELED AND THAT THE PERFORMER OF THIS DEPARTMENT OF TRANSPORTATION IS COMPLIANT WITH THE APPLICABLE PROVISIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

DATE: 05/11/84
NAME: [Signature]
EMERGENCY PHONE: [Blank]

HAZARDOUS WASTE MANIFEST

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc	MAD001021732	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	84 / July / 26
(2) Transporter No. 1 Price Trucking	NYD046765574	67 Beacon St Buffalo, N.Y. 14220	(800) 828-1043	84 / July / 26
Transporter No. 2				
(3) TSDF SCA Chemical Ser. Inc.	SCD070375985	Route #1 Box 255 Pinewood, S.C. 29125	(803) 452-5003	84 / 7 / 30

(1) Generator Item Count		(2) DOT Proper Shipping Name/ Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds) XXXXX gallons	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
44	Drum	Waste Flammable Solid N.O.S. NA 1325	2420		D001 1838 4401	44	Drums	17,039
36	Drum	Waste Oily Solids NOS NA 1270	1980		D001 1838 4101	36	Drums	13,941

C. Emergency Response Information: In event of an emergency, phone the Generator at: <u>(617) 884-1249</u> In event of a spill in South Carolina, call the Department at (803) 738-5531	D. Special Handling Instructions: <u>in v. # 30620</u>	E. Comments: <u>Enclosed Van.</u>
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F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

<u>Thomas Manning</u> <small>Signature</small>	<u>Thomas Manning, Project Manager</u> <small>Name and Title</small>	<u>July 26, 1984</u> <small>Date</small>
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G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: <u>Larry Perkins</u> <small>Signature</small>	<u>LARRY PERKINS DRIVER</u> <small>Name</small>	<u>7/26/84</u> <small>Date</small>
Transporter No. 2: _____ <small>Signature</small>	_____ <small>Name</small>	_____ <small>Date</small>

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

<u>Nahe Pawlick</u> <small>Signature</small>	<u>SCA Services, Records Coordinator</u> <small>Name and Title</small>	<u>7-30-84</u> <small>Date</small>
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HAZARDOUS WASTE MANIFEST

Manifest Document Number

No 71611

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Labot Inc	SCD001021732	229 Marquint St Chickamauga Ga 31215	(617) 584-1249	84 / July / 126 year month day
(2) Transporter No. 1 Paisle Trucking	NYD046765574	67 Beacon St Buffalo N.Y. 14220	(800) 825-1043	84 / July / 126 year month day
Transporter No. 2				____ / ____ / ____ year month day
(3) TSDF SLA Chemical Services Inc	SCD070375985	Route #1, Box 255 Pinewood, S.C. 29125	(812) 452-5003	____ / ____ / ____ year month day

B. (1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds) Gallons	(5) Waste Code	(6) TSD Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
	Drum	Waste Flammable Liquid N.O.S. NA 1325			D001 1838 4401			
	Drum	Waste City Solids N.O.S. NA 1270			D001 1838 4101			

C. Emergency Response Information: In event of an emergency, phone the Generator at: (617) 584-1249
 In event of a spill in South Carolina, call the Department at (803) 758-5531

D. Special Handling Instructions:

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Signature: _____ Name and Title: THOMAS MANNING, PROJECT MANAGER Date: July 26, 1984

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: _____ Signature: _____ Name: _____ Date: _____

Transporter No. 2: _____ Signature: _____ Name: _____ Date: _____

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Signature: _____ Name and Title: _____ Date: _____

HAZARDOUS WASTE MANIFEST

Manifest Document Number
No 71611

Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc	MAD001021732	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	84 / July / 26
(2) Transporter No. 1 Price Trucking	KYU046765574	67 Beacon St Buffalo, N.Y. 14220	(800) 828-1043	84 / July / 26
(2) Transporter No. 2				
(3) TSDF SCA Chemical Ser. Inc.	SCD070375985	Route #1 Box 255 Pinewood, S.C. 29125	(803) 452-5003	

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds) gallons	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
44	Drum	Waste Flammable Solid N.O.S. NA 1325	2420		D001 1838 4401			
36	Drum	Waste Oily Solids NOS NA 1270	1930		D001 1838 4101			

C. Emergency Response Information:
 In event of an emergency, phone the Generator at:
(617) 884-1249
 In event of a spill in South Carolina,
 call the Department at (803) 758-5531.

D. Special Handling Instructions:
NO F30620

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Signature Thomas Manning, Project Manager Name and Title July 26, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: Larry Perkins Signature LARRY PERKINS D.P.E.C. Name 7/26/84 Date

Transporter No. 2: _____ Signature _____ Name _____ Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

 Signature _____
 Name and Title _____
 Date

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0000004
MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / ZIP / CITY
GENERATOR Samuel Cabot, Inc. PRIMARY TRANSPORTER	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
Price Trucking CONTINUING TRANSPORTER	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046765574

H.W.F. SCA Chemical Services, Inc. Route #1 Box 255 Pinewood, S.C. 29125 803 452-5003	SC D070375985
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IF MORE THAN ONE MANIFEST SHIPPING PAPER IS USED	TOTAL NO. OF FORMS ARE 2	THIS FORM NO. 1	MANIFEST NO. OF FIRST FORM MA 0006084	DATE SHIPPED	MONTH 7	DAY 26	YEAR 84	EXPECTED ARRIVAL DATE	MONTH 7	DAY 28	YEAR 84
U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	HAZ. NO.	VT. VOL.	UNITS	UNIT CODE	CONTAINER NO.	TYPE	EFF. WASTE	DESCRIPTION OF WASTE ANALYSIS IF WASTE IS N.O.S.		
Waste Oily Solids NOS	Waste Oily Solids	1270	1980	gal	G	36	DR	D001	Typical Sawdust 34% Bodied Linseed 66% or Menhaden Oil 100%		

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

P.O. # 35218
W.O. # 36020

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>Sony Perkins</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH 07 DAY 26 YEAR 84	STATE NY COMPANY NO. OR TRAILER # N69540	DATE OF DELIVERY MONTH 07 DAY 30
	PLACARDS REQUIRED No	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>	STATE <input type="checkbox"/> COMPANY NO. OR TRAILER # <input type="checkbox"/>	DATE OF DELIVERY MONTH <input type="checkbox"/> DAY <input type="checkbox"/>

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Hope Barwick
SIGNATURE

MONTH **07** DAY **30** YEAR **84**

HANDLING METHOD	
1. D811	
2. <input type="checkbox"/>	5. <input type="checkbox"/>
3. <input type="checkbox"/>	6. <input type="checkbox"/>

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

THIS IS TO CERTIFY THAT THE ABOVE NAMED WATERBORN WASTE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND APPLIED WITH PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

Thomas Manning 72684
OPERATOR SIGNATURE
OPERATOR'S EMERGENCY PHONE NUMBER (SEE INSTRUCTIONS)

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0006084
MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / EPA ID NO.
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER Price Trucking	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046765574
CONTINUING TRANSPORTER			
H.W.F. JCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC D070375985

IF MORE THAN ONE MANIFEST SHIPPING PAPER IS USED	TOTAL NO. OF FORMS ARE 2	THIS FORM NO. IS 1	MANIFEST NO. OF FIRST FORM MA 0006084	DATE SHIPPED MONTH 7 DAY 26 YEAR 84	EXPECTED ARRIVAL MONTH 7 DAY 28 YEAR 84
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U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UNCLAS. NO.	WT./VOL	UNITS	UNIT CODE	CONTAINER		EPA WASTE NO.	DESCRIPTION OF WASTE ANALYSIS IF WASTE IS NOS
						NO.	TYPE		
Waste Oily Solids NOS	Waste Oily Solids	1270	1980	gal	G	36	DR	D001	Typical
									Sawdust 34%
									Boiled Linseed 66%
									or Menhaden Oil
									100%

SPECIAL HANDLING INSTRUCTIONS INCLUDING AN, CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER _____	DATE SHIPMENT ACCEPTED MONTH DAY YEAR <input type="text"/> / <input type="text"/> / <input type="text"/>	STATE <input type="text"/>	COMPANY NO. FOR TRAILER IDENTIFICATION <input type="text"/>	DATE OF DELIVERY MONTH DAY YEAR <input type="text"/> / <input type="text"/> / <input type="text"/>
	PLACARDS REQUIRED <input checked="" type="checkbox"/> No	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER _____	DATE SHIPMENT ACCEPTED MONTH DAY YEAR <input type="text"/> / <input type="text"/> / <input type="text"/>	STATE <input type="text"/>	COMPANY NO. FOR TRAILER IDENTIFICATION <input type="text"/>	DATE OF DELIVERY MONTH DAY YEAR <input type="text"/> / <input type="text"/> / <input type="text"/>

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH ____ DAY ____ YEAR ____

HANDLING METHOD	
1	4
2	5
3	6

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND LABELED AND IN PROPER CONDITION FOR TRANSPORTATION AND THAT THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NUMBER: _____

US EPA ARCHIVE DOCUMENT

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

HAZARDOUS WASTE MANIFEST

Manifest Document Number
№ 71611

Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc	MAD001021732	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	84 / July / 26
(2) Transporter No. 1 Price Trucking Transporter No. 2	NYD046765574	67 Beacon St Buffalo, N.Y. 14220	(800) 828-1043	84 / July / 26
(3) TSDF SCA Chemical Ser. Inc.	SCD070375985	Route #1 Box 255 Pinecroft, S.C. 29125	(803) 452-5003	84 / July / 26

(1) Generator Item Count		(2) DOT Proper Shipping Name / Hazard Class / DOT Identification Number	(3) Total Quantity	(4) Weight (pounds), XXXX gallons	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
44	Drum	Waste Flammable Solid N.O.S. NA 1325	2420		D001 1838 4401	44	Drums	12239
36	Drum	Waste Oily Solids NOS NA 1270	1950		D001 1838 4101	36	Drums	15941

C. Emergency Response Information: In event of an emergency, phone the Generator at: (617) 884-1249
 In event of a spill in South Carolina, call the Department at (803) 734-5531

D. Special Handling Instructions: no. 20020

E. Comments: Emphasize item

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Signature Thomas Manning, Project Manager Name and Title July 26, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: Larry Perkins Signature LARRY PERKINS DRIVER Name 7/26/84 Date

Transporter No. 2: _____ Signature _____ Name _____ Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Orin Kowick Signature SCA Services Records Coordinator Name and Title 7-30-84 Date

HAZARDOUS WASTE MANIFEST

Manifest Document Number

No 71611

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot Inc	SH4 Doc1621732	224 Municipal St Chatham, MA 01750	(617) 584-1249	84 July 126 year month day
(2) Transporter No. 1 Piper Trucking	NYD 046765574	67 Bancroft St Buffalo, N.Y. 14220	(800) 825-1043	84 July 126 year month day
Transporter No. 2				year month day
(3) TSDF SLA Chemical Services Inc	SCD070375985	Route #1 box 233 Pinewood, S.C. 29125	(812) 452-5003	year month day

B. (1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds) (gallons)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
	Drum	Waste Flammable Liquid N.O.S. N/A 1325			D001 1838 4401			
	Drum	Waste City Solids NOS N/A 1270			D001 1838 4101			

C. Emergency Response Information:
 In event of an emergency, phone the Generator at:
617 584-1249
 In event of a spill in South Carolina,
 call the Department at (803) 758-5531

D. Special Handling Instructions:

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Signature: Thomas Manning Name and Title: PROJECT MANAGER Date: July 26, 1984

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: _____ Signature _____ Name _____ Date _____

Transporter No. 2: _____ Signature _____ Name _____ Date _____

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Signature: _____ Name and Title: _____ Date: _____

HAZARDOUS WASTE MANIFEST

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc	MAD001021732	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	84 / July / 26 <small>year month day</small>
(2) Transporter No. 1 Price Trucking	NYD046765574	67 Beacon St Buffalo, N.Y. 14220	(800) 828-1043	84 / July / 26 <small>year month day</small>
(2) Transporter No. 2				
(3) TSDF SCA Chemical Ser. Inc.	SCD070375985	Route #1 Box 255 Pinewood, S.C. 29125	(803) 452-5003	

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds) XXXXX gallons	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
44	Drum	Waste Flammable Solid N.O.S. NA 1325	2420		D001 1838 4401			
36	Drum	Waste Oily Solids NOS NA 1270	1980		D001 1838 4101			

C. Emergency Response Information: In event of an emergency, phone the Generator at: <u>(617) 884-1249</u> In event of a spill in South Carolina, call the Department at (803) 758-5531	D. Special Handling Instructions: <u>NO SPILLAGE</u>	E. Comments:
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F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Signature Thomas Manning, Project Manager Name and Title July 26, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: Larry Perkins Signature LARRY PERKINS DRIVER Name 7/26/84 Date

Transporter No. 2: _____ Signature _____ Name _____ Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Signature _____
Name and Title _____
Date

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER **000000**

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / ZIP / CITY
GENERATOR Samuel Cabot, Inc. <small>PRIMARY TRANSPORTER</small>	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
Price Trucking <small>CONTINUING TRANSPORTER</small>	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046765574

HWF SCA Chemical Services, Inc. <small>IF MORE THAN ONE MANIFEST TOTAL NO OF THIS FORM</small>	Route #1 Box 355 Pinewood, S.C. 29125-603 <small>DATE SHIPPED</small>	452-5003 <small>EXP. ARRIVAL DATE</small>	SC D070375985 <small>DATE</small>
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U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN/NA NO.	WT/VOL	UNITE	CONTAINER NO.	TYPE	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS NOT
Waste Flammable Solids NOS.	Flammable Solids	1325	2420 gal	G	44	DR	D001
2							Approximate Mineral Spirits 36%
3							Sawdust or Speedi dri 30
4							Linseed Oil 8
5							Titanium Dioxide 8
6							Talc 8
							Iron Oxide 8
							Zinc Oxide 2
							other pigments 1

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION. 1007

10 35318

W.O. 30020

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD -- 800-424-8802

TRANSPORTER COMPLETES TRANSPORTER COMPLETES	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. _____ <small>SIGNATURE OF TRANSPORTER</small>	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 07 26 84	STATE VEHICLE NO. FOR TRAFFIC MARKING NY N69540 DATE OF DELIVERY MONTH DAY YEAR 07 30 84
	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. _____ <small>SIGNATURE OF TRANSPORTER</small>	DATE SHIPMENT ACCEPTED MONTH DAY YEAR [] [] []	STATE VEHICLE NO. FOR TRAFFIC MARKING [] [] [] [] [] [] DATE OF DELIVERY MONTH DAY YEAR [] [] []

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE

07 30 84
MONTH DAY YEAR

HANDLING METHOD

D8.11

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

THOMAS MANNING 72684
EMERGENCY PHONE NUMBER

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

171A 0000000
MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E P A I D NC
GENERATOR Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA 0001021732
PRIM/CONTINUING TRANSPORTER PLS Products	67 Benson St. Buffalo, N.Y. 14220	(800) 828-1043	NY 0066765574
H.W.F. SCA Chemical Services, Inc.	Route 1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC 0070375985

IF MORE THAN ONE MANIFEST SHIPPING PAPER IS USED: TOTAL NO. OF THIS FORM MANIFEST NO. OF FIRST FORM DATE SHIPPED MONTH DAY YEAR EXPECTED ARRIVAL MONTH DAY YEAR

SHIPPING PAPER IS USED: FORMS ARE 2 NO. IS 2 **MA 0006084** DATE 7 26 84

U.S. DOT. SHIPPING NAME	DOT. HAZARD CLASS	UN. NO.	WT./VOL.	UNITS	UNIT CODE	CONTAINER		DESCRIPTION OF WASTE ANALYSIS IF WASTE IS N.O.C.
						NO.	TYPE	
Waste Flammable Solids NOS.	Flammable Solids	1325	2.4 gal	gal	6	4.4	DR	Approximate
								Mineral Spirits 363
								Sawdust or Speedi dri 30
								Linseed Oil 8
								Titanium Dioxide 8
								Talc 8
								Iron Oxide 8
								Zinc Oxide 2
								Other pigments 1
								100X

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES H.W.F. COMPLETES	REQUIRED LABEL: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO PLACARDS REQUIRED: <input checked="" type="checkbox"/> Yes	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER: _____	DATE SHIPMENT ACCEPTED: MONTH DAY YEAR STATE: _____ COMPANY OF TRAILER: _____ NAME OF RAIL: _____	DATE OF DELIVERY: MONTH DAY YEAR	
THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER: _____		DATE SHIPMENT ACCEPTED: MONTH DAY YEAR STATE: _____ COMPANY OF TRAILER: _____ NAME OF RAIL: _____			DATE OF DELIVERY: MONTH DAY YEAR

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS

MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE

MONTH DAY YEAR

HANDLING METHOD

1	4
2	5
3	6

0052-0151

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND Labeled AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY

EMERGENCY RESPONSE INFORMATION: 1-800-424-8802

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

CHECKLIST FOR HAZARDOUS MATERIALS SHIPMENTS

SCA CHEMICAL SERVICES (MA) INC.
AN SCA SERVICES COMPANY

385 QUINCY AVE.
BRAINTREE, MA. 02184
(617) 849-1800
1-800-225-1883



DRIVER: John Buttsch

SCA-MA
WORK ORDER
36013

INFORMATION REQUIRED

WORK ORDER NO. <u>SCA 36013</u>	CUSTOMER'S ORDER NO. <u>147-0006066</u>	<input checked="" type="checkbox"/>
GENERATOR NAME AND SIGNATURE <u>Samuel Cabot, Inc</u>		<input type="checkbox"/>
PROPER DOT SHIPPING NAMES <u>yes</u>		<input type="checkbox"/>
HAZARD CLASS (FLAMMABLE LIQUID, CORROSIVE MATERIALS, ORM-E)		<input type="checkbox"/>
NO. & KINDS OF PACKAGING <u>75 Drums</u>		<input type="checkbox"/>
LABEL(S) REQUIRED (DOT AND EPA) <u>1, 2</u>		<input type="checkbox"/>
SPECIAL INSTRUCTIONS - EMERGENCY RESPONSE INFORMATION (SEE EMERGENCY RESPONSE GUIDEBOOK)		<input type="checkbox"/>

- (1) No Flares, smoking or flames in hazard area
- (2) Do Not Touch Spilled Material.
- (3) Use Water Spray To Reduce Vapors
- (4) Stop leak if you can do so without risk

OUTSIDE PACKAGING OR CONTAINER		<input type="checkbox"/>
PROPER PACKAGING <u>yes</u>		<input type="checkbox"/>
GENERATORS NAME, ADDRESS, EPA NO. <u>yes</u>		<input type="checkbox"/>
HAZARDOUS LABELS ON DRUMS <u>yes</u>		<input type="checkbox"/>
DOT SHIPPING NAME ON PACKAGE <u>yes</u>		<input type="checkbox"/>
LABEL(S) SECURELY ON PACKAGE(S) <u>yes</u>		<input type="checkbox"/>
PACKAGE(S) CHECKED FOR DAMAGE <u>yes</u>		<input type="checkbox"/>

HAZARDOUS MATERIALS BILL OF LADING		<input type="checkbox"/>
SHIPPER'S & CONSIGNEE'S NAME, ADDRESS & TELEPHONE, EPA NO		<input type="checkbox"/>
HAZARD CLASS <u>yes</u>		<input type="checkbox"/>
PROPER DOT SHIPPING NAME (WASTE) <u>yes</u>		<input type="checkbox"/>
GENERATORS CERTIFICATION COMPLETE AND SIGNED <u>yes</u>		<input type="checkbox"/>
LABEL(S) REQUIRED (1) TYPES OF LABELS <u>yes</u>		<input type="checkbox"/>
WEIGHTS & QUANTITIES CORRECT (1) <u>yes</u>		<input type="checkbox"/>
SPECIAL INSTRUCTIONS SUPPLIED <u>yes</u>		<input type="checkbox"/>
OTHER INFORMATION SUPPLIED (FLASH POINTS, NOS DESCRIPTIONS) <u>yes</u>		<input type="checkbox"/>

HAZARDOUS MATERIALS MANIFEST COMPLETE AND SIGNED BY GENERATOR <u>yes</u>		<input type="checkbox"/>
PLACARD(S) REQUIRED <u>yes</u>		<input type="checkbox"/>
OK FOR RELEASE TO TRANSPORTER <u>yes</u>		<input type="checkbox"/>

GENERATOR SIGNATURE Thomas Manning DATE 1/1/81

TIME ARRIVED 7:00 AM TIME DEPARTED 9:15 ON SITE HRS.

US EPA ARCHIVE DOCUMENT

US EPA ARCHIVE DOCUMENT

Soils and Hazardous Waste Management Division
 2409 Bull Street, Columbia, SC 29201
 Phone (803) 758-5681
 Emergency & Holidays (803) 758-5531

HAZARDOUS WASTE MANIFEST

ON-SITE INSPECTOR BM Manifest Document Number
 S.C. DEPT. OF HEALTH & ENVIRONMENTAL CONTROL No. **71615**

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MA D001021732	229 Marginal St. Chelsea, Ma 02150	617-884-1249	84 / Aug / 27 <small>year month day</small>
(2) Transporter No. 1 Price Trucking Transporter No. 2	NY D046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	8 / / <small>year month day</small>
(3) TSDF SCA Chemical Ser. Inc.	SC D070375985	Route #1 Box 255 Pinewood, S.C. 29125	803-452-5003	84 / 8 / 29 <small>year month day</small>

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight Gallons	(5) Waste Code		(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type						Number	Container Type	
80	Drum	Waste Flammable Solids N.O.S. 1325	4400	gal	D001	1838 4401	80 Drums	32,000	

C. Emergency Response Information: In event of an emergency, phone the Generator at: (617) 884-1249
 In event of a spill in South Carolina, call the Department at (803) 758-5531

D. Special Handling Instructions:

E. Comments: Enclosed Van

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Signature Thomas Manning, Project Manager Name and Title August 27, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: Tommy Copp Signature Tommy Copp Name 8/27/84 Date

Transporter No. 2: _____ Signature _____ Name _____ Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Nope Bauwick Signature SCA Services, Records Coordinator Name and Title 8-29-84 Date

HAZARDOUS WASTE MANIFEST

Manifest Document Number

No 71615

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MA D001021732	229 Marginal St. Chelsea, Ma 02150	617-884-1249	84 / AUG / 27 <small>year month day</small>
(2) Transporter No. 1 Price Trucking Transporter No. 2	NY D046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	84 / / / <small>year month day</small>
(3) TSDF SCA Chemical Ser. Inc.	SC D070375985	Route #1 Box 255 Pinewood, S.C. 29125	803-452-5003	84 / / / <small>year month day</small>

(1) Generator Item Count		(2) DOT Proper Shipping Name/ Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (Gallons)	(5) Waste Code		(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type						Number	Container Type	
80	Drum	Waste Flammable Solids N.O.S. 1325	4400	gal	D001	1838 4401			

C. Emergency Response Information: In event of an emergency, phone the Generator at: 617-884-1249
 In event of a spill in South Carolina, call the Department at (803) 758-5531.

D. Special Handling Instructions:

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Signature Thomas Manning, Project Manager Name and Title August 27, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: Tommy Copp Signature Tommy Copp Name 8/27/84 Date

Transporter No. 2: _____ Signature _____ Name _____ Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

 Signature Name and Title Date

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

N/A 000000
MANIFEST NUMBER

GENERATOR Samuel Cabot, Inc.	MAILING ADDRESS 229 Marginal St. Chelsea, Ma 02150	PHONE NUMBER (617) 884-1249	STATE / EPA ID NO. MA D001021732
PRIMARY TRANSPORTER Price Trucking	67 Beach St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046765574
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC D070375985

IF MORE THAN ONE MANIFEST IS USED	TOTAL NO. OF FORMS ARE	THIS FORM NO. IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
					8	27	84		8	29	84

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	QTY	VOL	UNITS	UNIT CODE	CONTAINER		EPA WASTE NO.	DESCRIPTION OF WASTE ANALYSIS IF WASTE IS IN C
						NO.	TYPE		
Waste Flammable Solids NOS	Flammable Solid	1325	4400	Gal	6	80	DR	D001	Typical Mineral Spirots 36Z Sawdust or Speedi dri 30 Linseed Oil 8 Titanium Dioxide 8 Talc 8 Iron oxide 8 Zinc oxide 2 other pigments <1 <hr/> 100Z

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES REQUIRED LABEL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED			VEHICLE NO. NY 677-651	DATE OF DELIVERY MONTH DAY YEAR 08 29 84
		MONTH	DAY	YEAR		
PLACARDS REQUIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED			VEHICLE NO.	DATE OF DELIVERY
		MONTH	DAY	YEAR		MONTH DAY YEAR

Tommy Copp
SIGNATURE OF TRANSPORTER

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE FOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

Nore Barwick
[Signature]

08 29 84
MONTH DAY YEAR

HANDLING METHOD	
D&I	
2	3
1	

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKED, LABELED AND IN PROPER CONDITION FOR TRANSPORTATION. COMPLIANCE WITH THE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

Samuel Cabot, Inc.
GENERATOR SIGNATURE
02789

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

GENERAL EMERGENCY PHONE NO. LISTED FROM ABOVE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA UUUUUUJ
MANIFEST NUMBER

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.D. NO.
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02130	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER Price Trucking	67 Beach St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046765574
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	(803) 452-5003	SC D070375985

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED:	TOTAL NO. OF FORMS ARE	THIS FORM NO IS	MANIFEST NO. OF FIRST FORM	DATE SHIPPED	MONTH	DAY	YEAR	EXPECTED ARRIVAL DATE	MONTH	DAY	YEAR
					8	27	84		8	29	84

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN. ID. NO.	WT. / VOL	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.C.
						NO.	TYPE		
Waste Flammable Solids NOS	Flammable Solid	1325	47.5	Gal	6	20	DR	D001	Typical
									Mineral Spiroto 362
									Sawdust or Speedi Ari 30
									Linseed Oil 8
									Titanium Dioxide 8
									Talc 8
									Iron oxide 8
									Zinc oxide 2
									other pigments 1
									100%

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	STATE	COMPANY NO. FOR TRAILER MAKE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
PLACARDS REQUIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.	DATE SHIPMENT ACCEPTED MONTH DAY YEAR <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	STATE	COMPANY NO. FOR TRAILER MAKE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH _____ DAY _____ YEAR _____

HANDLING METHOD	
1	4
2	5
3	6

0052-0156

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION AND COMPLY WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

Thomas Manning
REGULATORY EMERGENCY PHONE
IS LOCATED FROM ABOVE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER: 00000000

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / EPA ID NO
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02151	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER SCA Chemical Services, Inc.	385 Quincy Ave. Braintree, Ma 02184	(617) 849-1800	MA D033452637
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services, Inc.	385 Quincy Ave. Braintree, Ma 02184	(617) 849-1800	MA D033452637

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO. OF FORMS ARE 1 THIS FORM NO. IS 1 MANIFEST NO. OF FIRST FORM: DATE SHIPPED: MONTH 1 DAY 1 YEAR 74 EXPECTED ARRIVAL: MONTH 1 DAY 1 YEAR 74

U.S. DOT. SHIPPING NAME	DOT. HAZARD CLASS	U.N. / NA NO.	WT / VOL	UNITS	UNIT CODE	CONTAINER		WASTE NO.	DESCRIPTION OF WASTE ANALYSIS IF WASTE IS M.O.S.
						NO.	TYPE		
Waste Latex Emulsion	Toxic/Infectious		7.125 Gal.	Gal.	2	15	DR		Approximate Waste 96% Acrylic Latex 1.0 Titanium Dioxide 0.5 Silica 0.5 Iron Oxide 0.5 organic additives 1.0 Other pigments trace mercury trace
2									
3									
4									
5									
6									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD - 800-424-6202

TRANSPORTER COMPLETES

REQUIRED LABELS: YES NO

PLACARDS REQUIRED:

THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.

THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.

DATE SHIPMENT ACCEPTED: MONTH 1 DAY 1 YEAR 74

SIGNATURE OF TRANSPORTER: [Signature]

DATE SHIPMENT DEPARTED: MONTH 1 DAY 1 YEAR 74

SIGNATURE OF TRANSPORTER: [Signature]

STATE: MA COMPANY: SCA DATE OF DELIVERY: MONTH 1 DAY 1 YEAR 74

VEHICLE NO. 5884

STATE: MA COMPANY: SCA DATE OF DELIVERY: MONTH 1 DAY 1 YEAR 74

VEHICLE NO. 5884

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: _____ MONTH: _____ DAY: _____ YEAR: _____

HANDLING METHOD

1	4
2	5
3	6

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION AND THAT THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

EMERGENCY PHONE NUMBER: _____

HAZARDOUS WASTE MANIFEST

Manifest Document Number
 ON-SITE INSPECTOR
 S.C. DEPT. OF HEALTH
 & ENVIRONMENTAL CONTROL
 No. 71614

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MAP 001021732	Chelsea, Ma 229 Marginal St. 02150	617-884-1249	84 / August / 21
(2) Transporter No. 1 Price Trucking	NYD 046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	84 / August / 21
Transporter No. 2				
(3) TSDF SCA Chemical Services, Inc.	SCD 070375995	Route #1 box 255 Pinewood, S.C. 29125	803-452-5063	84 / 8 / 23

(1) Generator Item Count		(2) DOT Proper Shipping Name/ Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	Drum	Waste Flammable Solid NQS, 1325	4400	gal.	D001 4401	80	Drums	27,920

C. Emergency Response Information:
 In event of an emergency, phone the Generator at:
 (617) 884-1249
 In event of a spill in South Carolina,
 call the Department at (803) 756-5531

D. Special Handling Instructions:

E. Comments:
 Enclosed Van

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.
 Thomas Manning Project Manager
 Aug. 21, 1984

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.
 Transporter No. 1: Paul Shell
 Transporter No. 2: Paul Shell
 Date: 8-21-84

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.
 Nape Barwick
 SCA Services, Records Coordinator
 Date: 8-23-84

HAZARDOUS WASTE MANIFEST

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator SAMUEL LABOT INC	MA D 001 021 732	224 MARGINAL ST CHELSEA, MA. 02150	(617) 884-1249	84 / AUGUST / 20 year month day
(2) Transporter No. 1 PRICE TRUCKING	NY D 046 765 574	67 BEACON ST. BUFFALO, N.Y. 14240	(800) 828-1043	84 / AUGUST / 20 year month day
Transporter No. 2				/ / year month day
(3) TSDF SC17 CHEMICAL SERVICES INC	SC D 070375 985	Route #1 Box 253 Pine Wood, S.C. 29125	(803) 452-5003	/ / year month day

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight (pounds) GALLONS	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
	DRUM	WASTE FLAMMABLE SOLID N.O.S. 1325			D001 1838 4401			

C. Emergency Response Information: In event of an emergency, phone the Generator at: <u>(617) 884-1249</u> In event of a spill in South Carolina, call the Department at (803) 758-5531.	D. Special Handling Instructions:	E. Comments:
--	--	---------------------

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Signature: _____ Name and Title: Thomas MANNING PROJECT MANAGER Date: _____

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: _____ Signature: _____ Name: _____ Date: _____

Transporter No. 2: _____ Signature: _____ Name: _____ Date: _____

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Signature: _____ Name and Title: _____ Date: _____

HAZARDOUS WASTE MANIFEST

Manifest Document Number:
No 71614

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MAD 001021732	Chelsea, Ma 229 Marginal St. 02150	617-884-1249	84 / August / 21
(2) Transporter No. 1 Price Trucking Transporter No. 2	NYD 046765574	67 Beacon St. Buffalo, K.Y. 14220	800-828-1043	84 / August / 21
(3) TSDF SCA Chemical Services, Inc.	SCD 070375925	Route #1 Box 255 Pinewood, S.C. 29125	803-556-3000	

(1) Generator Item Count		(2) DOT Proper Shipping Name Hazard Class, DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	Drum	Waste Flammable Solid NOS, 1325	4400	gal.	D001 4401			

C. Emergency Response Information: In event of an emergency, phone the Generator at: 617-884-1249
 In event of a spill in South Carolina, call the Department at (803) 738-5531

D. Special Handling Instructions:

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC

Thomas Manning Signature Thomas Manning Project Manager Aug 21, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: Paul Shell Signature Paul Shell Name 8-21-84 Date

Transporter No. 2: _____ Signature _____ Name _____ Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

 Signature _____
 Name _____
 Date

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

SCA # 36220

MANIFEST NUMBER 0000001

NAME	MAILING ADDRESS	PHONE NUMBER	STATE	F.P.A. ID NO.
GENERATOR Samuel Cabot, Inc. PRIMARY TRANSPORTER	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA	D001021732
Price Trucking CONTINUING TRANSPORTER	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NY	D046765574
H.W.F. SCA Chemical Services Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC	D070375985

IF MORE THAN ONE MANIFEST TOTAL NO. OF THIS FORM NO. OF FIRST FORM DATE SHIPPED MONTH DAY YEAR EXPECTED ARRIVAL MONTH DAY YEAR
 SHIPPING PAPER IS USED FORMS ARE NO. IS DATE 8 21 84 8 23 84

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	UN. PKG. NO.	WT./VOL.	UNITS	UNIT CODE	CONTAINER NO. TYPE	DESCRIPTION OF WASTE ANALYSIS IF WASTE IS IN DS
Waste Flammable Solid HQS	Flammable solids	1325	4400	gal.	G	80 DR D001	Approximate Mineral Spirits 36Z Sawdust or speedi dri 30 Linseed Oil 8 Titanium Dioxide 8 Talc 8 Iron Oxide 8 Zinc oxide 2 other pigments 1

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION: 100Z

work # 36572

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8902

TRANSPORTER COMPLETES	REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. <i>P. Ghill</i> SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR 04 21 84	STATE COMPANY NO. (DOT) OR (F.P.A.) VEHICLE NO. NY 575004	DATE OF DELIVERY MONTH DAY YEAR 06 23 84
	PLACARDS REQUIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE COMPANY NO. (DOT) OR (F.P.A.) VEHICLE NO.	DATE OF DELIVERY MONTH DAY YEAR

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS

MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE

Nope Barwick
SIGNATURE

08 23 84
MONTH DAY YEAR

HANDLING METHOD	
1	D81
2	5
3	6

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE(S) ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND IN PROPER CONDITION FOR TRANSPORTATION TO THE APPLICABLE FEDERAL AGENCIES OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

DATE: 8/21/84
THOMAS PRICE TRUCKING
EMERGENCY PHONE: 800-828-1043

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / EPA I.D. NO.
GENERATOR Sannel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
PRIMARY TRANSPORTER Price Trucking	67 Hanson St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046755574
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC D070375985

IF MORE THAN ONE MANIFEST TOTAL NO. OF THIS FORM MANIFEST NO. OF FIRST FORM DATE SHIPPED MONTH DAY YEAR EXPECTED ARRIVAL MONTH DAY YEAR
 SHIPPING PAPER IS USED FORMS ARE NO. IS DATE 8 21 84 8 23 84

U.S. D.O.T. SHIPPING NAME	D.O.T. HAZARD CLASS	UN. ID. NO.	WT./VOL.	UNITS	UNIT CODE	CONTAINER		EPA WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
						NO.	TYPE		
Waste Flammable Solid NOS	Flammable solids	1325	gal.	6		Dr	D001	Approximate	
								Mineral Spirits	362
								Sawdust or speedi dri	30
								Linseed Oil	8
								Titanium Dioxide	8
								Talc	8
								Iron Oxide	8
								Zinc oxide	2
								Other pigments	1

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION: **1002**

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPASS NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR
	PLACARDS REQUIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER	DATE SHIPMENT ACCEPTED MONTH DAY YEAR	STATE	COMPASS NO. FOR TRAILER, MARINE OR RAIL	DATE OF DELIVERY MONTH DAY YEAR

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH DAY YEAR

HANDLING METHOD	
1	4
2	5
3	6

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

HAZARDOUS WASTE MANIFEST

Manifest Document Number:
 MS 71612

(1) Generator Name	ID Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MA D001021732	229 Marginal St. Chelsea, Ma 02156	617-864-1249	84 / Sept. 10
(2) Transporter No. 1 Price Trucking	NY D046765574	67 Beacon St. Buffalo, N.Y. 14226	800 828 1043	84 / Sept. 10
(2) Transporter No. 2				
(3) TSDI SCA Chemical Services Inc.	SC D070375985	Route #1 Box 255 Pinebluff, S.C. 29125	803-52-5000	84 / 9 / 12

(1) Generator Item Count		(2) DOT Proper Shipping Name Hazard Class DOT Identification Number	(3) Total Quantity	(4) Weight X POUNDS gallons	(5) Waste Code	(6) TSDI Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
50	Drum	waste flammable solids NOS 1325	4000	100	4001 D001 1838	80	Drum	29560

C. Emergency Response Information: In event of an emergency, phone the Generator at 617-864-1249. In event of a spill in South Carolina, call the Department at (803) 758-5531.

D. Special Handling Instructions:

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning, Project Manager Sept. 10, 1984

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDI identified above.

Transporter No. 1: Paul Gelli 9/10/84

Transporter No. 2:

H. I hereby certify that I am an authorized representative of the TSDI identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

J. Rick Meadett, Trans. Coord. 9/12/84

HAZARDOUS WASTE MANIFEST

Manifest Document Number
 No 71612

WV 207
 PV 3655

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MA D001021732	229 Marginal St. Chelsea, Ma 02150	617-884-1249	84 / Sept. / 10 year month day
(2) Transporter No. 1 Price Trucking Transporter No. 2	NY D046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	84 / Sept. / 10 year month day
(3) TSDF SCA Chemical Services Inc.	SC D070375985	Route #1 Box 255 Pinewood, S.C. 29125	803-452-5003	year / month / day

(1) Generator Item Count		(2) DOT Proper Shipping Name/Hazard Class/ DOT Identification Number	(3) Total Quantity	(4) Weight XXXXXX gallons	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	Drum	waste flammable solids NOS 1325	4400	gal	4401 D001 1838			

C. Emergency Response Information:
 In event of an emergency, phone the Generator at:
617-884-1249
 In event of a spill in South Carolina,
 call the Department at (803) 758-5531

D. Special Handling Instructions:

E. Comments:

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Signature Thomas Manning, Project Manager Name and Title Sept. 10, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: Paul Ghelli Signature Paul Ghelli Name 9 10 84 Date

Transporter No. 2: _____ Signature _____ Name _____ Date _____

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

 Signature Name and Title Date

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 0000000

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. ID NO.
GENERATOR Samuel Cabot, Inc. PRIMARY TRANSPORTER	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
Price Trucking CONTINUING TRANSPORTER	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	N.Y. D046765574
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC D070375985

IF MORE THAN ONE MANIFEST / TOTAL NO. OF THIS FORM MANIFEST NO. OF FIRST FORM DATE SHIPPED MONTH DAY YEAR EXPECTED ARRIVAL MONTH DAY YEAR
 SHIPPING PAPER IS USED: FORMS ARE NO. IS DATE 9 10 84 DATE 9 12 84

U.S. D.C.T. SHIPPING NAME	DOT HAZARD CLASS	UN / INA NO.	WT / VOL	UNITS	UNIT CODE	CONTAINER NO.	TYPE	E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
Waste flammable solids NOS	Flammable Solids	1325	4400	gal.	C	80	DR	D001	Typical Mineral Spirits 36% Sawdust or SpeediDri 30 Linseed Oil 8 Titanium Dioxide 8 Talc 8 Iron Oxide 8 Zinc oxide 2 other pigments 1
2.									
3.									
4.									
5.									
6.									

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION: 100%
 P.W. W.O. # 36920 P.W. # 364555

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

GENERATOR COMPLETES
 TRANSPORTER COMPLETES
 H.W.F. COMPLETES

REQUIRED LABELS: YES NO
 PLACARDS REQUIRED: Yes
 THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F.
 SIGNATURE OF TRANSPORTER: *[Signature]*

DATE SHIPMENT ACCEPTED: MONTH 09 DAY 10 YEAR 84

STATE: NY VEHICLE ID: ST5004
 DATE OF DELIVERY: MONTH 09 DAY 12 YEAR 84

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT.
 I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.
 SIGNATURE: *[Signature]* DATE: MONTH 09 DAY 12 YEAR 84

HANDLING METHOD

1	0.81
2	
3	
4	
5	
6	

THIS IS TO CERTIFY THAT THE ABOVE NAMED WASTE(S) ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

The name of Manufacturer 9/10/84

EMERGENCY PHONE

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

HA 0000030
MANIFEST NUMBER

GENERATOR COMPLETES

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / E.P.A. I.C. NO.
GENERATOR Samuel Cabot, Inc.	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D081021712
PRIMARY TRANSPORTER Price Trucking	67 Beacon St. Buffalo, N.Y. 14229	(800) 828-1043	N.Y. D046763574
CONTINUING TRANSPORTER			
H.W.F. SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC D070375985

IF MORE THAN ONE MANIFEST / SHIPPING PAPER IS USED: TOTAL NO. OF FORMS ARE THIS FORM NO. IS MANIFEST NO. OF FIRST FORM DATE SHIPPED MONTH DAY YEAR EXPECTED ARRIVAL MONTH DAY YEAR

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	U.N. NO.	WT./VOL.	UNITS	UNIT CODE	CONTAINER		E.P.A. WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE I.C. N.O.S.
						NO.	TYPE		
Waste flammable solids NOS	Flammable Solids	1325	4700	Gal.	2	90	DR	D001	Typical Mineral Spirits 362 Sawdust or Speedidri 30 Linseed Oil 8 Titanium Dioxide 8 Talc 8 Iron Oxide 8 Zinc oxide 2 Other pigments 1

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION AND EMERGENCY RESPONSE INFORMATION: **1002**

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES

REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER _____	DATE SHIPMENT ACCEPTED MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>	STATE <input type="checkbox"/>	COMPL. NO. FOR TRAILER, MOTOR OR RAIL <input type="checkbox"/>	DATE OF DELIVERY MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>
PLACARDS REQUIRED Yes	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER _____	DATE SHIPMENT ACCEPTED MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>	STATE <input type="checkbox"/>	COMPL. NO. FOR TRAILER, MOTOR OR RAIL <input type="checkbox"/>	DATE OF DELIVERY MONTH <input type="checkbox"/> DAY <input type="checkbox"/> YEAR <input type="checkbox"/>

H.W.F. COMPLETES

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH DAY YEAR

1	<input type="checkbox"/>	4	<input type="checkbox"/>
2	<input type="checkbox"/>	5	<input type="checkbox"/>
3	<input type="checkbox"/>	6	<input type="checkbox"/>

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND Labeled AND ARE IN PROPER CONDITION FOR TRANSPORTATION IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

GENERATOR'S EMERGENCY PHONE NO. (SEE PART I) FOR R.A.C.E.

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST

ON-SITE INSPECTOR
 S.C. DEPT. OF HEALTH
 & ENVIRONMENTAL CONTROL

Manifest Document Number
 No 71613

A Name	I.D Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MA D001021732	229 Marginal St. Chelsea, Ma 02156	(617) 884-1249	84 / Sept / 17 <small>year month day</small>
(2) Transporter No. 1 Price Trucking	NY D046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	84 / Sept / 17 <small>year month day</small>
Transporter No. 2				____ / ____ / ____ <small>year month day</small>
(3) TSDF SC Chemical Services, Inc.	SC D070375985	Route #1 Box 255 Pinewood, S.C. 29125	803-552-5003	84 / 9 / 19 <small>year month day</small>

(1) Generator Item Count:		(2) DOT Proper Shipping Name Hazard Class: DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDF Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	Drum	Waste Flammable Solids NOS UN1325	4400	gallons	D001 1838 4401	80	Enclosed Van	28760

C. Emergency Response Information:
 In event of an emergency, phone the Generator at:
 (617) 884-1249
 In event of a spill in South Carolina,
 call the Department at (803) 738-5531

D. Special Handling Instructions:

E. Comments:
 37102 w/15 # 11

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Thomas Manning, Project Manager Sept. 17, 1984
Signature Name and Title Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDF identified above.

Transporter No. 1: Price Trucking James W. Williams 9/17/84
Signature Name Date

Transporter No. 2: _____ _____ _____
Signature Name Date

H. I hereby certify that I am an authorized representative of the TSDF identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Janice A. Sugg Janice A. Sugg 9/19/84
Signature Name and Title Date

US EPA ARCHIVE DOCUMENT

HAZARDOUS WASTE MANIFEST

Manifest Document Number
 No 71613

A. Name	I.D. Code	Address	Phone Number (area code & number)	Date Shipped or Accepted
(1) Generator Samuel Cabot, Inc.	MA D001021732	224 Marginal St. Chelsea, Ma 02150	(617) 884-1249	54 / Sept / 17 <small>year month day</small>
(2) Transporter No. 1 Price Trucking	NY D046765574	67 Beacon St. Buffalo, N.Y. 14220	800-828-1043	84 / Sept / 17 <small>year month day</small>
Transporter No. 2				/ / <small>year month day</small>
(3) TSDI SC Chemical Services, Inc.	SC D070375985	Route #1 Box 255 Kinwood, S.C. 29125	803-452-5002	/ / <small>year month day</small>

(1) Generator Item Count		(2) DOT Proper Shipping Name; Hazard Class; DOT Identification Number	(3) Total Quantity	(4) Weight (pounds)	(5) Waste Code	(6) TSDI Item Check		(7) Quantity by Weight (pounds)
Number	Container Type					Number	Container Type	
80	Drum	Waste Flammable Solids NOS UN1325	4400	gallons	D001 1838 4401			

C. Emergency Response Information: In event of an emergency, phone the Generator at: (617) 884-1249. In event of a spill in South Carolina, call the Department at (803) 758-5531.

D. Special Handling Instructions:

E. Comments: 27102 with 1/30/84

F. This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to all applicable regulations of the U.S. DOT, U.S. EPA, the S.C. PSC and the S.C. DHEC.

Thomas Manning Signature Thomas Manning, Project Manager Name and Title Sept. 17, 1984 Date

G. I hereby certify that I am an authorized representative of the transporter and that the waste(s) and quantity described in this Manifest have been accepted by us for ultimate delivery to the TSDI identified above.

Transporter No. 1: *James P. ...* Signature *James P. ...* Name *...* Date

Transporter No. 2: _____ Signature _____ Name _____ Date

H. I hereby certify that I am an authorized representative of the TSDI identified above and that the waste(s) and quantity in this Manifest have been accepted by me for treatment, storage, and/or disposal.

Signature _____
Name and Title _____
Date

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER W/O # 3770 - 1111

MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / EPA ID NO.
GENERATOR:			
Samuel Cahot, Inc. PRIMARY TRANSPORTER	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
Price Trucking CONTINUING TRANSPORTER	67 Beacon St. Buffalo, N.Y. 14220	(800) 828-1043	NY D046765574
H.W.F.			
SCA Chemical Services, Inc.	Route #1 Box 255 Pinewood, S.C. 29125	803 452-5003	SC D070375985

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	HAZARD NO.	QTY / VOL	UNITS	UNIT CODE	CONTAINER NO.	TYPE	EPA WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS N.O.S.
Waste Flammable Solids NOS	Flammable Solid	1325	4400	Gal	G	80	DR	D001	Typical
									Mineral Spirits 36Z
									Sawdust or Speedi Dri 30
									Linseed Oil 8
									Titanium Dioxide 8
									Talc 8
									Iron oxide 8
									Zinc oxide 2
									other pigments <1

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION:

100Z

P/O # 36548

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO HAZARDS REQUIRED Flammable Yes Solid	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER: <i>James W. Madson</i>	DATE SHIPMENT ACCEPTED: MONTH: 09 DAY: 17 YEAR: 84	STATE: ME COMPANY NO. FOR TRAILER: 677625	DATE OF DELIVERY: MONTH: 1 DAY: 19 YEAR: 84
	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER:	DATE SHIPMENT ACCEPTED: MONTH: DAY: YEAR:	STATE: COMPANY NO. FOR TRAILER:	DATE OF DELIVERY: MONTH: DAY: YEAR:

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

HANDLING METHOD

1	D	8	1
2			
3			

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS

MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE. SIGNATURE: *James A. Sugg* DATE: 9 19 84

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

9/17/84
James W. Madson
 TRANSPORTER EMERGENCY PHONE NO.

HAZARDOUS WASTE MANIFEST AND SHIPPING PAPER

MA 00051
MANIFEST NUMBER

NAME	MAILING ADDRESS	PHONE NUMBER	STATE / EPA ID. NO.
Samuel Cohen, Inc. PRIMARY TRANSPORTER	229 Marginal St. Chelsea, Ma 02150	(617) 884-1249	MA D001021732
Price Trucking CONTINUING TRANSPORTER	67 Beacon St. Buffalo, N.Y. 14220	(800) 628-1043	NY D046765874
SCA Chemical Services, Inc. H.W.F.	Route #1 Box 255 Pinewood, S.C. 29125 803	452-5003	SC D070375985

IF MORE THAN ONE MANIFEST, TOTAL NO. OF SHIPPING PAPER IS USED: _____	FORMS ARE: _____	NO. IS: _____	THIS FORM, MANIFEST NO. OF FIRST FORM: _____	DATE SHIPPED: MONTH _____ DAY _____ YEAR _____	EXPECTED ARRIVAL: MONTH _____ DAY _____ YEAR _____
---	------------------	---------------	--	--	--

U.S. DOT SHIPPING NAME	DOT HAZARD CLASS	HUT. NO.	VOL.	UNITS	UNIT CODE	CONTAINER		EPA WASTE NO.	DESCRIPTION OR WASTE ANALYSIS IF WASTE IS H.C.S.
						NO.	TYPE		
Waste Flammable Solids H08	Flammable Solid	1325	7709	Gal	6	20	DR	D001	Typical
									Mineral Spirits 36%
									Sawdust or Speedi Dri 30
									Linseed Oil 8
									Titanium Dioxide 8
									Talc 8
									Iron oxide 8
									Zinc oxide 2
									other pigments 1

SPECIAL HANDLING INSTRUCTIONS INCLUDING ANY CONTAINER EXEMPTION, AND EMERGENCY RESPONSE INFORMATION

1002

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

TRANSPORTER COMPLETES	REQUIRED LABELS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE PRIMARY TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER _____	DATE SHIPMENT ACCEPTED MONTH _____ DAY _____ YEAR _____	STATE _____	COMPANY NO. FOR TRAILER MARKING OF TRAILER _____	DATE OF DELIVERY MONTH _____ DAY _____ YEAR _____
	PLACARDS REQUIRED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	THIS IS TO CERTIFY THAT I AM THE CONTINUING TRANSPORTER AND HAVE ACCEPTED THE DESCRIBED SHIPMENT IN PROPER CONDITION FOR TRANSPORT TO THE IDENTIFIED H.W.F. SIGNATURE OF TRANSPORTER _____	DATE SHIPMENT ACCEPTED MONTH _____ DAY _____ YEAR _____	STATE _____	COMPANY NO. FOR TRAILER MARKING OF TRAILER _____	DATE OF DELIVERY MONTH _____ DAY _____ YEAR _____

INDICATE ANY DIFFERENCES BETWEEN MANIFEST AND SHIPMENT AND LIST REJECTED MATERIALS, INDICATE DISPOSITION OF REJECTED SHIPMENT

I CERTIFY THAT THE DESCRIBED WASTE(S) WAS DELIVERED BY THE AFOREMENTIONED DELIVERING TRANSPORTER AND THAT THE INFORMATION ON THIS MANIFEST IS CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____ MONTH _____ DAY _____ YEAR _____

HANDLING METHOD					
1			4		
2			5		
3			6		

GENERATOR COMPLETES

TRANSPORTER COMPLETES

H.W.F. COMPLETES

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED AND IN PROPER CONDITION FOR TRANSPORTATION AND COMPLIES WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY.

DATE _____ TIME OF DELIVERY _____

EMERGENCY PHONE _____

433

UNITED STATES
DEPARTMENT OF ENVIRONMENTAL PROTECTION

M AD 001 021 7320 0002 1 1

Samuel Cabot, Inc.
229 Marginal St., Chelsea, Ma 02150
TELEPHONE 617 884-1249

MA A016401

E.T.S.C.

NSD 000192053NSDEPS P52UAE
201347-0017
SAME
MA-0888

E.T.S.C.

RT-15 VERNON, N.J. NSD 000692053 201697-4424

WASTE Flammable Solid NOS

Flammable Solid UN1325

001DF00001 P D003

WASTE WATER REACTIVE Solid NOS

Flammable Solid UN2813

001DF00001 P D003

S/R Lab Pack
S/R Lab Pack

DEWANE
TOY
OPENBURN
TOY

Packing Slips Available

Thomas J. Manning

Thomas J. Manning
T. F. Gundlach

1 023 8 4
1 023 8 4

T. F. Gundlach

TJ

T. F. Gundlach

T. F. Gundlach

1 025 8 4

COPY 3: GENERATOR-MAILED BY TSDF

MA A016401 COPY 3: GENERATOR-MAILED BY TSDF

US EPA ARCHIVE DOCUMENT

N AD 001 021 7320 0002 1 1

Samuel Cabot, Inc.
229 Marginal St., Chelsea, Ma 02150
617 884-1249

MA AD16401

MA AD16401 COPY B: GENERATOR-RETAINED BY GENERATOR

E.T.S.C.

APPROVED FOR SIGNATURE [unclear]

E.T.S.C.

APPROVED FOR SIGNATURE [unclear]

DATE	DESCRIPTION	AMOUNT	INITIALS
11/17/77	Fluoride Sol. 1000	1000.00	DMJ
11/17/77	Fluoride Sol. 1000	1000.00	DMJ

S/R Lab Book
S/R Lab Book

Working st. Available

Thomas J. Manning

102384

COPY B: GENERATOR-RETAINED BY GENERATOR

US EPA ARCHIVE DOCUMENT



South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mat.
2400 Bull Street, Columbia, SC 29201
Phone: (803) 758-5681
Emergency & Holidays: (803) 758-5531

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

Form Approved OMB No 2000-0404 Expires 7-31-96

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No MA D0 01 02 1 75 2	Manifest Document No. 1001001	2. Page 1 of 1	Information in the shaded areas is not required by Federal Law, but is by State Law.	
3. Generator's Name and Mailing Address Samuel Cabot, Inc. 229 Marginal St. Chelsea, Ma 02150				A. State Manifest Document Number N/A		
4. Generator's Phone (617) 884-1249				B. State Generator's ID N/A		
5. Transporter 1 Company Name Price Trucking		6. US EPA ID Number NY D 04 6 76 5 57 4		C. State Transporter's ID N/A		D. Transporter's Phone 800-828-7043
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		
9. Designated Facility Name and Site Address SCA Chemical Services, Inc. Route #1 Box 255 Pinewood, S. C. 29125		10. US EPA ID Number SC D0 7 0 3 75 98 5		F. Transporter's Phone		G. State Facility's ID
				H. Facility's Phone (803) 452-5003		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers	13. Total Quantity	14. Unit
a. Waste Flammable Solid NOS ORM-E/NA 1325				No. Type	Quantity	Wt/Vol
				8 0 UN	4 00 00	P
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. FW - 01 8 38 - 44 01				c. - - -		
b. - - -				d. - - -		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and State laws.						
Printed/Typed Name Thomas J. Manning				Signature <i>Thomas J. Manning</i>		Date 1 1 6 84
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>Paul Shell</i>		Date 1 1 6 84
18. Transporter 2 Acknowledgement or Receipt of Materials				Signature		Date
Printed/Typed Name				Signature		Month Day Year
19. Discrepancy Indication Space						
a. 28 600 lbs. c. - - - lbs.						
b. - - - lbs. d. - - - lbs.						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name Nope Barwick				Signature <i>Nope Barwick</i>		Date 1 1 10 84

GENERATOR
TRANSPORTER
FACILITY



South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 738-5681
Emergency & Mollidays: (803) 738-5331

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

Form Approved. OMB No 2000-0404 Expires 7 31 86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MA D O 01 02 1 73 2	Manifest Document No. 001001	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is by State law.	
3. Generator's Name and Mailing Address Samuel Cabot, Inc. 229 Marginal St. Chelsea, Ma 02150				A. State Manifest Document Number N/A		
4. Generator's Phone (617) 884-1249				B. State Generator's ID N/A		
5. Transporter 1 Company Name Price Trucking		6. US EPA ID Number NY D 04 6 76 5 57 4		C. State Transporter's ID N/A		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 800-828-1043		
9. Designated Facility Name and Site Address SCA Chemical Services, Inc. Route #1 Box 255 Pinewood, S. C. 29125		10. US EPA ID Number SC D O 7 0 3 75 98 5		E. State Transporter's ID		
				F. Transporter's Phone		
				G. State Facility's ID		
				H. Facility's Phone (803) 452-5003		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers	13. Total Quantity	14. Unit
a. Waste Flammable Solid NOS ORM-E/NA 1325				No.	Type	Quantity
						Unit
						Waste No.
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above		
a. FW - 01 8 38 - 44 01				c. - - -		
b. - - - - -				d. - - - - -		
15. Special Handling Instructions and Additional Information						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and State laws.						
Printed/Typed Name Thomas J. Manning				Signature <i>Thomas J. Manning</i>		Date 1 1 6 84
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>Paul Shell</i>		Date 1 1 6 84
Printed/Typed Name Paul Shell				Signature <i>Paul Shell</i>		Date 1 1 6 84
18. Transporter 2 Acknowledgement or Receipt of Materials				Signature		Date
Printed/Typed Name				Signature		Date
19. Discrepancy Indication Space						
a. _____ lbs. c. _____ lbs.						
b. _____ lbs. d. _____ lbs.						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name				Signature		Date Month Day Year

FILE #21732C
DATE: 2/9/84

SCA CHEMICAL SERVICES (MA) INC.
AN SCA SERVICES CO.

385 Quincy Avenue
Braintree, Massachusetts 02184
(617) 849-1800
1-800-225-1883



QUOTATION AND INSTRUCTIONS

	CUSTOMER	GENERATOR/TITLE/INSTRUCTIONS
Company	SAMUEL CABOT, INC.	
Address	One Union Street	
City	Boston	
State/Zip	MA 02108	
Contact	Tom Manning	
Telephone	(617) 723-7740	
EPA ID#	MAD001021732	

P.O.# _____ Sales Rep: K. Mattson Reviewed by: *GLC*

Codes and prices based on: WPS forms submitted to Model City.

Material/Specifications/Description (Include DOT Shipping Name if available)	Phys. State	EPA HW #	SCA Code MODEL CITY	Price
Waste Paint Solids	S	M001	3438-A	\$47.00/drum
Waste Oily Solids	S	M001	3438-B	\$47.00/drum
Waste Creosote Solids	S	M001	3438-C	\$47.00/drum

NOTE: No free liquid, no more than 1" of void space in drum.

DIRECT SHIPMENT TO MODEL CITY, NY includes Federal and State hazardous waste tax of \$3.50 if applicable.

MINIMUM DISPOSAL BILLING: \$300.00

TRANSPORTATION PRICE-PER HOUR: _____/hour
Vehicle: 4 Hour Minimum, Portal to Portal
Type: Carbon Steel Steel Other
Normal Quantity: 80 x 55
PRICE-FLAT RATE: \$1,170.00/trip
One Hour Loading/Unloading Allowed
Excess Site Time _____/hour *1.25/hour*

- GENERAL CONDITIONS:
1. Prices firm for 30 days, may be revised by distribution of price sheets. Terms: Net 30 days.
 2. Materials subject to additional charges if not per the listed or attached specifications.
 3. Materials not listed above cannot be shipped. Please discuss other materials with customer service or your sales representative.
 4. The customer is responsible for additional costs incurred by SCA from loading or unloading delays due to solids or other off-specifications, frozen loads, overweight loads, etc.

over

FILE #21732B
DATE: 2/9/84

Should have info pt of 3/2

SCA CHEMICAL SERVICES (MA) INC.
AN SCA SERVICES CO.



385 Quincy Avenue
Braintree, Massachusetts 02184
(617) 849-1800
1-800-225-1883

QUOTATION AND INSTRUCTIONS

	CUSTOMER	GENERATOR/TITLE/INSTRUCTIONS
Company	SAMUEL CABOT, INC.	
Address	One Union Street	
City	Boston	
State/Zip	MA 02108	
Contact	Tom Manning	
Telephone	(617) 723-7740	
EPA ID#	MAD001021732	

P.O.# _____ Sales Rep: K. Mattson Reviewed by: *GCC*

Codes and prices based on: WPS forms submitted 2/7/84.

Material/Specifications/Description (Include DOT Shipping Name if available)	Phys. State	EPA HW #	SCA Code PINWOOD	Price
Waste Paint Solids <i>1838-4401</i>	S	D001	Pending	\$32.00/drum
Waste Oily Solids <i>1838-4101</i>	S	M001	Pending	\$32.00/drum
Waste Creosote solids <i>1838-4102</i>	S	D001	Pending	\$32.00/drum

NOTE: No free liquid, no more than 1" of void space in drum.

DIRECT SHIPMENT TO PINWOOD, SC includes Federal and State hazardous waste tax.

MINIMUM DISPOSAL BILLING: \$300.00

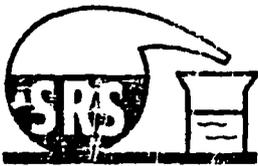
TRANSPORTATION PRICE-PER HOUR: _____/hour
 Vehicle: 4 Hour Minimum, Portal to Portal
 Type: Carbon Steel Steel Other
 Normal Quantity: 40,000 lbs. PRICE-FLAT RATE: \$2,030.00/trip
 One Hour Loading/Unloading Allowed
 Excess Site Time _____/hour

GENERAL CONDITIONS:

- Prices firm for 30 days, may be revised by distribution of price sheets. Terms: Net 30 days.
- Materials subject to additional charges if not per the listed or attached specifications.
- Materials not listed above cannot be shipped. Please discuss other materials with customer service or your sales representative.
- The customer is responsible for additional costs incurred by SCA from loading or unloading delays due to solids or other off-specifications, frozen loads, overweight loads, etc.

*Check Paul Pukh
or George Curtis*

over



**SOLVENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.**

INTERNAL COPY ONLY
FA CODE 07-1

P. O. BOX 362
SOUTHINGTON, CONN. 06489
PHONE: (203) 628-8084

CAJOT SLAIN
229 MARGINAL STREET
CHILSEA, MA 02150
ATT: TOM MANNING

DISPOSAL QUOTATION

DATE: DECEMBER 11, 1984
Laboratory # 6639

SRS is pleased to inform you that the data/sample submitted for disposal has been approved. Our environmental review of Federal, State and Local regulations allows us to properly dispose of this waste. Our State permit numbers are as follows: CT DEP #CT-HW-148, NJ DEP #2009C. Our EPA I.D. numbers are as follows: Connecticut, CTD 009 717 604; New Jersey, NJD 002 182 897.

Product identification number (PIN) must appear on all purchase orders, manifest, bills of lading and drums.

<u>PIN</u>	<u>Waste Description</u>	<u>Unit</u>	<u>Disp. Method</u>	<u>Disp. Price</u>	<u>Annual Volume</u>	<u>Shipping Frequency</u>
1234-6639-GD	flam NSlid NOB (solidified oil stains, pigments)	55/gal/dr.	Secure Landfill	 \$8/dr	600/dr.	As required

NOTE: DRUMS MUST BE MADE SOLID PRIOR TO SHIPMENT TO SRSRR

<u>TRANSPORTATION:</u>	<u>1-28</u>	<u>29-50</u>	<u>51-65</u>	<u>66-80 & TT</u>
Pickup	\$318.	\$355.	\$390.	\$430.

SRS Transportation Subject To:

- (1) \$25/hr. detention charge - one hour free time
- (2) \$250/pump breakage charge if attributable to customer's waste.
- (3) \$85/hr. vacuum truck rental charge, if requested.

MINIMUM DISPOSAL CHARGE: \$ 150.00 not including transportation

TERMS: Net 15 days

All shipments must comply with 40 CFR Part 262, Subpart C for disposal and 49 CFR Part 100-177 for transportation.

Price quoted is a trial price based on data/sample submitted. Material not in compliance with the Hazardous Waste Data Sheet and/or sample submitted and beyond the limits of our normal capacity, may be unacceptable or incur additional charges. SRS will always advise of any discrepancy prior to taking action. Prices are firm for 30 days.

SPJ/cct
cc: JTG
supercedes 4/4/84

Stephen P. Jank
Manager, Marketing & Sales



**SOLVENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.**

P. O. BOX 362
SOUTHINGTON, CONN. 06488
PHONE: (203) 628-8084

CABOT INC.
229 MARGINAL STREET
CHELSEA, MA 02150
ATT: MARK STAIRS

DISPOSAL QUOTATION

DATE: MARCH 18, 1985
Laboratory # 9429

SRS is pleased to inform you that the data/sample submitted for disposal has been approved. Our environmental review of Federal, State and Local regulations allows us to properly dispose of this waste. Our State permit numbers are as follows: CT DEP #CT-HW-148, NJ DEP #2009C. Our EPA I.D. numbers are as follows: Connecticut, CTD 009 717 604; New Jersey, NJD 002 182 897.

Product identification number (PIN) must appear on all purchase orders, manifest, bills of lading and drums.

<u>PIN</u>	<u>Waste Description</u>	<u>Unit</u>	<u>Disp. Method</u>	<u>Disp. Price</u>	<u>Annual Volume</u>	<u>Shipping Frequency</u>
1234-9429-FB	Combustible Liq. NOS (oil, Naptha)	Bulk		\$.20/g	6800/g	One time

TRANSPORTATION:	<u>1-28</u>	<u>29-50</u>	<u>51-65</u>	<u>66-80 & TT</u>
Pickup				\$430.

SRS Transportation Subject To:

- \$35. (1) ~~\$25~~ hr. detention charge - one hour free time
- \$500 (2) ~~\$250~~ pump breakage charge if attributable to customer's waste.
- (3) \$85/hr. vacuum truck rental charge, if requested.

MINIMUM DISPOSAL CHARGE: \$ n/a

TERMS: Net 15 days

All shipments must comply with 40 CFR Part 262, Subpart C for disposal and 49 CFR Part 100-177 for transportation.

Price quoted is a trial price based on data/sample submitted. Material not in compliance with the Hazardous Waste Data Sheet and/or sample submitted and beyond the limits of our normal capacity, may be unacceptable or incur additional charges. SRS will always advise of any discrepancy prior to taking action. Prices are firm for 30 days.

SPJ/cct
cc: JFG

Stephen P. Jank
Manager, Marketing & Sales



**SOLVENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.**

P. O. BOX 362
SOUTHINGTON, CONN. 06488

PHONE: (203) 628-8084

CABOT STAINS INC.
229 MARGINAL STREET
CHELSEA, MASS 02150
ATT: MARK STAIRS

DISPOSAL QUOTATION

DATE: MARCH 18, 1985
Laboratory # 9428

SRS is pleased to inform you that the data/sample submitted for disposal has been approved. Our environmental review of Federal, State and Local regulations allows us to properly dispose of this waste. Our State permit numbers are as follows: CT DEP #CT-HW-148, NJ DEP #2009C. Our EPA I.D. numbers are as follows: Connecticut, CTD 009 717 804; New Jersey, NJD 002 182 897.

Product identification number (PIN) must appear on all purchase orders, manifest, bills of lading and drums.

<u>PIN</u>	<u>Waste Description</u>	<u>Unit</u>	<u>Disp. Method</u>	<u>Disp. Price</u>	<u>Annual Volume</u>	<u>Shipping Frequency</u>
1234-9428-FB	Combustible Liq. NOS (waste oil)	Bulk		\$.20/g	6683/g	one time

<u>TRANSPORTATION:</u>	<u>1-28</u>	<u>29-50</u>	<u>51-65</u>	<u>66-80 & TT</u>
Pickup				\$430.

SRS Transportation Subject To:

- \$35. (1) ~~\$25~~ hr. detention charge - one hour free time
- (2) \$250/pump breakage charge if attributable to customer's waste.
- (3) \$85/hr. vacuum truck rental charge, if requested.

MINIMUM DISPOSAL CHARGE: \$ n/a

TERMS: Net 15 days

All shipments must comply with 40 CFR Part 262, Subpart C for disposal and 49 CFR Part 100-177 for transportation.

Price quoted is a trial price based on data/sample submitted. Material not in compliance with the Hazardous Waste Data Sheet and/or sample submitted and beyond the limits of our normal capacity, may be unacceptable or incur additional charges. SRS will always advise of any discrepancy prior to taking action. Prices are firm for 30 days.

Stephen P. Jank

Stephen P. Jank
Manager, Marketing & Sales

SPJ/cct
cc: JFG



SOLVENTS RECOVERY SERVICE OF NEW ENGLAND, INC.
 Lazy Lane, Southington, CT 06489 203-628-8084



Solid Waste Facility
 CT D.E.P. #CT-HW-148

HAZARDOUS WASTE DATA SHEET

LAB NO.
 Salesman _____

EPA I.D. #CTD 009 717 604

Company Name: <i>General Electric</i>	Plant Location: <i>02051</i>
EPA I.D. # <i>009 717 604</i>	Coordinator: <i>MARK</i>
Billing Address: <i>111 MARK GIBSON ST</i>	Telephone # <i>203-261-1111</i>
Description of Hazardous Waste: <i>575 502 NOS</i>	EPA Haz. Waste #
Process Generating Hazardous Waste: <i> </i>	
DOT Classification: <i> </i>	DOT Placards: <i> </i>
Estimated Quantity: <input checked="" type="checkbox"/> Bulk <input type="checkbox"/> Drums <input type="checkbox"/>	Lbs/Gals: <i> </i> Shipping Freq. <i> </i> Mo/Yr/One Time <i> </i>

Physical Properties

pH	Liquid <input checked="" type="checkbox"/>	Solid <input type="checkbox"/>	
Solids: <i> </i>	% Total % Suspended	% Dissolved	% Ash @ 600°C
BTU/Lb.	Vap. Pres.	Sp. Gr.	Temp. Closed Cup
BTU/Gal.	Viscosity	Flash Point	

Composition: Account for 100% Inc. Water Estimate (X) Analysis ()

<i>COPPER 157%</i>	%
<i>IRON 43%</i>	%
<i> </i>	%
<i> </i>	%

Heavy Metals in ppm As, Cd, Cr, Cu, Hg, Be, Pb, Ni, Va, Se, Zn

ppm	ppm	ppm
-----	-----	-----

Total Chlorine - Wt %
 Total Sulphur - Wt %

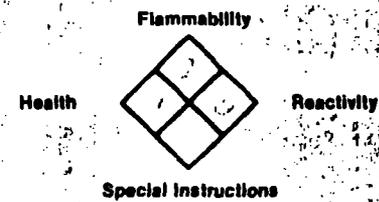
List any known carcinogenic or toxic components:

Attach Material Safety Data Sheets where available

Is this material Ignitable () Corrosive () Reactive () Toxic ()
 As defined in 40 CFR 261.21 261.22 261.23 261.24

- 0 No unusual hazard
- 1 Slightly Hazardous
- 2 Hazardous
- 3 Extremely Hazardous
- 4 Specific Hazard

Hazard Identification System



Other Information (i.e., odor, pesticide, PCB, Special Problems, Precautions, etc.):

I HEREBY CERTIFY THAT THE ABOVE AND ATTACHED INFORMATION/DESCRIPTION IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND COMPOSITION OR PROPERTIES EXIST AND THAT ALL KNOWN OR SUSPECTED HAZARDS HAVE BEEN DISCLOSED.

Date: *3/1/78* Signature: *[Signature]* Title: *[Title]*



SOLVENTS RECOVERY SERVICE OF NEW ENGLAND, INC.
 Lazy Lane, Southington, CT 06489 203-628-8084



National Association
 of Solvent
 Recyclers

Solid Waste Facility
 CT D.E.P. #CT-HW-148

HAZARDOUS WASTE DATA SHEET

EPA I.D. #CTD 009 717 604

LAB NO.
 Salesman _____

Company Name _____		Plant Location _____	
EPA I.D. # _____		Coordinator _____	
Billing Address _____		Telephone # _____	
Description of Hazardous Waste _____		EPA Haz. Waste # _____	
Process Generating Hazardous Waste _____			
DOT Classification _____		DOT Placards _____	
Estimated Quantity Bulk <input checked="" type="checkbox"/> Drums <input type="checkbox"/>	Lbs/Gals _____	Shipping Freq. _____	Mo/Yr/One Time _____

Physical Properties

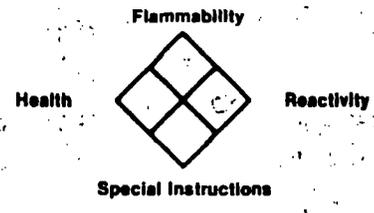
pH _____	Liquid <input checked="" type="checkbox"/>	Solid <input type="checkbox"/>
Solids _____	% Total _____ % Suspended _____	% Dissolved _____ % Ash @ 600°C _____
BTU/Lb. _____ BTU/Gal. _____	Vap. Pres. _____ Viscosity _____	Sp. Gr. _____ Flash Point _____ Temp. Closed Cup _____

Composition - Account for 100% Inc. Water Estimate (X) Analysis ()

_____ _____ _____ _____	_____ _____ _____ _____
Heavy Metals in ppm As, Cd, Cr, Cu, Hg, Be, Pb, Ni, Va, Se, Zn	ppm _____ ppm _____
Total Chlorine - Wt % _____	Total Sulphur - Wt % _____
List any known carcinogenic or toxic components: _____	
Attach Material Safety Data Sheets where available _____	
Is this material Ignitable () _____	Corrosive () _____
As defined in 40 CFR 261.21 261.22	261.23 261.24
Reactive () _____	Toxic () _____

- 0 - No unusual hazard
- 1 - Slightly Hazardous
- 2 - Hazardous
- 3 - Extremely Hazardous
- 4 - Specific Hazard

Hazard Identification System



Other Information (i.e., odor, pesticide, PCB, Special Problems, Precautions, etc.):

I HEREBY CERTIFY THAT THE ABOVE AND ATTACHED INFORMATION/DESCRIPTION IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND COMPOSITION OR PROPERTIES EXIST AND THAT ALL KNOWN OR SUSPECTED HAZARDS HAVE BEEN DISCLOSED.

Date _____ Signature _____
 Title _____



South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
2600 Bull Street, Columbia, SC 29201
Phone: (803) 736-5241
Emergency & Holidays: (803) 736-5333

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

Form Approved OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MA 00 01 02 17 3 2		Manifest Document No. 11011		2. Page 1 of 1		Information in the shaded areas is not required by Federal law, but is by State law.									
3. Generator's Name and Mailing Address Samuel Cabot, Inc. 229 Marginal St. Chelsea, Ma 02150						A. State Manifest Document Number N/A											
4. Generator's Phone (617) 884-1249						B. State Generator's ID N/A											
5. Transporter 1 Company Name Price Trucking			6. US EPA ID Number NY 00 4 67 6 55 7 4			C. State Transporter's ID N/A			D. Transporter's Phone 800-828-104								
7. Transporter 2 Company Name						E. State Transporter's ID											
8. US EPA ID Number						F. Transporter's Phone											
9. Designated Facility Name and Site Address SCA Chemical Service Rte #1 Box 255 Pinewood, S. C. 29125						10. US EPA ID Number S CD 07 0 37 5 98 5											
G. State Facility's ID						H. Facility's Phone (803) 452-5003											
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit W/Vol		15. Waste No.					
						No. Type		Quantity		W/Vol		Waste No.					
a. Waste flammable solid N.O.S. ORM-E/NA 1325						7 2 DM		35 0 00		F		D0 01					
b. Waste flammable solid N.O.S. ORM-L/NA 1325						2 DM		1 0 0 0		P		D0 01					
c. Waste oily solids N.O.S. ORM/NA 1270						6 DM		3 0 0 0		P		D1 01					
d.																	
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above											
a. PW - 0 18 38 - 4 401						c. PW - 0 1 8 38 - 4 1 01						D81					
b. PW - 0 18 38 - 4 1 02						d.											
15. Special Handling Instructions and Additional Information WO #40025 FLAMMABLE SOLID LABEL																	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and State laws.																	
Printed/Typed Name Thomas J. Manning						Signature <i>Thomas J. Manning</i>			Date Month Day Year 12 1 85								
17. Transporter 1 Acknowledgement of Receipt of Materials																	
Printed/Typed Name <i>Paul Ghelli</i>						Signature <i>Paul Ghelli</i>			Date Month Day Year 12 1 85								
18. Transporter 2 Acknowledgement of Receipt of Materials																	
Printed/Typed Name						Signature			Date Month Day Year								
19. Discrepancy Indication Space																	
a.						lbs.		c.		lbs.							
b.						lbs.		d.		lbs.							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.																	
Printed/Typed Name						Signature			Date Month Day Year								

US EPA ARCHIVE DOCUMENT

GENERATOR TRANSPORTER FACILITY

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF ENVIRONMENTAL QUALITY ENGINEERING
DIVISION OF HAZARDOUS WASTE
One Winter Street
Boston, Massachusetts 02108



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

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator US EPA ID No MA DO 01 0 21 7 32 00 0 04		Manifest Number 04		2 Page 1 of 1 Information in the shaded areas is not required by Federal law	
3 Generator's Name and Mailing Address Samuel Cabot, Inc. 229 Marginal St Chelsea, Ma 02150				A State Manifest Document Number MA 8019201		B State Gen ID N/R	
4 Generator's Phone () 617 884-1249		5 Transporter 1 Company Name Solvents Recovery Service of N.E., Inc.		6 US EPA ID Number CT D 00 97 1 76 0 4		C State Trans ID NS 407TFF	
7 Transporter 2 Company Name N.E., Inc.		8 US EPA ID Number		9 Designated Facility Name and Site Address Solvents Recovery Service of N.E. Lazy Lane Southington, Ct 06489		10 US EPA ID Number CT D 00 9 71 76 0 4	
11 US DOT Description including Proper Shipping Name, Hazard Class, and ID (Reference)		12 Containers		13 Total Quantity		14 Units	
a. Waste Flammable Liquid N.O.S. UN 1993		No. Type		Quantity		Waste No.	
		1 1 E 4/29		G D 0 01			
J. Additional Descriptions for Materials Listed Above (Include physical state and hazard code.)		K. Handling Codes for Wastes Listed Above					
a. AROMATIC NAPHTHA		b. Breathing					
b. MINERAL SPIRITS							
15 Special Handling Instructions and Additional Information Incinerate Flammable Label							
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this assignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway, according to applicable international and government regulations, and all applicable State laws/regulations.							
Printed/Typed Name Thomas Manning				Signature <i>Thomas J Manning</i>		Date 12 3 85	
17 Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Beuce R. GALLUP				Signature <i>Beuce R Gallup</i>		Date 12 3 85	
18 Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature		Date	
19 Discrepancy Indication Space							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.							
Printed/Typed Name <i>[Signature]</i>				Signature <i>[Signature]</i>		Date 01/03/85	

In case of emergency or spill, immediately call the National Response Center (800) 424-8802.

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF ENVIRONMENTAL QUALITY ENGINEERING
DIVISION OF HAZARDOUS WASTE
One Winter Street
Boston, Massachusetts 02108

Please print or type. If form designed for use on a dot matrix (12-pitch) type printer.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator US EPA ID No. MA D0 01 0 21 7 32 00 0 04		2. Page 1 of 1 Information in the shaded area is not required by Federal law	
3. Generator's Name and Mailing Address Samuel Cabot, Inc. 229 Marginal St Chelsea, Ma 02150		4. Generator Phone No. 617 884-1249		A. State Manifest Document Number MA 8019201	
5. Transporter's Name Solvents Recovery Service of N.E., Inc.		6. US EPA ID Number CT D 00 97 1 76 0 4		C. State Manifest ID MS 40 TTF	
7. Transporter's Address N.E., Inc.		8. US EPA ID Number		D. Manifest State ID 203 628-8084	
9. Designated Facility Name and Site Address Solvents Recovery Service of N.E. Lazy Lane Southington, Ct 06489		10. US EPA ID Number CT D 00 9 71 76 0 4		E. State Manifest ID	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit Wt Vol	15. Waste ID
a. Waste Flammable Liquid N.O.S. UN 1993		No. Type			
		1 T B	41.29	G	D 0 01
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above (include physical state and hazard code)		K. Handling Codes for Wastes Listed Above			
a.		d.			
b.		e.			
15. Special Handling Instructions and Additional Information Incinerate Flammable Label					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this assignment are fully and accurately described above by proper shipping name and are properly packed, marked, and labeled, and are in all respects in proper condition for transport by highway, according to applicable international and government regulations, and all applicable State laws/regulations.					
Printed/Typed Name Thomas Manning		Signature		Date 1 2 3 85	
17. Transporter 1. Acknowledgment of Receipt of Materials		Signature		Date 12 3 85	
Printed/Typed Name Thomas R. Gannup		Signature		Date	
18. Transporter 2. Acknowledgment of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Date	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name		Signature		Date	
				Month Day Year	

In case of emergency or spill, immediately call the National Response Center (800) 424-8802.

GENERATOR FACILITY



SHIPPING ORDER

SOLVENTS RECOVERY SERVICE OF NEW ENGLAND, INC.

P.O. Box 362, Lazy Lane, Southington, CT 06489 (203) 628-8084

From/To General Credit Cust. # _____ Date Jun 23 1985 Pick-up #2 _____
229 Industrial St. Contact Thomas Manning Location _____
Cheshire, MA Phone # 617-541-1249 _____
 P.O. # _____

Quantity: Drums/Gals.	Comp. #	Inches	Description	Rec.	Disp.	PIN #	SRSNE Order #
4129	1	47 1/4	Kerosene /ms		Y	6643: FB	

Special Instructions:
 Vacuum Tank Customer Request Initials Bm

Demurrage: Time In 10:45 AM Time Out 2:15 PM Demurrage: Time In _____ Time Out _____
 Stop #1 Vac Start 11:5 AM Vac Finish 1:45 PM Stop #2 Vac Start _____ Vac Finish _____
 Verified By [Signature] Verified By _____

Reason for Delay:
 Loading/Unloading Drums
 Pumping From/Into Drums
 Pumping From/Into Tank
 Other as noted

Received The Above Described Property
 In Good Condition Except As Noted:

 Verified by Customer Signature

For Office Use Only:
 Tractor # used 307811 Trailer # Used T-20
 Driver Time _____ Expenses _____
 Demurrage _____ Billable _____
 Vac Time _____ Vac Billable _____
 Other Comments: _____

 SRSNE Shipper/Receiver _____ SRSNE Driver [Signature]

Cabot Stain Corp.
229 Marginal St., Chelsea, Ma 617-884-1249

MA A032907

Suffolk Services, Inc. M A D049440951

Consolidated Waste Services
Airport Rd. Box 629
Norridgewock, Me

Waste asbestos (bagged and labeled)

4 yd³

MANIFESTED FOR RECORDKEEPING PURPOSES ONLY

Mark A. Stairs

Mark A. Stairs

Philip T. Keenan

Philip T. Keenan

Date	4 11 85
Signature	<i>Philip T. Keenan</i>
Time	04:16:25

COPY 8: GENERATOR-RETAINED BY GENERATOR

Cabot Stain Corp.
229 Marginal St., Chelsea, Ma 617-884-1249

MA A032907

Suffolk Services, Inc. M A D049440951

Consolidated Waste Services
Airport Rd. Box 629
Norridgewock, Me

Waste asbestos (bagged and labeled)

4 yd³

MANIFESTED FOR RECORDKEEPING PURPOSES ONLY

Mark A. Stairs

Mark A Stairs

4 11 8 5

Phillip T. McGrath

Phil Dept. Head

041185

COPY 7: GENERATOR STATE-MAILED BY GENERATOR



South Carolina Department of Health and Environmental Control

3400 B.11 Street, Columbia, SC 29201
Phone: (803) 738-3441
Emergency & Holidays: (803) 726-5331

Print or type (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No 2000-0404 Expires 7-31-88

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. M A D O 0 1 0 2 1 7 3 2 1 0 0 0 0 4		Manifest Document No. 0 0 0 0 0 4		2. Page 1 of 1		Information in the shaded areas is not required by Federal law, but is by State law.			
Generator's Name and Mailing Address Samuel Cabot, Inc. 229 Marginal St Chelsea, Ma 02150						A. State Manifest Document Number N/A					
Generator's Phone (617) 884-1249						B. State Generator's ID N/A					
Transporter 1 Company Name Clean Harbors						6. US EPA ID Number M A D 0 3 9 3 2 2 2 5 0		C. State Transporter's ID N/A			
Transporter 2 Company Name						8. US EPA ID Number		D. Transporter's Phone 617-585-5111			
Designated Facility Name and Site Address GSX-Pinewood Route #1 Box 255 Pinewood, S.C. 29125						10. US EPA ID Number S C D 0 7 0 3 7 5 9 8 5		E. State Transporter's ID			
								F. Transporter's Phone			
								G. State Facility's ID			
								H. Facility's Phone (803) 452-5003			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit	15. Waste No.
Waste Flammable Solid Nos UN DM / NA 1325						No. Type		Quantity		M/W	Waste No.
						8 0 DM		4 00 0 0 0 P			D 00 1
Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above					
a. HW - 0 1 8 3 8 - 4 4 0 1						b. - - - - -					
c. - - - - -						d. - - - - -					
16. Special Handling Instructions and Additional Information S.C. work order 44471											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and State laws.											
Printed/Typed Name Mark A. Stairs				Signature <i>Mark A. Stairs</i>		Date Month Day Year 1 19 9 2 5 1 8 5					
17. Transporter 1 Acknowledgement of Receipt of Materials										Date	
Printed/Typed Name Robert Cantilides				Signature <i>Robert Cantilides</i>		Date Month Day Year 1 19 9 2 5 1 8 5					
18. Transporter 2 Acknowledgement of Receipt of Materials										Date	
Printed/Typed Name				Signature		Date Month Day Year					
19. Discrepancy Indication Space						1a. _____		1b. _____		1c. _____	
						1d. _____		1e. _____		1f. _____	
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.										Date	
Printed/Typed Name				Signature		Date Month Day Year					

US EPA ARCHIVE DOCUMENT

and Environmental Control

(Form designed for use on site (12-pin) typewriter)

Form approved OMB No. 2000-0474 Expires 7-31-85

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **M A 00 01 02 17 3 21 00 04**

2. Manifest Document No. **000104**

3. Generator's Name and Mailing Address
Samuel Cabot, Inc.
229 Marginal St
Chelsea, Ma 02150

4. Generator's Phone (617) **884-1249**

5. Transporter 1 Company Name
Clean Harbors

6. US EPA ID Number
MA 03 93 22 25 0

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address
GSX-Pinewood
Route #1 Box 255
Pinewood, S.C. 29125

10. US EPA ID Number
SC 00 70 3 75 9 8 5

11. State of Origin
MA

12. State of Destination
SC

13. Facility's Phone
(803) 452-5003

US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit (M, G, L)	1. Waste No.
	No.	Type			
Waste Flammable Solid Nos ORM-E/NA 1325	8	IM	4,000.00	P	0001

Additional Descriptions for Materials Listed Above

1. **HW-01838-4401**

2.

K. Handling Codes for Wastes Listed Above

J. Special Handling Instructions and Additional Information

S.C. WORK ORDER 44471

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and State laws.

Printed/Typed Name: **Mark A. Stairs** Signature: *Mark A. Stairs* Date: **6/25/85**

Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name: Signature: Date: **6/25/85**

Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name: Signature: Date:

L. Discrepancy Indication Space

Section II delete OAH-E

GENERATOR NOTIFIED

M. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 18.

Printed/Typed Name: **ETHEL K. SLATER** Signature: *Ethel K. Slater* Date: **6/27/85**

US EPA ARCHIVE DOCUMENT

and Environmental Control

Form designed for use on this (12 pitch) typewriter

Form No. 3520-104 Expires 7-31-81

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **MA AD 001 02 1 75 2 10 00 05**

2. Page 1 of 1 Information in the shaded areas is not required by Federal law, but is by State law.

Generator's Name and Mailing Address
Samuel Cabot, Inc.
229 Marginal St. Chelsea, Ma. 02150

A. State Manifest Document Number
N/A

Generator's Phone
Clean Harbors

B. State Generator's ID
N/A

Transporter 1 Company Name
Clean Harbors

C. State Transporter's ID
N/A

Transporter 2 Company Name
Clean Harbors

D. Transporter's Phone
617-585-5111

Designated Facility Name and Site Address
GSX-Pinewood
Route #1 Box 255
Pinewood, S.C. 29125

E. State Transporter's ID
N/A
 F. Transporter's Phone
(803) 452-5003
 G. State Facility's ID
SC D 0 70 3 75 9 8 5

8. DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

Waste Flammable Solid Nos
UN 1325
Flammable Solids

12. Containers	13. Total Quantity	14. Unit	1. Waste No.
No.		M/W	
80	4,000.00	P	D 00 1

Additional Descriptions for Materials Listed Above
HW-01858-4401

K. Handling Codes for Wastes Listed Above

Special Handling Instructions and Additional Information
S.C. WORK ORDER 45343

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and State laws.

Printed/Typed Name: **Mark A. Stairs** Signature: *Mark A. Stairs* Date: **02/21/85**

Transporter 1 Acknowledgment of Receipt of Materials
 Printed/Typed Name: **PAUL** Signature: *Paul* Date: **02/21/85**

Transporter 2 Acknowledgment of Receipt of Materials
 Printed/Typed Name: Signature: Date:

Discrepancy Indication Space
 1. **30120**

Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted in item 11.

Printed/Typed Name: Signature: *Mark Stairs* Date: **02/21/85**



South Carolina Department of Health and Environmental Control

Office of Solid & Hazardous Waste
 2400 Bull Street, Columbia, SC 29201
 Phone: (803) 734-3681
 Emergency & Holidays: (803) 734-3321

Print or type (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2000 0404 Expires 7 31 85

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's USEPA ID No. MAAD 001 02 1 73 2 10 00 05		Manifest Document No. 000005		2. Page 1 of 1		Information in the shaded areas is not required by Federal law, but is by State law.			
Generator's Name and Mailing Address Samuel Cabot, Inc. 229 Marginal St. Chelsea, Ma. 02150				A. State Manifest Document Number N/A		B. State Generator's ID N/A		C. State Transporter's ID N/A			
Generator's Phone ()				6. US EPA ID Number MAAD 039 3 22 2 5 0		D. Transporter's Phone 617-585-5111		E. State Transporter's ID			
Transporter 1 Company Name Clean Harbors				8. US EPA ID Number		F. Transporter's Phone		G. State Facility's ID			
Transporter 2 Company Name				10. US EPA ID Number SC D 0 70 3 75 9 8 5		H. Facility's Phone (803) 452-5003					
Designated Facility Name and Site Address GSX-Pinewood Route #1 Box 255 Pinewood, S.C. 29125											
US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Waste Flammable Solid Nos ORM-B/N-A 1325				12. Containers No. Type 8 0 DM		13. Total Quantity 4 00 0 0		14. Unit M/Vol P		1. Waste No. D 00 1	
Additional Descriptions for Materials Listed Above R1W-01838-4401				K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information S.C. WORK ORDER 45343											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations and State laws.				Printed/Typed Name Mark A. Stairs		Signature <i>Mark A. Stairs</i>		Date 02 17 85			
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name Steve Paine		Signature <i>Steve Paine</i>		Date 02 21 85			
18. Transporter 2 Acknowledgement of Receipt of Materials				Printed/Typed Name		Signature		Date			
19. Discrepancy Indication Space				1a. _____ 1b. _____		1c. _____ 1d. _____		1e. _____ 1f. _____			
20. Facility Owner or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.				Printed/Typed Name		Signature		Date			



COMMONWEALTH OF MASSACHUSETTS
 DEPARTMENT OF ENVIRONMENTAL QUALITY ENGINEERING
 DIVISION OF HAZARDOUS WASTE
 One Winter Street
 Boston, Massachusetts 02108

JOB #
7729-K



Please print or type (form designed for use on clix (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator US EPA ID No MA D Q Q 1 Q 2 1 7 3 4 0 0 0 0 7	Manifest Document No.	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
3 Generator Name (Include Street Address) Samuel Cabot, Inc. 229 Marginal Street Chelsea, MA 02150		6 US EPA ID Number MA D D 3 9 3 2 2 2 5 0		A State Manifest ID Number MA 8019206	
4 Generator's Phone () 617 884-1249		8 US EPA ID Number		B State Manifest ID Number SAME	
5 Transporter 1 Company Name Clean Harbors Inc.		10 US EPA ID Number MA D Q 5 3 4 5 2 6 3 7		C State Transfer ID MEB70137	
7 Transporter 2 Company Name		11 US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		D State Transfer ID 617 585-5111	
9 Designated Facility Name and Site Address Clean Harbors of Braintree Inc. P.O. Box 327, 385 Quincy Ave. Braintree, MA 02184		12 Containers		E State Transfer ID	
		No.	Type	13 Total Quantity	14 Unit Wt/Vol
					15 Waste ID
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	
a. Waste Flammable Liquid/ N.O.S. Flammable Liquid/UN 1993		No. Type		14. Unit Wt/Vol	
				15. Waste ID	
b.					
c.					
d.					
1. A line item description of the waste (include physical characteristics and hazard code)		2. Handling Code for Wastes Listed Above		3. Date	
a. Paint Wash		Kerosene		SI 01 2	
b. Mineral Spirits					
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this assignment are fully and accurately described above by proper shipping name and are classified, packaged, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and governmental regulations, and all applicable State laws/regulations.		Signature <i>Mark A. Stairs</i>		Date 0 8 1 2 8 5	
Printed/Typed Name Mark A. Stairs		Signature <i>Bill Boland</i>		Date 8 1 2 8	
17. Transporter 1 Acknowledgment of Receipt of Materials		Signature <i>Bill Boland</i>		Date	
Printed/Typed Name Bill Boland		Signature		Date	
18. Transporter 2 Acknowledgment of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Date	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.		Signature <i>Joseph McNally</i>		Date 1 9 8 1 2 8 5	
Printed/Typed Name Joseph McNally		Signature		Date	

in case of emergency or spill, immediately call the National Response Center (800) 424-8802

GENERATOR

MA 8019206 COPY>3: GENERATOR-MAILED BY TSDf

COMMONWEALTH OF MASSACHUSETTS
 DEPARTMENT OF ENVIRONMENTAL QUALITY ENGINEERING
 DIVISION OF HAZARDOUS WASTE
 One Winter Street
 Boston, Massachusetts 02108

JUN #
7729-K



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

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator US EPA ID No MA00410217340007	Manifest Document No 0007	2 Page 1 of 1	Information in the shaded areas is not required by Federal law
3 Generator's Name and Mailing Address Samuel Cabot, Inc. 229 Marginal Street Chelsea, MA 02150			A. State Manifest Document Number MA 8019206		
4 Generator's Phone (617) 884-1249			B. State Trans ID SHME		
5 Transporter 1 Company Name Clean Harbors Inc.		6 US EPA ID Number MA0039322250		C. State Trans ID WIEV670139	
7 Transporter 2 Company Name		8 US EPA ID Number		D. Transporter's Phone (617) 585-5111	
9 Designated Facility Name and Site Address Clean Harbors of Braintree Inc. P.O. Box 327, 385 Quincy Ave. Braintree, MA 02184		10 US EPA ID Number MA0053452637		E. State Trans ID	
11. US DOT Description (including Proper Shipping Name, Hazard Class and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt/Vol
a. Waste Flammable Liquid/ H.O.S. Flammable Liquid/UN 1993			No. 00177	Type 03500	G 000
b.					
c.					
d.					
J. Additional Descriptions for Material Listed Above (include physical state and use, if applicable)			K. Handling Codes for Wastes Listed Above		
a. Paint Wash		c. Kerosene		d.	
b. Mineral Spirits		d.		e.	
15. Special Handling Instructions and Additional Information					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this commitment are fully and accurately described above by proper shipping name and are classified, packed, marked, labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations, and all applicable State laws/regulations.					
Printed/Typed Name Mark A. Stairs			Signature		Date 081385
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Bill Boland			Signature Bill Boland		Date 081385
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name			Signature		Date
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name			Signature		Date Month Day Year

In case of emergency or spill, immediately call the National Response Center (800) 424-8802.

GENERATOR-RETAINED BY GENERATOR

MA 8019206 COPY > B: GENERATOR-RETAINED BY GENERATOR

COMMONWEALTH OF MASSACHUSETTS
 DEPARTMENT OF ENVIRONMENTAL QUALITY ENGINEERING
 DIVISION OF HAZARDOUS WASTE
 One Winter Street
 Boston, Massachusetts 02108

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

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator US EPA ID No. MA D Q Q 1 0 2 1 7 3 2 0 0 0 0 8	Manifest Document No.	2 Page 1 of	Information in the shaded areas is not required by Federal law.	
3 Generator's Name and Mailing Address: Sabot Cabot Inc. 229 Marginal Street Chelsea, MA 02150		6 Generator's Phone (617) 884-1249		A State Manifest Document Number MA 8019207		
5 Transporter 1 Company Name Clean Harbors Inc.		7 Transporter 2 Company Name		B State Gen ID		
9 Designated Facility Name and Site Address: Clean Harbors of Braintree Inc. P.O. Box 327, 385 Quincy Ave. Braintree, MA 02184		10 US EPA ID Number MA D Q 3 9 3 2 2 2 5 0		C State Trans ID		
11 US DOT Description Including Proper Shipping Name, Hazard Class and ID Number		12 Containers		D Transporter's Phone (617) 585-5111		
a. Waste Latex Emulsion		No. Type		E State Trans ID		
		1 177 1750		F. Transporter's Phone (617) 849-1800		
b.				G. State Facility's ID Not Required		
c.				H. Facility's Phone ()		
d.				13 Total Quantity		
J. Additional Descriptions for Materials Listed Above (include physical state and hazard code)		K. Handling Codes for Wastes Listed Above		14 Unit Wt/Vol		
a. Non-Hazardous Waste		c. S10L2		15 Waste ID		
b.		d.				
15 Special Handling Instructions and Additional Information 7735-K NON REGULATED MATERIAL						
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations, and all applicable State laws, regulations.						
Printed, Typed Name Mark A. Stairs		Signature <i>Mark A. Stairs</i>		Date 8 1 3 8 5		
17 Transporter 1 Acknowledgement of Receipt of Materials Printed, Typed Name Jon Brugger		Signature <i>Jon Brugger</i>		Date 08 13 85		
18 Transporter 2 Acknowledgement of Receipt of Materials Printed, Typed Name		Signature		Date		
19 Discrepancy Indication Space						
20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed, Typed Name Joseph McNally		Signature <i>Joseph McNally</i>		Date 10 8 13 85		

In case of emergency or spill, immediately call the National Response Center (800) 424-8802.

GENERATOR

TRANSPORTER

FACILITY

MA 8019207 COPY>3: GENERATOR-MAILED BY TSDP

COMMONWEALTH OF MASSACHUSETTS
 DEPARTMENT OF ENVIRONMENTAL QUALITY ENGINEERING
 DIVISION OF HAZARDOUS WASTE
 One Winter Street
 Boston, Massachusetts 02108

JOB NO 7735 K



Please print or type (Form designed for use with 12 pitch typewriter)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator (US EPA ID No.) MA D 0 0 1 0 2 1 7 3 2 0 0 0 0 0		2. Facility (Information in the shaded areas is not required by Federal law)	
3. Generator's Name and Mailing Address Samuel Cabot Inc. 229 Marginal Street Chelsea, MA 02150		6. Manifest (US EPA ID No.) MA D 0 3 9 3 2 2 2 5 0		A. State Hazardous Waste Manifest Number MA 8019207	
4. Generator's Phone () 617 884-1249		8. US EPA ID Number		C. State Trans ID	
5. Transporter (1) Company Name Clean Harbors Inc.		7. Transporter (2) Company Name		D. Transporter's Phone () 617 585-5111	
9. Designation Clean Harbors of Braintree Inc. P.O. Box 327, 385 Quincy Ave. Braintree, MA 02184		10. US EPA ID Number MA D 0 5 3 4 5 2 6 3		E. State Trans ID	
11. US DOT Description Including Proper Shipping Name, Hazard Class, and ID Number		12. Containers		14. Unit Wt/Vol	
a. Waste Latex Emulsion		No. Type		1. Waste No.	
		1 7 97 1750		G	
J. Additional Description (to Material Listed Above (include physical state and hazard code))		K. Handling Codes for Wastes Listed Above			
a. Non-Hazardous Waste		b. c. d.			
15. Special Handling Instructions and Additional Information					
16. GENERATOR CERTIFICATION: I hereby declare that the contents of this shipment are fully and accurately described above by proper shipping name and are classified, packed, marked, labeled, and are in accordance with proper conditions for transport by highway according to applicable international and government regulations, and all applicable State laws and regulations.					
Printed/Typed Name Mark A. Stairs		Signature		Date Month Day Year 8 1 8 5	
17. Transporter (1) Acknowledgment of Receipt of Materials Printed/Typed Name Jan Brugler		Signature <i>Jan Brugler</i>		Date Month Day Year 08 11 85	
18. Transporter (2) Acknowledgment of Receipt of Materials Printed/Typed Name		Signature		Date Month Day Year	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name		Signature		Date Month Day Year	

In case of emergency or spill, immediately call the National Response Center (800) 424-6562

GENERATOR

FACILITY

MA 8019207 COPY > 8: GENERATOR-RETAINED BY GENERATOR

COPY > 8: GENERATOR-RETAINED BY GENERATOR

0052-0200

Approved UMB No. 2000 0404 Expires 7 31 86
 Form 8700 22 (3 84)



State of New Jersey
Department of Environmental Protection
Division of Waste Management
C/O 100, Newark, NJ 07102

ATTN: HOWARD ROUST

Revision 01B (12/84) 2000-0404, Expires 12/31/99

UNIFORM HAZARDOUS WASTE MANIFEST

MANIFEST # 211322272/E

2

NJA0094068

SAMUEL CAROT INC. CAROT FINISH
229 HANSHALL WAY, COLLEEN, MASS 01950
CIT 723-7740

SAME

UTCIC*RF1914

(E.T.C.) ENVIRONMENTAL SERVICES CORP. WINDY HILL RD SEAN NJ DEPS 6321 BK 231

CUI 347-2215

(A E T C) ADVANCED ENVIRON. TECH. CORP.

GOLDMINE RD
FLANDERS, N.J. 07836

WINDY HILL RD SEAN NJ DEPS 6321 BK 231

N/A
201-347-7909

WASTE, FLAMMABLE LIQUID NOS.
FLAMMABLE LIQUID

UN1993 CORNICE FLUORIDE P D001

WASTE, NITRIC ACID (OVER 40%) (EXC 100/154)
OXIDIZER

UN2031 CORNICE FLUORIDE P D001

WASTE, PERSULFURIC ACID (NOT EXC 100/154)
OXIDIZER

UN1873 CORNICE FLUORIDE P D001

WASTE, SODIUM METAL (EXC 100/154)
FLAMMABLE SOLID

UN1428 CORNICE FLUORIDE P D003

Regulations for Waste Manifests

PLC. S/I

PLC. L/I

SOI

SOI

PLC. S/I

PLC. S/R

SOI

SOI

PACKING SLIPS ATTACHED FOR IDENTIFICATION PURPOSES. (TRANS. ONLY)

Signature of Generator

Signature of Transporter

Date of Manifest

HOWARD E. ROUST

Howard E. Roust

08/19/85

THOMAS RAO

Thomas Rao

08/19/85

WALTER G. BUNNELL JR.

Walter G. Bunnell Jr.

08/21/85

3-TSD MAIL TO - GENERATOR

0052-0202

In Case of an emergency or spill immediately call the State the emergency occurred in and the EPA. Do not transport hazardous waste until you have received instructions from the State.

0052-0202

Howard J. Rust

ATTN: HOWARD RUST

RX

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

MAD00102173202932 2

SAMUEL CABOT INC/CABOT STRAINS.
CHELSEA MASS. 01950
ETC.

NJA0094068

SAMIE NJ LIC # 221
NJ DEP 6321BK XF14KW
201-347-2215

NJDX191291584

WASTE DESCRIPTION	UNIT	QTY	CONTAINER	HAZ	PLC	STATE
WASTE, CORROSIVE LIQUID NOS.						
CORROSIVE MATERIAL	UN1760	3	CLW	30	P	D002 NJ
WASTE, POISONOUS LIQUID NOS.						
POISON B	UN2810	2	CF	20	P	X940
WASTE, POISONOUS SOLID NOS.						
POISON B	UN2811	1	CF	5	P	P107 NJ
WASTE, COMBUSTIBLE LIQUID NOS.						
COMBUSTIBLE LIQUID	UN1993	2	CF	20	P	X850 NJ
WASTE, CHEMICALS NOS.						
D.O.T. NON-REGULATED	NONE	1	CF	10	P	X850 NJ

A-PLC. S/C E-PLC. S/T
B-PLC. S/T
C-PLC. S/H (STRONTIUM SULPHIDE)
D-PLC. S/T

A) three (3) SOI
8/21/85
W. Bunnell

PACKING SLIPS ATTACHED FOR CLARIFICATION PURPOSES (TRANS. ONLY)
* X LETTERED NUMBERS PERTAINS TO DE.P. OF NEW JERSEY ONLY (X940 X850)

25. Transporter
Printed Name: THOMAS RYAN
Signature: [Signature]
Date: 08/19/85

26. Discrepancy Indication Space
NOTE: SECT. 28.) LINE B. CORRECT CONTAINER NO. IS ONE AND TOTAL QUANTITY IS 5 LBS. LINE C, CORRECT CONTAINER NO. IS TWO AND TOTAL QUANTITY IS 20 LBS.

COPY > 3: GENERATOR-MAILED BY TSDF

US EPA ARCHIVE DOCUMENT

UNIFORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)

21 Generator's U.S. EPA ID No.

Manifest Identification No.

22 Date of Manifest (fill in shaded areas as required by Federal Regulations)

23 State and EPA Office Number

24 State and EPA Office Number

25 State and EPA Office Number

26 State and EPA Office Number

27 State and EPA Office Number

28 State and EPA Office Number

29 State and EPA Office Number

30 State and EPA Office Number

31 State and EPA Office Number

32 State and EPA Office Number

33 State and EPA Office Number

34 State and EPA Office Number

35 State and EPA Office Number

36 State and EPA Office Number

37 State and EPA Office Number

38 State and EPA Office Number

39 State and EPA Office Number

40 State and EPA Office Number

41 State and EPA Office Number

42 State and EPA Office Number

43 State and EPA Office Number

44 State and EPA Office Number

45 State and EPA Office Number

46 State and EPA Office Number

47 State and EPA Office Number

48 State and EPA Office Number

49 State and EPA Office Number

50 State and EPA Office Number

51 State and EPA Office Number

52 State and EPA Office Number

53 State and EPA Office Number

54 State and EPA Office Number

COPY > 8: GENERATOR-RETAINED BY GENERATOR

MANIFEST FACILITY

22. Transfer to Recipient of Receipt of Materials	Date
Facility Name	Month Day Year
23. Transfer to Recipient of Receipt of Materials	Date
Facility Name	Month Day Year



South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste
2500 East Street, Columbia, SC 29204
Phone: (803) 732-2741
Toll-free: 1-800-368-7228
Hours: 8:00 a.m. - 4:30 p.m., Monday - Friday

Job: T1917

Use Print or Type (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2060-0004 Page 1

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No N A D 0 0 1 0 2 1 3 3 2	Manifest Date 0 5 0 8 1 5 6
3. Generator's Name and Mailing Address Samuel Cabot, Inc. 229 Marginal St., Chelsea, MA 02150		4. Generator's Phone (617) 884-1249	5. Transporter 1 Company Name Clean Harbors
6. Designated Facility Name and Site Address GSX - Pinewood Route 1, Box 255 Pinewood, SC 29125		7. Transporter 1 US EPA ID Number M A D 0 3 9 3 2 2 2 5 0	8. Transporter 1 State Facility's ID N/A
9. Designated Facility US EPA ID Number B C D 0 7 0 3 7 5 9 8 5		10. Designated Facility State Facility's ID N/A	11. Designated Facility Phone (803) 452-5003

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit Wt./Vol	15. Waste No.
	No.	Type			
a. Waste Flammable Solid N.O.S. UN 1325	18	DRM	4100	P	011
b.					
c.					
d.					

16. Additional Descriptions for Materials Listed Above

17. Handling Codes for Wastes Listed Above

18. Other - 48641

I hereby certify that the contents of this manifest are fully and accurately described above by proper shipping name and are in close bulk packaging in proper condition for transport by highway according to applicable international and national government regulations and State laws.

I am a generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3022(b) of RCRA, or I am a transporter who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3022(b) of RCRA, or I am a facility that has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3022(b) of RCRA, and I have selected the method of treatment, storage, and disposal of the waste in accordance with the best available technology, taking into account the degree of protection of human health and the environment.

19. Generator's Name Samuel Cabot, Inc.	Signature Mark A. Stone	Date 09/18/85
20. Transporter 1 Name Kevin J. Hill	Signature Kevin J. Hill	Date 09/18/85
21. Transporter 2 Name	Signature	Date
22. Volume and Identification Specs	a. 2100 (80) lbs. c.	
	b. lbs. d.	

23. Facility Operator/Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19

Name of Facility Operator
Hilde Brannick

Signature
Hilde Brannick

Date
09/20/85



South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste
 2000 Bull Street, Columbia, SC 29201
 Phone: (803) 732-3331
 Fax: (803) 732-3332

3500 print or type (Form designed for use on elite (12-pitch) typewriter.)

Form Approved OMB No. 2000-0404 Page 1

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. N.A. DO 0110 2111 2110 0101 Manifest Exemption Code 1

2. Generator's Name and Facility Address
Samuel Cabot, Inc.
229 Marginal St., Chelsea, MA 02150

3. Generator's Phone (617) 884-1249

4. Transporter 1 Company Name Clean Harbors US EPA ID Number MA 0101 31 21 21 51 0

5. Transporter 2 Company Name Clean Harbors US EPA ID Number MA 0101 31 21 21 51 0

6. Designated Facility Name and Site Address
CSX - Pinewood
Route 1, Box 255
Pinewood, SC 29125 US EPA ID Number SC 0101 71 01 31 51 91 31 51

7. State of Origin MA State of Destination SC

8. State Transporter's ID N/A

9. State Generator's ID N/A

10. State Transporter's ID N/A

11. State Facility's ID N/A

12. Transporter's Phone 617-585-1111

13. State Transporter's Phone NH. 831557

14. Facility's Phone (803) 452-5003

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit (A/Vol)	1. Waste No.
	No.	Type			
a. <u>Waste Flammable Solid N.O.S. UN 1325</u>	<u>18</u>	<u>0 D M</u>	<u>40000</u>	<u>P</u>	<u>D 00 1</u>
b.					
c.					
d.					

9. Material Descriptions for Materials Listed Above

10. Handling Codes for Wastes Listed Above

11. 0 1 8 3 8 12. 4 4 0 1

Order # 49153
T-2020

I, the undersigned, hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, labeled and in proper condition for transport by highway according to applicable international and national government regulations and State laws.

I, the undersigned, Generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(f) of RCRA, I have certified that the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, and disposal which minimizes the present and future threat to human health and the environment.

Generator's Name: Samuel Cabot, Inc. Signature: Mark A. Stairs Date: 10/07/85

Transporter 1 Acknowledgment or Receipt of Materials: MARK OUELLETTE Signature: Mark Ouellette Date: 10/07/85

Transporter 2 Acknowledgment or Receipt of Materials: _____ Signature: _____ Date: _____

Emergency Response: _____

Generator's Certification of receipt of hazardous materials covered by this manifest except as noted in item 1b: _____

Signature: Hope Barwick Date: 11/01/85

US EPA ARCHIVE DOCUMENT



South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste
 2400 Bull Street, Columbia, SC 29204
 Phone: (803) 732-5611
 Telefax: (803) 732-5611

3550 Print of type (Form designed for use on 4110 (12-pitch) typewriter)

Form Approved OMB No. 2000-0104

1. Generator's US EPA ID No. Manifest Location of this Manifest		2. Paper 1 (Initials)	
UNIFORM HAZARDOUS WASTE MANIFEST Generator's Name and Mailing Address: Samuel Cabot, Inc. 229 Marginal St., Chelsea, MA 02150		3. State Manifest System N/A	
4. Generator's Phone (617) 884-1249 Transporter 1 Company Name		5. US EPA ID Number	
Clean Harbors		6. State Transporter's ID N/A	
7. Transporter 2 Company Name		7. US EPA ID Number	
8. Designated Facility Name and Site Address		9. US EPA ID Number	
CSX - Pinewood Route 1, Box 255 Pinewood, SC 29125		10. State Transporter's Phone 617-582-1111	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	
a. Waste Flammable Solid N.O.S. UN 1325		13. Total Quantity	
b.		14. Unit (L/HA)	
c.		15. Waste No.	
d.		16. Handling Codes for Wastes Listed	

Form Order 49153
 7-2020

I hereby declare that the contents of this commitment are fully and accurately described above by proper shipping name and are classified, packaged, labeled and properly conditioned for transport by highway according to applicable international and national government regulations and State laws.

Signature: *Mark A. Staris* Date: 10/07/85

Signature: *N. Ouellette* Date: 10/17/85

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

US EPA ARCHIVE DOCUMENT



South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste
 2600 Bull Street, Columbia, SC 29204
 Phone: (803) 738-5881
 Emergency & Mailday: (803) 738-5881

Print or type. (Form designed for use on elite (12-pitch) typewriter.) Form Approved OMB No. 2000-0404 Expires 12/31/99

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MAID 001 02117 1321	Manifest Document No. 0000111	2. Page 1 of 1	Information in the manifest is true and correct.
3. Generator's Name and Mailing Address Samuel Cabot, Inc. 229 Marginal St., Chelsea, MA 02150			A. State Manifest Document Number N/A		
4. Generator's Phone (617) 884-1249 Transporter 1 Company Name Clean Harbors			B. State Generator's ID N/A		
7. Transporter 2 Company Name			C. State Transporter's ID N/A		
6. US EPA ID Number MAD 03 9322250			D. Transporter's Phone 617-585-5111		
8. US EPA ID Number			E. State Transporter's ID N/A 8315ST		
9. Designated Facility Name and Site Address G5X - Pinewood Route 1, Box 255 Pinewood SC 29125			F. Transporter's Phone		
10. US EPA ID Number SIC 27102759815			G. State Facility's ID		
			H. Facility's Phone (803) 452-5903		

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit (M/W)	15. Waste No.
	No.	Type			
a. Waste Flammable Solid N.O.S. UN 1325	180	DM	410 10 0 10	P	LD:01011
b.					
c.					
d.					

J. Additional Descriptions for Materials Listed Above	K. Handling Codes for Wastes Listed Above
a. P.W - 01838 - 4401	
b.	
c.	
d.	

S.C. Work Order - 49454

730-84

I, the undersigned, hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, labeled and marked in proper condition for transport by highway according to applicable international and national government regulations and State laws.

Printed Name Mark A. Stairs	Signature <i>Mark A. Stairs</i>	Month Day Year 1 02 2185
Printed Name HENRY C. OUELLETTE	Signature <i>Henry C. Ouellette</i>	Month Day Year 1 02 2185
Printed Name	Signature	Month Day Year

18. Discrepancy Indication Space

a. 195.00 lbs. c. _____

b. _____ lbs. d. _____

Printed/Typed Name ETHEL K. SLATER	Signature <i>Ethel K. Slater</i>	Month Day Year 1 02 2185
---------------------------------------	-------------------------------------	-----------------------------



South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste
2620 Bull Street, Columbia, SC 29204
Phone: (803) 732-5661
Emergency & Holidays: (803) 732-5661

Use plain print or type. (Form designed for use on nine (12-pitch) typewriter.)

Form Approved OMB No. 2000-0404 Expires 11/31/99

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. MAD00102173121000111		Manifest Document No. 0000111		2. Page 1 of 1		Information in the Manifest	
3. Generator's Name and Mailing Address Samuel Cabot, Inc. 229 Marginal St., Chelsea, MA 02150				A. State Manifest Document Number N/A		B. State Generator's ID N/A		C. State Transporter's ID N/A	
4. Generator's Phone (617) 884-1249		6. US EPA ID Number MAD039322250		D. Transporter's Phone 617-585-5111		E. State Transporter's ID N/A 83557		F. Transporter's Phone	
7. Transporter 2 Company Name Clean Harbors		8. US EPA ID Number		G. State Facility's ID		H. Facility's Phone (803) 452-6002			
9. Designated Facility Name and Site Address G5X - Pinewood Route 1, Box 255 Pinewood, SC 29125				10. US EPA ID Number SC000793759915		11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	
a. Waste Flammable Solid N.O.S. UN 1325		b. UN 1325		c. UN 1325		d. UN 1325		13. Total Quantity 410 10 0 10	
14. Unit (W/V/Wt)		15. Waste No.		16. Waste No.		17. Waste No.		18. Waste No.	
P		D:01011							
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above					
a. P:W - [0,1,8,3,8] - [44,0,1]		c. [] - [] - []		b. [] - [] - []		d. [] - [] - []			
19. Discrepancy Indication Space									
a. 19500 lbs.		b. 19500 lbs.		c. 19500 lbs.		d. 19500 lbs.			
20. Facility, Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.				Printed/Typed Name ETHEL K. SLATER		Signature <i>Ethel K Slater</i>		Month Day Year 10 24 85	

S.C. Work Order - 49454

T 2084

US EPA ARCHIVE DOCUMENT



South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.
207 Bull Street, Columbia, SC 29201
Phone: (803) 734-7601
Emergency & Pollution: (803) 734-1111

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

Form Approved OMB No. 2000-0404 Expires 7-31-86

UNIFORM HAZARDOUS WASTE MANIFEST		1 Generator's (USEPA ID No.) Manifest Document No. MAD 001010211732 000111		2 Page 1 of Information in the shaded areas is not required by Federal law, but is by State law.	
3 Generator's Name and Mailing Address Samuel Cabot, Inc. 229 Marginal St., Chelsea, MA 02150				A State Manifest Document Number N/A	
4 Generator's Phone (617) 884-1249		6 US EPA ID Number		C State Transporter's ID N/A	
5 Transporter 1 Company Name Clean Harbors		7 Transporter 2 Company Name		D Transporter's Phone 617-585-5111	
8 US EPA ID Number		8 US EPA ID Number		E State Transporter's ID N/A 836557	
9 Designated Facility Name and Site Address G5X - Pinewood Route 1, Box 255 Pinewood, SC 29125		10 US EPA ID Number SCD 07103759815		F Transporter's Phone G State Facility's ID H Facility's Phone (803)452-5003	
11 US UGT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12 Containers		13 Total Quantity
a. Waste Flammable Solid N.O.S. UN 1325			No.	Type	14 Unit
					15 Waste No.
			180	DIM	410 100 10 P
b.					
c.					
d.					
J Additional Descriptions for Materials Listed Above				K Handling Codes for Wastes Listed Above	
a. [P,W] - [0,1,8,3,8] - [440,1]				c. [] - [] - []	
b. [] - [] - []				d. [] - [] - []	
15 Special Handling Instructions and Additional Information S.C. Work Order - 49454					
16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this assignment are truly and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway, according to applicable international and national government regulations and State laws. I understand a small quantity generator or who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 302(b) of RCRA. I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.					
Printed/Typed Name Mark A. Stairs		Signature <i>Mark A. Stairs</i>		Month Day Year 1 0 2 1 2 8 5	
17 Transporter 1 Acknowledgment of Receipt of Materials				Date	
Printed/Typed Name HENRY C. COUETTE		Signature <i>Henry C. Couette</i>		Month Day Year 1 9 1 3 1 5	
18 Transporter 2 Acknowledgment of Receipt of Materials				Date	
Printed/Typed Name		Signature		Month Day Year	
19 Discrepancy Indication Space					
a. [] lbs. c. [] lbs.					
b. [] lbs. d. [] lbs.					
20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name		Signature		Month Day Year	

US EPA ARCHIVE DOCUMENT

FILE #21732B

DATE: 6/12/85 (Revised)

SCA CHEMICAL SERVICES (MA) INC.

AN SCA SERVICES CO.

385 Quincy Avenue
Braintree, Massachusetts 02184
(617) 849-1800
1-800-225-1863



QUOTATION AND INSTRUCTIONS

CUSTOMER		GENERATOR/TITLE/INSTRUCTIONS
Company	SAMUEL CABOT, INC.	
Address	229 Marginal Street	
City	Chelsea	
State/Zip	MA 02150	
Contact	Mark Stairs	
Telephone	(617) 723-7740	
EPA ID#	MAD001021732	

P.O.# _____ Sales Rep: Jon Ocksrider Reviewed by: *GL*

Codes and prices based on: WPS forms submitted 2/7/84.

Material/Specifications/Description (Include DOT Shipping Name if available)	Phys. State	EPA HW #	SCA Code PINWOOD	Price
Waste Paint Solids	S	D001	1838-4401	\$46.00/drum
Waste Oily Solids	S	M001	1838-4101	\$46.00/drum
Waste Creosote Solids	S	D001	1838-4102	\$46.00/drum

NOTE: No free liquid, no more than 1" of void space in drum.

DIRECT SHIPMENT TO PINWOOD, SC includes Federal and State hazardous waste tax.

MINIMUM DISPOSAL BILLING: \$600.00

TRANSPORTATION PRICE-PER HOUR: -- /hour
 Vehicle: 4 Hour Minimum, Portal to Portal
 Type: Carbon Steel Steel Other
 Normal Quantity: 40,000 lbs. PRICE-FLAT RATE: \$2,030.00/trip
 One Hour Loading/Unloading Allowed
 Excess Site Time -- /hour

GENERAL CONDITIONS:

- Prices firm for 30 days, may be revised by distribution of price sheets. TERMS: Net 30 days, after credit is approved.
- Materials subject to additional charges if not per the listed or attached specifications.
- Materials not listed above cannot be shipped. Please discuss other materials with customer service or your sales representative.
- The customer is responsible for additional costs incurred by SCA from loading or unloading delays due to solids or other off-specifications, frozen loads, overweight loads, etc.

US EPA ARCHIVE DOCUMENT



**SOVENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.**

P.O. BOX 362
WATERBURY, CONN. 06709
TEL: (203) 626-8084

CABOT STAIN

**229 MARGINAL STREET
CHELSEA**

**MA 02150
ATTN: MR. MARK STAIRS**

DISPOSAL QUOTATION

**DATE: 5/28/85
Laboratory # 006639-GD**

SRS is pleased to inform you that the data/sample submitted for disposal has been approved. Our environmental review of Federal, State and Local regulations allows us to properly dispose of this waste. Our State permit numbers are as follows: CT DEP #CT-HW-148, NJ DEP #2009C. Our EPA I.D. numbers are as follows: Connecticut, CTD 009 717 604; New Jersey, NJD 002 182-897.

Product identification number (PIN) must appear on all purchase orders, manifest, bills of lading and drums.

PIN	Waste Description	Unit	Disp. Price	Annual Volume	Shipping Frequency
006639-GD	FLAMMABLE SOLID NOS SOLIDIFIED OIL STAINS, PIGMENTS	55 GAL DR	80.00/D	600	AS NEEDED

TRANSPORTATION:	1 -28	29 -50	51 -65	66 -80
Pickup	\$ 315	\$ 355	\$ 390	\$ 430

**SRS TRANSPORTATION SUBJECT TO:
\$ 35/HR. DETENTION CHARGE. ONE HOUR FREE TIME.**

ALL SHIPMENTS MUST BE ACCOMPANIED BY AN APPROPRIATE STATE MANIFEST.

TERMS: NET 15 DAYS

All shipments must comply with 40 CFR Part 262, Subpart C for disposal and 49 CFR Part 100-177 for transportation.

Price quoted is a trial price based on data/sample submitted. Material not in compliance with the Hazardous Waste Data Sheet and/or sample submitted and beyond the limits of our normal capacity, may be unacceptable or incur additional charges. SRS will always advise of any discrepancy prior to taking action. Prices are firm for 30 days.

To place order contact sales order clerk for scheduling at above telephone number.

022

Stephen P. Jank

Stephen P. Jank
Manager, Marketing & Sales



**SOLENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.**
P.O. BOX 502
CANTONVILLE, CT 06029
Telephone: (203) 675-8664

CABOT STAIN

229 MARGINAL STREET
CHELSEA
MA 02150
ATTN: MR. MARK STAIRS

DISPOSAL QUOTATION

DATE: 5/15/85
Laboratory # 009429-FB

SRS is pleased to inform you that the data/sample submitted for disposal has been approved. Our environmental review of Federal, State and Local regulations allows us to properly dispose of this waste. Our State permit numbers are as follows: CT DEP #CT-HW-148, NJ DEP #2009C. Our EPA I.D. numbers are as follows: Connecticut, CTD 009 717 604; New Jersey, NJD 002 182-897.

Product identification number (PIN) must appear on all purchase orders, manifest, bills of lading and drums.

PIN	Waste Description	Unit	Disp. Price	Annual Volume	Shipping Frequency
009429-FB	COMBUSTIBLE LIQ NOS (OIL, NAPHTHA)	BULK	.20/G	6800	ONE TIME

TRANSPORTATION: -TT
Pickup \$ 430

SRS TRANSPORTATION SUBJECT TO:

\$ 35/HR. DETENTION CHARGE. ONE HOUR FREE TIME.
\$500 PUMP BREAKAGE CHARGE IF ATTRIBUTABLE TO CUSTOMER'S WASTE.

ALL SHIPMENTS MUST BE ACCOMPANIED BY AN APPROPRIATE STATE MANIFEST.

TERMS: NET 15 DAYS

All shipments must comply with 40 CFR Part 262, Subpart C for disposal and 49 CFR Part 100-177 for transportation.

Price quoted is a trial price based on data/sample submitted. Material not in compliance with the Hazardous Waste Data Sheet and/or sample submitted and beyond the limits of our normal capacity, may be unacceptable or incur additional charges. SRS will always advise of any discrepancy prior to taking action. Prices are firm for 30 days.

To place order contact sales order clerk for scheduling at above telephone number.

022



Stephen P. Jank
Manager, Marketing & Sales



**SOVENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.**

PO BOX 302
WATERBURY CONNECTICUT 06489
TELEPHONE (203) 629 8084

CABOT STAIN

229 MARGINAL STREET
CHELSEA

MA 02150

ATTN: MR. MARK STAIRS

DISPOSAL QUOTATION

DATE: 5/15/85

Laboratory # 006643-FB

SRS is pleased to inform you that the data/sample submitted for disposal has been approved. Our environmental review of Federal, State and Local regulations allows us to properly dispose of this waste. Our State permit numbers are as follows: CT DEP #CT-HW-148, NJ DEP #2009C. Our EPA I.D. numbers are as follows: Connecticut, CTD 009 717 604; New Jersey, NJD 002 182-897.

Product identification number (PIN) must appear on all purchase orders, manifest, bills of lading and drums.

PIN	Waste Description	Unit	Disp. Price	Annual Volume	Shipping Frequency
006643-FB	FLAMMABLE LIQUID NOS KEROSENE, MINERAL SPIRITS	BULK	.15/G	3000	AS NEEDED

TRANSPORTATION: -TT
Pickup \$ 430

SRS TRANSPORTATION SUBJECT TO:

- \$ 35/HR. DETENTION CHARGE. ONE HOUR FREE TIME.
- \$500 PUMP BREAKAGE CHARGE IF ATTRIBUTABLE TO CUSTOMER'S WASTE.
- \$ 85/HR. VACUUM TRUCK RENTAL CHARGE, IF REQUESTED.
- ALL SHIPMENTS MUST BE ACCOMPANIED BY AN APPROPRIATE STATE MANIFEST.

TERMS: NET 15 DAYS

All shipments must comply with 40 CFR Part 262, Subpart C for disposal and 49 CFR Part 100-177 for transportation.

Price quoted is a trial price based on data/sample submitted. Material not in compliance with the Hazardous Waste Data Sheet and/or sample submitted and beyond the limits of our normal capacity, may be unacceptable or incur additional charges. SRS will always advise of any discrepancy prior to taking action. Prices are firm for 30 days.

To place order contact sales order clerk for scheduling at above telephone number.

022

Stephen P. Jank
Manager, Marketing & Sales



**SOLVENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.**
1207 WASHINGTON STREET
MILFORD, CT 06460
TEL: (203) 228-8084

CABOT STAIN

**229 MARGINAL STREET
CHELSEA**

**MA 02150
ATTN: MR. MARK STAIRS**

DISPOSAL QUOTATION

**DATE: 5/15/85
Laboratory # 00942B-FB**

SRS is pleased to inform you that the data/sample submitted for disposal has been approved. Our environmental review of Federal, State and Local regulations allows us to properly dispose of this waste. Our State permit numbers are as follows: CT DEP #CT-HW-148, NJ DEP #2009C. Our EPA I.D. numbers are as follows: Connecticut, CTD 009 717 604; New Jersey, NJD 002 182-897.

Product identification number (PIN) must appear on all purchase orders, manifest, bills of lading and drums.

PIN	Waste Description	Unit	Disp. Price	Annual Volume	Shipping Frequency
00942B-FB	COMBUSTIBLE LIQ NOS (WASTE OIL)	BULK	.20/G	6683	ONE TIME

TRANSPORTATION: -TT
Pickup \$ 430

SRS TRANSPORTATION SUBJECT TO:
 \$ 35/HR. DETENTION CHARGE. ONE HOUR FREE TIME.
 \$500 PUMP BREAKAGE CHARGE IF ATTRIBUTABLE TO CUSTOMER'S WASTE.
 \$ 85/HR. VACUUM TRUCK RENTAL CHARGE, IF REQUESTED.
 ALL SHIPMENTS MUST BE ACCOMPANIED BY AN APPROPRIATE STATE MANIFEST.

TERMS: NET 15 DAYS

All shipments must comply with 40 CFR Part 262, Subpart C for disposal and 49 CFR Part 100-177 for transportation.

Price quoted is a trial price based on data/sample submitted. Material not in compliance with the Hazardous Waste Data Sheet and/or sample submitted and beyond the limits of our normal capacity, may be unacceptable or incur additional charges. SRS will always advise of any discrepancy prior to taking action. Prices are firm for 30 days.

To place order contact sales order clerk for scheduling at above telephone number.

022

Stephen P. Jank
 Manager, Marketing & Sales

US EPA ARCHIVE DOCUMENT



**SOLVENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.**

P.O. BOX 362
SOUTHINGTON, CONN. 06489

PHONE (203) 628-8084

CABOT STAIN

229 MARGINAL STREET
CHELSEA

MA 02150

ATTN: MR. MARK STAIRS

DISPOSAL QUOTATION

DATE: 9/23/85

Laboratory #006639-GD

SRS is pleased to inform you that the data/sample submitted for disposal has been approved. Our environmental review of Federal, State and Local regulations allows us to properly dispose of this waste. Our State permit numbers are as follows: CT DEP #CT-HW-148, NJ DEP #2009C. Our EPA I.D. numbers are as follows: Connecticut, CTD 009 717 604; New Jersey, NJD 002 182-897.

Product identification number (PIN) must appear on all purchase orders, manifest, bills of lading and drums.

PIN	Waste Description	Unit	Disp. Price	Annual Volume	Shipping Frequency
006639-GD	FLAMMABLE SOLID NOS SOLIDIFIED OIL STAINS, PIGMENTS REF: 57-A WASTE MUST BE SOLIDIFIED & STABILIZED PRIOR TO SHIPMENT TO SRGNE.	UN1325 55 GAL DR	95.00/D	600	AS NEEDED
TRANSPORTATION:					
Pickup	1 -28	29 -50	51 -65	66 -80	
	\$ 315	\$ 355	\$ 390	\$ 430	

SRS TRANSPORTATION SUBJECT TO:
\$ 35/HR. DETENTION CHARGE. ONE HOUR FREE TIME.

ALL SHIPMENTS MUST BE ACCOMPANIED BY AN APPROPRIATE STATE MANIFEST.

TERMS: NET 15 DAYS

All shipments must comply with 40 CFR Part 262, Subpart C for disposal and 49 CFR Part 100-177 for transportation.

Price quoted is a trial price based on data/sample submitted. Material not in compliance with the Hazardous Waste Data Sheet and/or sample submitted and beyond the limits of our normal capacity, may be unacceptable or incur additional charges. SRS will always advise of any discrepancy prior to taking action. Prices are firm for 30 days.

To place order contact sales order clerk for scheduling at above telephone number.

IN ADDITION TO PIN AND DOT WASTE DESCRIPTION AS ABOVE, MANIFEST MUST SHOW HAZARD CLASS FLAMMABLE AND WASTE # D001

022

Stephen P. Lamb
Sales Order Clerk

0052-0235



**SOLVENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.**

P.O. BOX 362
SOUTHINGTON, CONN 06489

PHONE (203) 628-8084

CABOT STAIN

229 MARGINAL STREET
CHELSEA
MA 02150
ATTN: MR. MARK STAIRS

DISPOSAL QUOTATION

DATE: 9/19/85
Laboratory # 006643-FB

SRS is pleased to inform you that the data/sample submitted for disposal has been approved. Our environmental review of Federal, State and Local regulations allows us to properly dispose of this waste. Our State permit numbers are as follows: CT DEP #CT-HW-148, NJ DEP #2009C. Our EPA I.D. numbers are as follows: Connecticut, CTD 009 717 604; New Jersey, NJD 002 182-897.

Product identification number (PIN) must appear on all purchase orders, manifest, bills of lading and drums.

PIN	Waste Description	Unit	Disp. Price	Annual Volume	Shipping Frequency
006643-FB	FLAMMABLE LIQUID NOS KEROSENE, MINERAL SPIRITS REF: BF	UN1993 BULK	.17/G	3000	AS NEEDED

TRANSPORTATION:
Pickup -TT
\$ 430

SRS TRANSPORTATION SUBJECT TO:

- \$ 35/HR. DETENTION CHARGE. ONE HOUR FREE TIME.
- \$500 PUMP BREAKAGE CHARGE IF ATTRIBUTABLE TO CUSTOMER'S WASTE.
- \$ 85/HR. VACUUM TRUCK RENTAL CHARGE, IF REQUESTED.
- ALL SHIPMENTS MUST BE ACCOMPANIED BY AN APPROPRIATE STATE MANIFEST.

TERMS: NET 15 DAYS

All shipments must comply with 40 CFR Part 262, Subpart C for disposal and 49 CFR Part 100-177 for transportation.

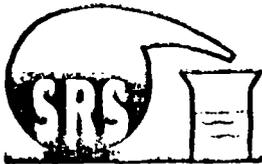
Price quoted is a trial price based on data/sample submitted. Material not in compliance with the Hazardous Waste Data Sheet and/or sample submitted and beyond the limits of our normal capacity, may be unacceptable or incur additional charges. SRS will always advise of any discrepancy prior to taking action. Prices are firm for 30 days.

To place order contact sales order clerk for scheduling at above telephone number.

IN ADDITION TO PIN AND DOT WASTE DESCRIPTION AS ABOVE, MANIFEST MUST SHOW HAZARD CLASS FLAMMABLE AND WASTE # D001

022

Stephen P. Jank
Manager, Marketing & Sales



**SOLVENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.**

P.O. BOX 362
SOUTH BRIDGE FORT COMMONS 06489
PHONE (203) 628 8081

CABOT STAIN

229 MARGINAL STREET
CHELSEA
MA 02150
ATTN: MR. MARK STAIRS

DISPOSAL QUOTATION

DATE: 9/19/85
Laboratory # 009429-FB

SRS is pleased to inform you that the data/sample submitted for disposal has been approved. Our environmental review of Federal, State and Local regulations allows us to properly dispose of this waste. Our State permit numbers are as follows: CT DEP #CT-HW-148, NJ DEP #2009C. Our EPA I.D. numbers are as follows: Connecticut, CTD 009 717 604; New Jersey, NJD 002 182-897.

Product identification number (PIN) must appear on all purchase orders, manifest, bills of lading and drums.

PIN	Waste Description	Unit	Disp. Price	Annual Volume	Shipping Frequency
009429-FB	COMBUSTIBLE LIQUID NOS (OIL, NAPHTHA)	NA1993 BULK	.25/G	6800	ONE TIME

TRANSPORTATION:
Pickup -TT
\$ 430

SRS TRANSPORTATION SUBJECT TO:

\$ 35/HR. DETENTION CHARGE. ONE HOUR FREE TIME.
\$500 PUMP BREAKAGE CHARGE IF ATTRIBUTABLE TO CUSTOMER'S WASTE.

ALL SHIPMENTS MUST BE ACCOMPANIED BY AN APPROPRIATE STATE MANIFEST.

TERMS: NET 15 DAYS

All shipments must comply with 40 CFR Part 262, Subpart C for disposal and 49 CFR Part 100-177 for transportation.

Price quoted is a trial price based on data/sample submitted. Material not in compliance with the Hazardous Waste Data Sheet and/or sample submitted and beyond the limits of our normal capacity, may be unacceptable or incur additional charges. SRS will always advise of any discrepancy prior to taking action. Prices are firm for 30 days.

To place order contact sales order clerk for scheduling at above telephone number.

IN ADDITION TO PIN AND DOT WASTE DESCRIPTION AS ABOVE, MANIFEST MUST SHOW HAZARD CLASS COMBUSTIBLE AND WASTE # N/A

022

Stephen P. Jank
Stephen P. Jank
Manager, Marketing & Sales



**SOLVENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.**

P.O. BOX 362
SOUTHINGTON, CONN. 06489

PHONE (203) 628 8084

CABOT STAIN

229 MARGINAL STREET
CHELSEA
MA 02150
ATTN: MR. MARK STAIRS

DISPOSAL QUOTATION

DATE: 9/19/85
Laboratory # 009428-FB

SRS is pleased to inform you that the data/sample submitted for disposal has been approved. Our environmental review of Federal, State and Local regulations allows us to properly dispose of this waste. Our State permit numbers are as follows: CT DEP #CT-HW-148, NJ DEP #2009C. Our EPA I.D. numbers are as follows: Connecticut, CTD 009 717 604; New Jersey, NJD 002 182-897.

Product identification number (PIN) must appear on all purchase orders, manifest, bills of lading and drums.

PIN	Waste Description	Unit	Disp. Price	Annual Volume	Shipping Frequency
009428-FB	COMBUSTIBLE LIQUID NOS (WASTE OIL)	NA1993 BULK	.25/G	6683	ONE TIME

TRANSPORTATION:
Pickup -TT
\$ 430

SRS TRANSPORTATION SUBJECT TO:

- \$ 35/HR. DETENTION CHARGE. ONE HOUR FREE TIME.
- \$500 PUMP BREAKAGE CHARGE IF ATTRIBUTABLE TO CUSTOMER'S WASTE.
- \$ 85/HR. VACUUM TRUCK RENTAL CHARGE, IF REQUESTED.
- ALL SHIPMENTS MUST BE ACCOMPANIED BY AN APPROPRIATE STATE MANIFEST.

TERMS: NET 15 DAYS

All shipments must comply with 40 CFR Part 262, Subpart C for disposal and 49 CFR Part 100-177 for transportation.

Price quoted is a trial price based on data/sample submitted. Material not in compliance with the Hazardous Waste Data Sheet and/or sample submitted and beyond the limits of our normal capacity, may be unacceptable or incur additional charges. SRS will always advise of any discrepancy prior to taking action. Prices are firm for 30 days.

To place order contact sales order clerk for scheduling at above telephone number.

IN ADDITION TO PIN AND DOT WASTE DESCRIPTION AS ABOVE, MANIFEST MUST SHOW HAZARD CLASS COMBUSTIBLE AND WASTE # N/A

022

Stephen P. Jank
Manager, Marketing & Sales

Clean Harbors

OF NATICK, INC.

September 17, 1985

Samuel Cabot, Inc.
229 Marginal Street
Chelsea, MA 02151

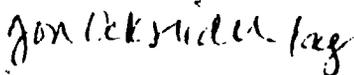
Attn: Mr. Mark Stairs, Plant Supt.

Dear Mark:

GSX, Pinewood, S.C. has had a significant price increase concerning your waste paint solids effective July 1, 1985. In addition, the South Carolina tax was increased from \$7.50 per ton to \$18.00 per ton. Therefore, your cost for disposal is increased from \$46.00 per 55 gallon drum to \$63.00 per 55 gallon drum, effective immediately. Transportation will remain at \$2,030.00 per load.

Clean Harbors, Inc. will absorb any losses incurred from July 1, 1985 to September 17, 1985.

Sincerely,



Jon Ocksrider
Technical Representative

JO/aag

cc: G. Curtis
Acc't.

NATICK
617-655-8863

5 STRATHMORE ROAD • NATICK, MA 01760

BOSTON
617-431-7942

0052-0239

AUG. 13, 1985

SAMUEL CORSET, INC.

~~CORSET CORP. - STAIRS~~

Attention: MONK STAIRS

Dear MR. STAIRS

Advanced Environmental Technology Corporation is pleased to submit an itemized estimate for the packaging, transportation and proper disposal of the hazardous materials located at _____

This estimate is based upon YOUR MATERIALS LIST + MY REVIEW

Disposal of these materials involves several activities, these include:

- o Classification of the materials (DOT Hazard Class).
- o Segregation as to compatibility, hazard class and disposal requirements.
- o Packaging, according to DOT (49 CFR), overpacking, when required and/or directly into 55-gallon drums for transportation compliance and handling.
- o Drafting packing slips, listing materials packed in each drum.
- o Proper labeling, according to State and Federal (RCRA) Regulations.
- o Completion of associated documentation, manifests and shipping documents.
- o Ultimate disposal at a Licensed Class I-A Chemical Secure Landfill, Incinerator or Chemical Treatment Facility.

Regarding the waste specified in this quotation, AETC has the appropriate permits for and will accept the materials which you, the generator, will be shipping. All work performed will be in strict compliance with all Federal, State and Local Regulations.

The customer, SAMUEL CORSET CORP. ~~(CORSET CORP.)~~ must also comply with all applicable sections of the Federal RCRA (Section 261) on Standards for Generating, as well as State and Local Regulations, regarding this activity.

AETC will not accept improperly identified and/or unidentified materials.

SAMUEL COOPER INC.

~~CARSON Corp.~~

Disposal

- OR (3) 55-gallon Packaged Laboratory Chemicals
DOT Regulated Hazardous Materials @ \$109.50/drum \$ ~~1250~~ 328.50
- (3) Incineration of Organic Laboratory Chemicals
@ \$155.00/drum (\$ 465.00)
- (4) Overpacks @ \$41.00/each \$ 164.00
- () Drummed Chemicals (bulk solids) @ \$72.00/drum \$ _____
- () Solid Poison Materials @ \$82.00/drum \$ _____
- () Non-Chlorinated Solvents @ \$52.00/drum \$ _____
- () Chlorinated Solvents @ \$117.00/drum \$ _____
- () Non-usable and Non-recoverable Solvents/Sludges
@ \$ _____/drum \$ _____
- () Other

Manpower (2 Hour Minimum On-Site)

- (1) Technical Supervisor @ \$39.50/hour
(2) Hours on-site & travel time \$ 79.00
- (1) Technical Assistant(s) @ \$36.00/hour
(2) Hours on-site & travel time \$ 72.00
- () Technical Coordinator @ \$39.50/hour
() Hours on-site & travel time \$ _____

Vehicle Service Charge

- Portal to Portal (Minimum 40 Miles) FLANDERS-Aspen-FLANDERS
() Miles @ \$1.50/mile (Field Crew) \$ 550.00
- Portal to Portal (Minimum 40 Miles)
() Miles @ \$1.25/mile (Technical Coordinator) \$ _____

Materials

- (3) DOT 17-H Reconditioned Steel Drums
@ \$26.65/drum \$ 79.95

Carot stains

- () DOT 17-E New Drums @ \$39.85/drum \$ _____
- () DOT 15-A Wooden Boxes @ \$6.25/box \$ 25.00
- () DOT 12-B-30 Fiber Boxes @ \$1.45/box \$ _____
- () DOT 12-A-50 Fiber Boxes @ \$1.95/box \$ _____
- () DOT 30-gallon Fiber Drums @ \$10.40/drum \$ _____
- (6) Bags of Vermiculite Packaging Material
3 cubic foot bags @ \$6.95/bag \$ 41.70

LTL Storage and Handling - TSDF

- (3) Drums @ \$32.00/drum \$ 96.00
- () Drums @ \$ _____ /drum \$ _____

Freight - From AETC's TSDF to:

- (3) Drums @ \$18.49 /drum *Cecos-Landfill* \$ 55.47
- OR (3) Drums @ \$33.64 /drum *Stadex - Incin.* (\$ 100.92)
- () Drums @ \$ _____ /drum \$ _____

SUB-TOTAL (AETC) \$ _____

Some of the chemicals do not avail themselves for disposal in this manner. Due to their highly reactive nature, (chemical explosives, organic peroxides, peroxide formers, pyrophorics, flammable solids, dangerous when wet and other controversial items), innovative disposal technologies have been developed to specifically address these areas. Emergency Technical Services Corporation (marketed and contracted exclusively by AETC) is licensed by the State of New Jersey E.P.A. to destroy materials which fall into these categories. The destruction procedures are accomplished by detonation, thermal decomposition and controlled chemical reaction/neutralization.

Highly Reactive Materials

(Note: - Remember 20% closure/post closure fee)

Destruction

- () Detonations @ \$ _____ /detonation \$ _____
- (4) Pounds for Thermal Decomposition @ \$ ~~45.00~~ pound \$ ~~180.00~~
45.00 180.00

Manpower

() Licensed Demolition Specialist
() Hours on-site and travel time (round trip) @ \$65.00/hour \$ _____

Special Equipment and Vehicle Use

() Miles (round trip) @ \$.75/mile \$ _____

SUB-TOTAL (ETSC) \$ _____

TOTAL ESTIMATED COST \$ _____

Dependent upon the method of disposal and the location of the facility, applicable hazardous waste taxes and/or surcharges imposed by the State will be charged.

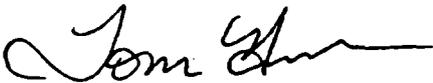
AETC's Payment Terms: Net Ten (10) Days.

The foregoing is an estimate only. Actual costs are contingent upon total material removed, freight and manpower hours. This estimate is valid for thirty (30) days. If you require additional time for evaluation or have any questions regarding the above, please feel free to call.

Thank you for your consideration.

Sincerely,

ADVANCED ENVIRONMENTAL
TECHNOLOGY CORPORATION



T. HEARD

sjy 617-332-9344

Question 5h-5i, 5k-5n and 5p

5n	DATE	WASTE DESCRIPTION	MANIFEST NUMBER	CENTRIK TYPE	5m AMOUNT	5i CARRIER	5k VEHICLE TYPE	5p CARRIER EMPLOYEE	5h DISPOSAL SITE
1	4/11/81	NAPHTHA LGNG	MA 0000355	DUMPSTER	20 YD ³	SUFFOLK SERVICES INC	CONTRACTOR DUMPER	REN McLEAN	BOLTON MA BFI SUFFOLK
2	4/11/81	NAPHTHA LGNG	MA 0000356	DUMPSTER	20 YD ³	SUFFOLK SERVICES INC	CONTRACTOR DUMPER	REN McLEAN	BOLTON MA BFI SUFFOLK
3	4/16/81	NAPHTHA LGNG	MA 0000363	DUMPSTER	25 YD ³	SUFFOLK SERVICES INC	CONTRACTOR DUMPER	REN McLEAN	BOLTON MA BFI SUFFOLK
4	4/29/81	PETROLEUM OIL WASTE FROM TANK DOOR	MA 007287	DRUMS	600M/3000 GAL	SUFFOLK SERVICES INC	UNKNOWN	WESLEY WILLIAMS	BOSTON MA SUFFOLK SERVICES
5	1982	NO WASTE SHIPPED							
6	2/6/83	OIL/WATER FROM SPILL DOOR	MA 5741	TANK TRUCK	9600 GAL	CLEAN INDUSTRY INC	TANK TRUCK	THOMAS KOTENG	E. BOSTON MA PONDY CLEAN
7	2/10/83	WASTE OIL FROM TANK CLEANING DOOR	MA 2209	TANK TRUCK	600 GAL	PONDY CLEAN INDUSTRY	TANK TRUCK	MITCHELL McWILLIAMS	E. BOSTON MA PONDY CLEAN
8	2/11/83	OILY SOLIDS FROM SPILL DOOR	MA 5744	TRAILER	35580 LB	PONDY CLEAN INDUSTRY	TRAILER	J. T. HUFF ?	NINER FALLS NY COTAS INTERNATIONAL
9	2/27/83	ASPHALT/COAL TAR TANK BOTTOMS	MA 5846	DRUMS	78 DM	PONDY CLEAN INDUSTRY	UNKNOWN	TED MOUNCH ?	NINER FALLS NY COTAS INTERNATIONAL
10	2/24/83	ASPHALT/COAL TAR TANK BOTTOMS	MA 5847	DRUMS	78 DM	PONDY CLEAN INDUSTRY	UNKNOWN	TED MOUNCH ?	NINER FALLS NY COTAS INTERNATIONAL
11	2/28/83	ASPHALT/COAL TAR TANK BOTTOMS	MA 5848	DRUMS	76 DM	PONDY CLEAN INDUSTRY	UNKNOWN	MITCHELL McWILLIAMS	NINER FALLS NY COTAS INTERNATIONAL
12	2/11/83	OILY SOLIDS FROM SPILL DOOR	MA 5745	TRAILER	32480 LB	PONDY CLEAN INDUSTRY	TRAILER	DANA WEYMOUTH ?	NINER FALLS NY COTAS INTERNATIONAL
13	3/30/83	OILY DREGS FROM SOIL MOO1	MA 10556	TRUCK	20 YD ³	PONDY CLEAN INDUSTRY	UNKNOWN	MICHAEL WHITE	NINER FALLS NY COTAS INTERNATIONAL
14	3/30/83	OILY DREGS FROM SOIL MOO1	MA 10557	TRUCK	20 YD ³	PONDY CLEAN INDUSTRY	UNKNOWN	MICHAEL WHITE	NINER FALLS NY COTAS INTERNATIONAL
15	6/27/83	SOLID HAZARDOUS WASTE DOOR	MA 019862	DRUMS	77 DM	CLEAN INDUSTRY INC	TRAILER	TED MOUNCH ?	MODER CITY NY SCA CHEMICAL SERVICES
16	6/27/83	SOLID HAZARDOUS WASTE DOOR	MA 019863	DRUMS	78 DM	CLEAN INDUSTRY INC	TRAILER	WYMAN H. KY III	MODER CITY NY SCA CHEMICAL SERVICES
17	6/30/83	SOLID HAZARDOUS WASTE DOOR	MA 019864	DRUMS	77 DM	CLEAN INDUSTRY INC	TRAILER	TED MOUNCH	MODER CITY NY SCA CHEMICAL SERVICES
18	7/7/83	SODIUM CYANIDE SOLID PO30	MA 019865	DRUMS	1 LB	CLEAN INDUSTRY INC	PICK UP TRUCK	ROBERT S. ROYENSON	BRAINTON MA SCA RECYCLING
19	7/7/83	POTASSIUM CYANIDE SOLID PO30	MA 019865	DRUMS	1 LB	CLEAN INDUSTRY INC	PICK UP TRUCK	ROBERT S. ROYENSON	BRAINTON MA SCA RECYCLING
20	7/7/83	POTASSIUM THIOCYANIDE SOLID PO30	MA 019865	DRUMS	1 LB	CLEAN INDUSTRY INC	PICK UP TRUCK	ROBERT S. ROYENSON	BRAINTON MA SCA RECYCLING
21	4/24/84	SOLID HAZARDOUS WASTE DOOR	MA 000506	DRUMS	80 DM	PRICE TRUCKING	ENCLOSURE VAN	EDWARD FOY/Paul GHELLI	PINEWOOD SC SCA CHEMICAL SERVICES
22	3/28/84	SOLID HAZARDOUS WASTE DOOR	MA 000524	DRUMS	80 DM	PRICE TRUCKING	ENCLOSURE VAN	PAUL GHELLI	PINEWOOD SC SCA CHEMICAL SERVICES
23	4/6/84	FLAMMABLE SOLID WASTE DOOR	MA 000677	DRUMS	80 DM	PRICE TRUCKING	ENCLOSURE VAN	DONALD R. KEMPTON	PINEWOOD SC SCA CHEMICAL SERVICES
24	4/10/84	FLAMMABLE SOLID WASTE DOOR	MA 000678	DRUMS	80 DM	PRICE TRUCKING	ENCLOSURE VAN	LARRY PERKINS	PINEWOOD SC SCA CHEMICAL SERVICES
25	4/24/84	FLAMMABLE SOLID WASTE DOOR	MA 000679	DRUMS	80 DM	PRICE TRUCKING	ENCLOSURE VAN	PERRY D. CATTI	PINEWOOD SC SCA CHEMICAL SERVICES
26	4/24/84	WASTE ABSORBENT PIPE CLEANING	MA 019505	DRUMS	4 YD ³	SUFFOLK SERVICES INC	UNKNOWN	LOUIS LIPERA ?	BOSTON MA SUFFOLK SERVICES
27	4/24/84	FLAMMABLE SOLID WASTE DOOR	MA 000680	DRUMS	80 DM	PRICE TRUCKING	ENCLOSURE VAN	EDWARD FOY	PINEWOOD SC SCA CHEMICAL SERVICES
28	5/22/84	FLAMMABLE SOLID WASTE DOOR	MA 000681	DRUMS	80 DM	PRICE TRUCKING	ENCLOSURE VAN	PAUL GHELLI	PINEWOOD SC SCA CHEMICAL SERVICES
29	6/6/84	FLAMMABLE SOLID WASTE DOOR	MA 000676	DRUMS	20 DM	PRICE TRUCKING	ENCLOSURE VAN	JONATHAN FARVELL	PINEWOOD SC SCA CHEMICAL SERVICES
30	6/6/84	FLAMMABLE SOLID WASTE DOOR	MA 000682	DRUMS	26 DM	PRICE TRUCKING	ENCLOSURE VAN	JONATHAN FARVELL	PINEWOOD SC SCA CHEMICAL SERVICES
31	6/6/84	WASTE OILY SOLIDS MOO1	MA 000683	DRUMS	34 DM	PRICE TRUCKING	ENCLOSURE VAN	JONATHAN FARVELL	PINEWOOD SC SCA CHEMICAL SERVICES
32	7/11/84	FLAMMABLE LIQUID WASTE DOOR	MA 000686	TANK TRUCK	3932 GAL	SOLVENT RECOVERY SERVICES OF MA	TANK TRUCK	?	WATERBURY CT SOLVENT RECOVERY SERVICES
33	7/21/84	WASTE OILY SOLIDS DOOR	MA 000684	DRUMS	36 DM	PRICE TRUCKING	ENCLOSURE VAN	LARRY PERKINS	PINEWOOD SC SCA CHEMICAL SERVICES
34	7/21/84	FLAMMABLE SOLID WASTE DOOR	MA 000685	DRUMS	44 DM	PRICE TRUCKING	ENCLOSURE VAN	LARRY PERKINS	PINEWOOD SC SCA CHEMICAL SERVICES
35	8/9/84	WASTE LIQUID EMULSION	MA 000688	DRUMS	75 DM	SCA CHEMICAL SERVICES	UNKNOWN	JOHN BATTISTA	BRAINTON MA SCA CHEMICAL SERVICES
36	8/21/84	FLAMMABLE SOLID WASTE DOOR	MA 000687	DRUMS	80 DM	PRICE TRUCKING	ENCLOSURE VAN	PAUL GHELLI	PINEWOOD SC SCA CHEMICAL SERVICES
37	8/21/84	FLAMMABLE SOLID WASTE DOOR	MA 000689	DRUMS	80 DM	PRICE TRUCKING	ENCLOSURE VAN	TOMMY CAPP	PINEWOOD SC SCA CHEMICAL SERVICES
38	9/10/84	FLAMMABLE SOLID WASTE DOOR	MA 000690	DRUMS	80 DM	PRICE TRUCKING	ENCLOSURE VAN	PAUL GHELLI	PINEWOOD SC SCA CHEMICAL SERVICES
39	9/17/84	FLAMMABLE SOLID WASTE DOOR	MA 000691	DRUMS	80 DM	PRICE TRUCKING	ENCLOSURE VAN	JAMES W. ABILMAN	PINEWOOD SC SCA CHEMICAL SERVICES
40	10/23/84	WASTE FLAMMABLE SOLID DOOR	MA 100401	CARTON	1 LB	ETSC	UNKNOWN	T.F. GUNDECH	VERNON NJ ETSC
41	10/23/84	WASTE LIQUID CORROSIVE SOLID DOOR	MA 100401	CARTON	1 LB	ETSC	UNKNOWN	T.F. GUNDECH	VERNON NJ ETSC
42	11/6/84	FLAMMABLE SOLID WASTE DOOR	SC ?	DRUMS	80 DM	PRICE TRUCKING	ENCLOSURE VAN	PAUL GHELLI	PINEWOOD SC SCA CHEMICAL SERVICES

5n	5p	5m	5i	5p	5h			
DATE	WASTE DESCRIPTION	MANIFEST NUMBER	CONTAINER TYPE	AMOUNT	CARRIER	VEHICLE TYPE	CARRIER EMPLOYEE	DISPOSAL SITE
1/21/85	WASTE FLAMMABLE SOLID D001	SC-	DRUMS	74 DM	Price Trucking	ENCLOSURE VAN	PAUL GAZZLEY	PINEWOOD SC SCA CHEMICAL SERVICES
1/23/85	WASTE FLAMMABLE LIQUID D001	MA 801201	TANK TRUCK	4,29 GAL	Silver River Service Co	TANK TRUCK	BENJAMIN R. GALLAGHER	SOUTHINGTON CT SOLVENT RECOVERY SVCS
4/11/85	WASTE ASBESTOS	MA 103297	BAGS	4 yd ³	Suffolk Services, Inc	UNKNOWN	PHILIP T. McGRATH?	Northwick ME CONSOLIDATED WASTE SVCS
6/25/85	WASTE FLAMMABLE SOLID D001	SC-	DRUMS	80 DM	Clean Harbors	UNKNOWN	ROBERT CONTI-DES	PINEWOOD SC GSX-PINEWOOD
1/21/85	WASTE OILY SLUDGES D001	SC-	DRUMS	6 DM	Price Trucking	ENCLOSURE VAN	PAUL GAZZLEY	PINEWOOD SC SCA CHEMICAL SERVICES
6/27/85	WASTE FLAMMABLE SOLID D001	SC-	DRUMS	80 DM	Clean Harbors	UNKNOWN	BRUCE PAIVA	PINEWOOD SC GSX-PINEWOOD
8/12/85	WASTE FLAMMABLE LIQUID D001	MA 801926	TANK TRUCK	3500 GAL	Clean Harbors	TANK TRUCK	BILL BOLAND	BIBBINGTONE MA CLEAN HARBORS
8/13/85	WASTE LATEX EMULSION	MA 801927	TANK TRUCK	1750 GAL	Clean Harbors	TANK TRUCK	JON BRUGGER	BIBBINGTONE MA CLEAN HARBORS
8/19/85	LAB PACK CHEMICALS	MSA 009408	DRUMS	15	ENVIRONMENTAL TRANSFER CORP	UNKNOWN	THOMAS RYAN	FLANDERS NJ ADVANCE ENV. TECH
9/18/85	WASTE FLAMMABLE SOLID D001	SC-	DRUMS	80 DM	Clean Harbors	UNKNOWN	KEVIN HILL	PINEWOOD SC GSX-PINEWOOD
10/1/85	WASTE FLAMMABLE SOLID D001	SC-	DRUMS	80 DM	Clean Harbors	UNKNOWN	MARK OUELLETTE	PINEWOOD SC GSX-PINEWOOD
10/2/85	WASTE FLAMMABLE SOLID D001	SC-	DRUMS	80 DM	Clean Harbors	UNKNOWN	MARK OUELLETTE	PINEWOOD SC GSX-PINEWOOD

Appendix III

Documents Responsive to Question 5s

SCA CHEMICAL SERVICES (MA) INC.
 AN SCA SERVICES CO.
 395 QUINCY AVENUE
 BRAINTREE, MASSACHUSETTS 02184
 TELEPHONE (617) 849-1800



SCA
 CHEMICAL
 SERVICES
RECEIVED

INVOICE	
No	26594
Page	of 19

WORK ORDER NO 33142

BILL TO
 Samuel Cabot
 One Union Street
 Boston, MA. 02108

SHIPPING ADDRESS GENERATOR
 APR 30 1984
SAMUEL CABOT INC.

INVOICE DATE 4/10/84	SHIPPING DATE 4/10/84	CUSTOMER ORDER NO.	TERMS Net 30 Days	SALESMAN #4
-------------------------	--------------------------	--------------------	----------------------	----------------

QUANTITY	RII CODE	PRODUCT DESCRIPTION	UNIT PRICE	AMOUNT	MISC
80	4400	Direct shipment to SCA, Pinewood 55 Gal. Drums Waste Paint solids	32.00	2560.00	
SUB TOTAL				2560.00	
DRUM PURCHASE					
LAB FEE					
OFF SPECIFICATION					
TRANSPORTATION				2030.00	
DEMURAGE					
TOTAL				\$4590.00	

VENDOR # 31030
 VOUCHER # 31030
 408-0707-5
 408-0704-2
 CATCH # 048413
 DATE 5-10-84
 2560.00
 2030.00
 4,590.00
 CHECK # 11111111
 Tjmc

NEFD

CERTIFICATE OF DISPOSAL All material on this order for disposal has been treated on-site or is being held in storage for shipment to a licensed

SCA CHEMICAL SERVICES (MA) INC.

AN SCA SERVICES CO.
385 QUINCY AVENUE
BRAINTREE, MASSACHUSETTS 02184
TELEPHONE (617) 849-1800



INVOICE		
No.	26633	
Page	of	pg.
WORK ORDER NO		

RECEIVED

APR 12 1984

SAMUEL CABOT INC.

BILL TO: SAMUEL CABOT
One Union Street
Boston, MA. 02108

INVOICE DATE 4/11/84	SHIPPING DATE	CUSTOMER ORDER NO	TERMS Net 30 Days	SALESMAN #4
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QUANTITY	RII CODE	PRODUCT DESCRIPTION	UNIT PRICE	AMOUNT	MISC
80	5550	DIRECT SHIPMENT TO SCA, PINEWOOD, SC MA #32792 - 3/23/84 55 Gal. Drums Waste Paint Solids	32.00	2560.00	
80	4100	MA #32910 3/28/84 55 Gal. Drums Waste Paint Solids Placard fine	32.00	2560.00 30.00	

VENDOR #:	31030	BATCH #:	048406
VENDOR #:	408-0707-5	DATE:	5-11-84
VENDOR #:	408-0704-2	AMOUNT:	5150.00
		AMOUNT:	4060.00
		AMOUNT:	9210.00
PURCHASE ORDER #:	TJm		

APR 12 1984
J. GHLSTORF

SUR TOTAL	\$5150.00
DRUM PURCHASE	
LAB FEE	
OFF SPECIFICATION	
TRANSPORTATION	4060.00
DEMURAGE	
TOTAL	\$9210.00

2 - @ \$2030.00 Ea.

DIT

REPLICATES OF ORIGINAL: All material of this order has been treated on site or is being held in storage.

SCA CHEMICAL SERVICES (MA) INC.

AN SCA SERVICES CO.
38F QUINCY AVENUE
BRAINTREE, MASSACHUSETTS 02184
TELEPHONE (617) 849-1800



INVOICE	
No	27033
Page	of
WORK ORDER NO	33410, 33411

RECEIVED

MAY 14 1984

BILL TO	SHIPPING ADDRESS/GENERATOR
Samuel Cabot, Inc. SAMUEL CABOT INC. One Union Street Boston, MA. 02108	

INVOICE DATE	SHIPPING DATE	CUSTOMER ORDER NO	TERMS	SALESMAN
5/17/84	5/22/84		Net 30 Days	

QUANTITY	RII CODE	PRODUCT DESCRIPTION	UNIT PRICE	AMOUNT	MISC
80		Direct shipment to SCA, Pinewood SCA#33410 55 Gal. Drums Paint solids	32.00	2,560.00	
80		SCA#33449 55 Gal. Drums Paint solid	32.00	2560.00	
80		SCA#33370 55 Gal. Drums Paint solids	32.00	2560.00	

VENDOR #	31030	BATCH #	US8405
VOUCHER #			6-7-84
408-0707-5		7680.00	
408-0704-2		6090.00	
		13,770.00	
PURCHASE ORDER #		DATE PAID	

MAY 15 1984

SUB TOTAL	7680.00
DRUM PURCHASE	
LAB FEE	
OFF SPECIFICATION	
TRANSPORTATION	6090.00
DEMURAGE	
TOTAL	\$13770.00

5 100 lb. drums, each

US EPA ARCHIVE DOCUMENT

CERTIFICATE OF DISPOSAL: All material on this order for disposal has been treated on-site or is being held in storage for shipment to a licensed...

SCA CHEMICAL SERVICES (MA) INC.

AN SCA SERVICES CO.
395 QUINCY AVENUE
BRAINTREE, MASSACHUSETTS 02184
TELEPHONE (617) 849-1800

RECEIVED

JUN 13 1984

SAMUEL CABOT INC.



INVOICE		
No.	27580	
Page	of	pages
WORK ORDER NO		

BILL TO	SHIPPING ADDRESS/GENERATOR
Samuel Cabot, Inc. One Union Street Boston, MA. 02108	

INVOICE DATE 6/12/84	SHIPPING DATE	CUSTOMER ORDER NO	TERMS Net 30 Days	SALESMAN 4
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QUANTITY	RII CODE	PRODUCT DESCRIPTION	UNIT PRICE	AMOUNT	MISC
		Direct shipment to SCA, Pinewood			
30		SCA#34055, 5/22/84 55 Gal. Drums Paint Solids	32.00	2560.00	
20		SCA#34335, 6/6/84 55 Gal. Drums Paint Solids	32.00	640.00	
34		55 Gal. Drums Oily Solids	32.00	1088.00	
26		55 Gal. Drums Creosote Solids	32.00	832.00	

VENDOR #	31030	BATCH #	068406
VOUCHER #	408-0707-5	DUE DATE	7-12-84
AMOUNT DEDUCTION	408-0704-2	GROSS AMOUNT	5120.00
			4060.00
		TOTALS	9,180.00
PURCHASE APPROVAL	TJL	CHECK # & DATE PAID	(1)

SUB TOTAL	5120.00
DRUM PURCHASE	
LAB FEE	
OFF SPECIFICATION	
TRANSPORTATION	4060.00
DEMURAGE	
TOTAL	9180.00

2 Loads @ \$2030.-

CERTIFICATE OF DISPOSAL: All material on this order for disposal has been treated on-site or is being held in storage for shipment to a licensed...

SCA CHEMICAL SERVICES (MA) INC.

AN SCA SERVICES CO.
 385 QUINCY AVENUE
 BRAINTREE, MASSACHUSETTS 02184
 TELEPHONE (617) 849-1800



INVOICE	
No	28880
Page	of
WORK ORDER NO	
36013	

BILL TO
 Samuel Cabot, Inc.
 229 Marginal Street
 Chelsea, MA 02151

SHIPPING ADDRESS GENERATOR
Received
SEP 6 1984
 Samuel Cabot, Inc.
 22 Marginal St.
 Chelsea, Mass. 02150

INVOICE DATE	SHIPPING DATE	CUSTOMER ORDER NO	TERMS	SALESMAN
8/9/84	8/9/84		Net 30 Days	#4

QUANTITY	RII CODE	PRODUCT DESCRIPTION	UNIT PRICE	AMOUNT	MISC
35	CL	55 Gal. Drums Latex Semi-Solid	105.00	3,675.00	
40	A22	55 Gal. Drums Flammable Liquid, Low BTU, <0.5% Halogen/Sulfur	75.00	3,000.00	

VENDOR #: 31030	BATCH #: 088414
VOUCHER #:	DUE DATE: 9-9-84
ACCOUNT DISTRIBUTION	G.O.S. AMOUNT
408-0707-5	7,245.00
\$ TO A.I.S.	CHECK # & DATE PAID
PURCHASE APPROVAL: <i>TJM</i>	

SEP 11 1984
J. GILLSTORF

SUR TOTAL	\$6,675.00
DRUM PURCHASE	
LAB FEE	
OFF SPECIFICATION	\$ 270.00
TRANSPORTATION	\$ 300.00
DEMURAGE	
TOTAL	\$7,245.00

As per attached report

mjd



CUSTOM DISTILLATIONS
FOR INDUSTRY

S R S, INC.
1200 SYLVAN STREET
LINDEN, NEW JERSEY 07036
(201) 862-2000

INVOICE	
DATE	NO.
8/31/84	

S.R.S. OF NEW JERSEY 1200 SYLVAN STREET LINDEN, NJ 07036
--

SOLD TO

CABOT STAIN
229 MARGINAL STREET
CHELSEA MA 02150

SEP 10 1984

Samuel Cabot, Inc.
22 Marginal St.
Chelsea, Mass. 02150

SHIP TO

RECEIVED

SEP 10 1984

Samuel Cabot, Inc.
22 Marginal St.
Chelsea, Mass. 02150

BATCH NO.	SALES NO.	CUST. CODE	CUST. ORDER NO.	TERMS
40875/	22	1234	1219	NET 15 DAYS
DATE SHIPPED	B/L #	SHIPPED VIA		F.O.B.
7/11/84		SRS		

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
3932.00	GAL DISPOSAL GALLONS	.1500	589.80
1.00	EA TRANSPORTATION P/U	430.0000	430.00
5.50	EA TRANS DETENTION P/U	25.0000	137.50

**PLEASE PAY THIS AMOUNT **

PIN # F 6643 FB
COPY OF DETENTION ENCLOSED

SEP 11 1984

J. GUILSTORF

ACCOUNT # 33088	BATCH # 088414
VOUCHER #	DUE DATE: 9-15-84
ACCOUNT DISTRIBUTION	CUSTOMER'S AMOUNT
408-0707-5	1157.30
\$ TOTALS	
PURCHASE APPROVAL <i>[Signature]</i>	CHECK # & DATE PAID

PLANT LOCATIONS:

SOLVENTS RECOVERY SERVICE
OF NEW JERSEY, INC.
1200 SYLVAN STREET
LINDEN, N.J. 07036

SOLVENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.
LAZY LANE
SOUTHINGTON, CONN. 06489

SCA CHEMICAL SERVICES (MA) INC.

AN SCA SERVICES CO.
 395 QUINCY AVENUE
 BRAINTREE, MASSACHUSETTS 02184
 TELEPHONE (617) 849-1800



INVOICE	
No	30183
Page	of
WORK ORDER NO	36548

BILL TO
 SAMUAL CABOT, INC.
 One Union Street
 Boston, MA 02108'

SHIPPING ADDRESS GENERATOR

INVOICE DATE 11/8/84	SHIPPING DATE 9/17/84	CUSTOMER ORDER NO	TERMS Net 30 Days	SALESMAN #4
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QUANTITY	RII CODE	PRODUCT DESCRIPTION	UNIT PRICE	AMOUNT	MISC
80		Direct shipment to SCA, Pinewood, SC 55 Gal. Drums Paint Solids	34.50	2760.00	
RE: (D) NOV 13 1984			NOV 4 1984 J. GILSTORE		
408-0707-5 408-0704-2				2760.00 2030.00 4790.00	
PURCHASE APPROVAL [Signature]				SHIP TOTAL 2760.00	
[Signature]				DRUM PURCHASE	
[Signature]				LAB FEE	
[Signature]				OFF SPECIFICATION	
[Signature]				TRANSPORTATION 2030.00	
[Signature]				DEMMURAGE	
[Signature]				TOTAL → \$4790.00	

US EPA ARCHIVE DOCUMENT

CERTIFICATE OF DISPOSAL All material on this order for disposal has been treated on-site or is being held in storage for shipment to a licensed

SCA CHEMICAL SERVICES (MA) INC.

AN SCA SERVICES CO.
 385 QUINCY AVENUE
 BRAINTREE, MASSACHUSETTS 02184
 TELEPHONE (617) 849-1800



INVOICE		
No	29468	
Page	of	pages

WORK ORDER NO

BILL TO
 SAMUAL CABOT, INC.
 One Union Street
 Boston, MA 02108

SHIPPING ADDRESS/GENERATOR

INVOICE DATE 9/28/84	SHIPPING DATE	CUSTOMER ORDER NO	TERMS Net 30 Days	SALESMAN #4
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QUANTITY	RII CODE	PRODUCT DESCRIPTION	UNIT PRICE	AMOUNT	MISC
80		Direct shipment to SCA, Pinewood SC 8/27/84, SCA #36237 55 Gal. Drums Paint Solids	34.50	2760.00	
80		9/10/84, SCA #36555 55 Gal. Drums Paint Solids	34.50	2760.00	
<p>RECEIVED OCT 1 1984 SAMUEL CABOT INC</p>					
<p>31030 018410 ACCOUNT # 408-0707-5 ACCOUNT # 408-0704-2 DUE DATE 10-28-84 5520.00 4060.00 9,580.00 (2) loads at \$2030. each</p>					
SUB TOTAL				5520.00	
DRUM PURCHASE					
LAB FEE					
OFF SPECIFICATION					
TRANSPORTATION				4060.00	
DEFMURAGE					
TOTAL				\$9580.00	

mpe

RECYCLABLE OR REUSABLE: All material on this order for disposal has been treated on-site or is being held in storage for shipment to a licensed

SCA CHEMICAL SERVICES (MA) INC.

AN SCA SERVICES CO.
395 QUINCY AVENUE
BRAINTREE, MASSACHUSETTS 02184
TELEPHONE (617) 849-1700



INVOICE	
No	29467
Page	of
WORK ORDER NO	

BILL TO	SHIPPING ADDRESS/GENERATOR
SAMUAL CABOT, INC. One Union Street Boston, MA 02108	

INVOICE DATE 9/28/84	SHIPPING DATE	CUSTOMER ORDER NO	TERMS Net 30 Days	SALESMAN #4
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QUANTITY	RII CODE	PRODUCT DESCRIPTION	UNIT PRICE	AMOUNT	MIS
44		Direct shipment to SCA, Pinewood SC			
36		7/26/84, SCA #35318 55 Gal. Drums Paint solids	34.50	1518.00	
		55 Gal. Drums Oily solids	34.50	1242.00	
80		8/12/83, SCA #36220 55 Gal. Drums Paint Solids	34.50	2760.00	

31030 098410

NUMBER OF INVOICES	DUE DATE: 10-28-84
408-0767-5	5520.00
408-0704-2	4060.00
TOTALS	9580.00
PURCHASE APPROVAL:	CHECK # & DATE PAID

Amc *HR* **0**

OCT 3 1984
J. GUNSTORE

SUB TOTAL	5520.00
DRUM PURCHASE	
LAB FEE	
OFF SPECIFICATION	
TRANSPORTATION	4060.00
DEMURAGE	
TOTAL	9580.00

(2) loads at \$2030. each

mpe



GSX Services
of South Carolina, Inc.
Route #1, Box 255
Pinewood, SC 29125
(803) 452-5003

INVOICE

2

No 28130

DATE 1-23-85

RECEIVED

Samuel Cabot, Inc.
229 Marginal Street
Chelsea, MA 02150

RECEIVED

MANIFEST NUMBER

CUSTOMERS ORDER NO

WORK ORDER NO.

SHIPPED VIA

Price

VENDOR NO. 9050		BATCH NO. 018515	
VOUCHER NO. 900		DUE DATE 2-3-85	
ACCOUNT DISTRIBUTION	GROSS AMOUNT	DISCOUNT	
408-0707-5	2698.29		
408-0704-2	2,100.00		
DOLLAR TOTALS	41698.29		
PURCHASE APPROVAL <i>Mark A. [Signature]</i>	ACCOUNTING APPROVAL ()		

Price		TOTAL
32.00	Per Drum	\$ 2304.00
32.00	Per Drum	192.00
32.00	Per Drum	64.00
	Per Drum	
	Per Drum	
	Per Pound	
FEB 1 1985		
four J. GUILSTORE		2000.00
: @ \$2.13 Per Ton		30.59
: @ \$7.50 Per Ton		107.70
		\$ 4698.29

Net 10 -- Service Charge of 1% Per Month
18% Per Year) On All Accounts Over 30 Day

SCA CHEMICAL SERVICES (MA) INC.

AT SCA SERVICES CO.
387 QUINCY AVENUE
BRAINTREE, MASSACHUSETTS 02184
TELEPHONE (617) 849-1800

X

Received

MAINS OF



INVOICE	
No	31669
Page	1
WORK ORDER NO	A5964

BILL TO	SHIPPING ADDRESS/GENERATOR
Samuel Cabot, Inc. 229 Marginal Street Chelsea, MA. 02150	

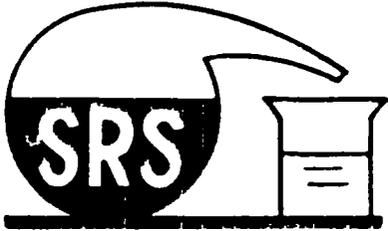
INVOICE DATE 1/21/85	SHIPPING DATE 1/21/85	CUSTOMER ORDER NO 2027	TERMS Net 30 Days	SALESMAN #4
-------------------------	--------------------------	---------------------------	----------------------	----------------

QUANTITY	RII CODE	PRODUCT DESCRIPTION	UNIT PRICE	AMOUNT	MIS									
4		16 Gal. Open Head drums	15.00	60.00										
		<table border="1"> <tr> <td>ORDER # 31030</td> <td>DATE # 018513</td> </tr> <tr> <td>ORDER # 406-0000-9</td> <td>DUE DATE: 2-21-85</td> </tr> <tr> <td># 6052</td> <td>60.00</td> </tr> <tr> <td>PURCHASE APPROVAL</td> <td>CHECK DATE</td> </tr> </table>		ORDER # 31030	DATE # 018513	ORDER # 406-0000-9	DUE DATE: 2-21-85	# 6052	60.00	PURCHASE APPROVAL	CHECK DATE			
ORDER # 31030	DATE # 018513													
ORDER # 406-0000-9	DUE DATE: 2-21-85													
# 6052	60.00													
PURCHASE APPROVAL	CHECK DATE													
				SUB TOTAL	60.00									
				DRUM PURCHASE										
				LAB FEE										
				OFF SPECIFICATION										
				TRANSPORTATION										
				DEMURAGE										
				TOTAL	\$60.00									

FEB 4 1985
J. GUILSTORF

MPD

0052-0264



CUSTOM DISTILLATIONS
FOR INDUSTRY

S R S, INC.
1200 SYLVAN STREET
LINDEN, NEW JERSEY 07036
(201) 862-2000

INVOICE	
DATE	NO.
1/30/85	888

REMOVED

S.R.S. OF NEW ENGLAND
1200 SYLVAN STREET
LINDEN, NJ 07036

S
O
L
D
T
O

CABOR STAIN
229 MARGINAL STREET
CHELSEA MA 2150

S
H
I
P
T
O

BATCH NO.	SALES NO.	CUST. CODE	CUST. ORDER NO.	TERMS
50127/	22	1234		NET 15 DAYS
DATE SHIPPED	B/L #	SHIPPED VIA		F.O.B
1/23/85		SRS		

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
4129.00	GAL DISPOSAL GALLONS	.1500	619.35
1.00	EA TRANSPORTATION P/U	430.0000	430.00
1.50	EA TRANS DETENTION P/U	25.0000	37.50
2.50	HRS VACUUM TRUCK	85.0000	212.50

**PLEASE PAY THIS AMOUNT **

1299.35

PIN # P 8543 FB
COPY OF DETENTION ENCLOSED

FEB 25 1985
I. GUILSTORF

33088

028507

2-15-85

408-0707-5
408-0704-2

831.85
467.50

11294.35

M.S. *H.C.*

(U)

PLANT LOCATIONS:

SOLVENTS RECOVERY SERVICE
OF NEW JERSEY, INC.
1200 SYLVAN STREET
LINDEN, N.J. 07036

SOLVENTS RECOVERY SERVICE
OF NEW ENGLAND, INC.
P.O. BOX 362
SOUTHINGTON, CONNECTICUT 06488

0052-0265

SUFFOLK SERVICES, INC.

COMPLETE COMPACTION AND
CONTAINERIZED DISPOSAL SERVICES
LICENSED HAZARDOUS WASTE SERVICES

98 Taylor Street • Dorchester, MA 02122 • 825-9043

PAGE: 1



INVOICE NO: 0118243
INVOICE DATE: 04/22/85
CUSTOMER NO:
TERM: NET 7 DAYS

FILL TO: CO100

4

SHIP TO:

CABOT PAINTS & STAINING
227 MARGINAL ST.
CHELSEA, MA. 02150

REMOVAL OF RUBBISH WEEK ENDING 04/20/85

DATE	QUANTITY	DESCRIPTION	PRICE	AMOUNT
	4	YDS DISPOSED 4/11 MA A 032907 ATTN MARK STAIRS	80.00	320.00
			TOTAL:	320.00

VENUE: 35040 LEAD # 0418513
 VOUCHER: 1015228 DATE: 4/29/85
 408-0701-8 320.01
 APR 29 1985
 J. GIHLSTORF

PLEASE PAY LAST AMOUNT IN THIS COLUMN ↑

P.O. Box 193
 Kingston, MA 02364
 617-585-5111



AN ENVIRONMENTAL SERVICES COMPANY

24 Hours
 MA (617) 585-5111
 NY (518) 434-0149
 RI (401) 351-6090

TO: Samuel Cabot Co
 229 Marginal Street
 Chelsea, MA 02150

Attn: Accounts Payable

P.O. #:
 INVOICE #: 10192 JOB #: AN016
 DATE: 8/30/85
 TERMS: NET 10 DAYS

QTY.	DESCRIPTION	PRICE	TOTAL
	Request payment for transportation and disposal from your Chelsea, MA facility to GSX, Pinewood, SC		
	Ship Date: 7/26/85		
	Manifest No:		
	Contract Price		
	Transportation	2,030 00	
	80 drums at 46.00/drum	3,680 00	
TOTAL THIS INVOICE			\$ 5,710 00

SEP 4 1985
 J. GUILSTORF

VENDOR NO. 1090	BATCH NO. 068514	
VOUCHER NO. 80619	DUE DATE 9/10/85	
ACCOUNT DISTRIBUTION	GROSS AMOUNT	DISCOUNT
408-0707-5	5710.00	/
DOLLAR TOTALS		
PURCHASE APPROVAL <i>[Signature]</i>	ACCOUNTING APPROVAL <i>[Signature]</i>	

0052-0267

P.O. Box 193
 Kingston, MA 02364
 617-585-5111



24 Hours
 MA (617) 585-5111
 NY (518) 434-0149
 RI (401) 351-6000

AN ENVIRONMENTAL SERVICES COMPANY

TO: Samuel Cabot Company
 229 Marginal Street
 Chelsea, MA 02150

Attn: Accounts Payable

P.O. #:

INVOICE #: 9891

JOB #: AN004

DATE: 8-22-85

TERMS: NET 10 DAYS

QTY.	DESCRIPTION	PRICE	TOTAL
	Request payment for transportation and disposal from Samuel Cabot Company, Chelsea, MA to GSX, Pinewood, SC.		
	30/load	\$ 4,060 00	
		7,360 00	
	3 INVOICE		\$ 11,420 00

VEHICLE NO	BATCH NO	
10970	067509	
INVOICE NO	DUE DATE	
880152	4-2-85	
ACCOUNT DISTRIBUTION	GROSS AMOUNT	DISCOUNT
408-0707-5	11,420.00	/
DOLLAR TOTALS		
PURCHASE APPROVAL	ACCOUNTING APPROVAL	
<i>[Signature]</i>	<i>[Signature]</i>	

OK TO BE PAY MISTAKES

AUG 27 1985
 J. GILSTORF

P.O. Box 193
 Kingston, MA 02364
 617-585-5111



24 Hours
 MA (617) 585-5111
 NY (518) 434-0140
 RI (401) 351-6090

AN ENVIRONMENTAL SERVICES COMPANY

TO: Samuel Cabots
 229 Marginal Street
 Chelsea, MA 02151
 Attn: Mark Stairs

P.O. # :
 INVOICE #: 10128 JOB #: 7729K
 DATE: 8-31-85
 TERMS: NET 30 DAYS

QTY.	DESCRIPTION	PRICE	TOTAL
	Request payment for services rendered at your Chelsea, MA facility.		
	CONTRACT PRICE:		
	LABOR 25/hr at 14 hours	\$ 350 00	
	TRANSPORTATION 75/hr at 8 hrs	600 00	
	DISPOSAL .50/gal at 3500 gal	1,750 00	
	TOTAL THIS INVOICE		\$ 2,700 00
	THANK YOU		
	<i>PAY Mark Stairs</i>		
		SEP 14 1985	
		J. GUILSTORE	

INVOICE NO 1090	ISSUE NO 076502	
DATE 9/10/85	DUE DATE 9/30/85	
ACCOUNT DISTRIBUTION	GROSS AMOUNT	DISCOUNT
408-07075	2700.00	/
DOLLAR TOTALS		
PREPARE APPROVAL	ACQUISITION APPROVAL	

REMIT TO:

P.O. Box 193
Kingston, MA 02364
617-585-5111



AN ENVIRONMENTAL SERVICES COMPANY

24 Hours

MA (800) OIL-TANK
MA (617) 585-5111
NY (518) 434-0149
RI (401) 351-6090
ME (207) 773-1411

TO:

Samuel Cabot
229 Marginal Street
Chelsea, MA 02150

Received

P.O. #:

INVOICE #: A0011

JOB #: T2084

DATE: 10/22/85

OCT 21 1985

TERMS: NET

DAYS

QTY.	DESCRIPTION	PRICE		TOTAL	
	Request payment for transportation and disposal of 80 drums from your Chelsea facility to GSX Pinewood, SC				
	Transportation	2030	00		
	Disposal	5040	00		
	Total this Invoice			\$7070	00

*OK TO PAY BY
M. STALLS*

OCT 31 1985
I. GILSTORE

1090	108512	104572	11-7-85
ACCOUNT DISTRIBUTION	GROSS AMOUNT	DISCOUNT	
408-0707-5	7070.00		
DOLLAR TOTALS			

0052-0270

P.O. Box 193
 Kingston, MA 02364
 617 - 585-5111

Clean Harbors inc.

AN ENVIRONMENTAL SERVICES COMPANY

24 Hours

MA (617) 585-5111
 NY (518) 434-0149
 RI (401) 351-6000

TO: SAMUEL CABOT
 229 Marginal Street
 Chelsea, MA 02150
 Attn: Accounts Payable

10/31/85
10/31/85

P.O. # :
 INVOICE # : 11290 JOB # : T 2020
 DATE : 10/31/85
 TERMS: NET 10 DAYS

QTY.	DESCRIPTION	PRICE	TOTAL
	Request payment for transportation and disposal from your Chelsea, MA facility to G.S.X. Services, Pinewood, SC		
	Ship Date: 10/7/85		
	Manifest No: SC 00010		
	Transportation	2,030 00	
	Disposal Of 80 drums at 63.00/drum	5,040 00	
	TOTAL THIS INVOICE.....		\$ 7,070 00

THANK YOU

NOV 13 1985
 J. GILSTOIF

INVOICE NO 1090	BATCH NO 118502
CUSTOMER NO 1101185	DUE DATE 11-10-85
ACCOUNT DISTRIBUTION 40807075	GROSS AMOUNT 7070.00
	DISCOUNT
DOLLAR TOTALS	

0052-0271

REMIT TO:

P.O. Box 193
Kingston, MA 02364

617-585-5111

Clean Harbors inc.

AN ENVIRONMENTAL SERVICES COMPANY

24 Hours

MA (800) OIL-TANK
MA (617) 585-5111
NY (518) 434-0149
RI (401) 351-6090
ME (207) 773-1411

TO: SAMUEL CABOT
229 MARGINAL STREET
CHELSEA, MA 02150

ATTN: ACCOUNTS PAYABLE

P.O. #:

INVOICE #: 11411

JOB #: T-1917

DATE: 11/14/85

TERMS: NET 10 DAYS

QTY.	DESCRIPTION	PRICE	TOTAL
	Clean Harbors, Inc. requests payment for transportation from your Chelsea, MA facility to GSX, Pinewood, SC		
	Ship Date: 9/18/85		
	Manifest No: SC 00009		
	Contract Price:	2,030 00	
	Disposal: 80 drums @ 46.00/drum	3,680 00	
	TOTAL THIS INVOICE.....		5,710 00

OK BY Mark A. [Signature]
To Pay

J. GIBSON

INVOICE NO. 1090	PATCH NO. 116508	
INVOICE # 116222	DUE DATE 11-24-85	
ACCOUNT DISTRIBUTION	GROSS AMOUNT	DISCOUNT
408207075	5710.00	/
DOLLAR TOTALS		
PREPARE APPROVAL <i>p</i>	ACCOUNTING APPROVAL <i>(Signature)</i>	

0052-0272

Question 9a(iii)

Summary

The Manufacturing Manager reports to the President and is responsible for the safe, efficient, and timely production of all products and its ultimate shipment to the customers at the least possible cost.

Duties

1. Responsible for the preparation of the plant operating and capital budgets.
2. Directs and coordinates the proper manning of all departments in the plant.
3. Acts as Company liaison with EPA and DEQE local coordinator.
4. Assumes corporate compliance with all EPA/DEQE regulations.
5. Oversees proper disposal of all Hazardous Waste
6. Responsible for labor relations with the local union.
7. Serves on the following in-house committees:
 - A. R & D Committee
 - B. Joint Labor Management Committee
 - C. Plant Grievance Committee
 - D. Manufacturing Management Committee
 - E. Negotiation Committee
8. Coordinates with Human Resource Manager concerning hiring, training and discharge of employees.
9. Responsible for long range planning for production facility and production equipment.
10. Provides facility management, which includes maintenance of the buildings, the yards, and so forth.
11. Maintain positive community relations with local town management.
12. Serve on local civic committees, i.e. Chamber of Commerce etc.
13. Serves on National Coatings Manufacturing Committee.
14. Performs special projects as assigned by the president.
15. This position does not require a particular educational background, but does require annual training after employment regarding the handling of hazardous material and/or hazardous waste consistent with 310 CMF 30:516(1 & 2)

Date: _____ Approved: _____

**JOB DESCRIPTION
PLANT SUPERINTENDENT
MANUFACTURING**

Summary

The Plant Superintendent reports to the Manufacturing Manager and is responsible for all production activities of the company in keeping with effective operation and costs.

Duties

1. Prepare operating and maintenance budget and is responsible for controlling direct costs and overhead expenses to stay within approved guidelines.
2. Responsible for the safe, efficient, timely production of all product lines.
3. Assists in the preparation of the Capital and Operating Equipment budgets.
4. Oversees and directs plant engineering and maintenance functions.
5. Serves on the following committees:
 - A. Manufacturing Committee
 - B. Safety Committee
 - C. Plant Grievance Committee
 - D. Joint Labor Management Committee
 - E. Negotiating Committee
6. Responsible for proper disposal for hazardous waste.
7. Maintains the day-to-day communication with production supervision.
8. Maintains proper product inventory.
9. Develops and enforces proper plant housekeeping procedures.
10. Performs special projects as assigned by the Manufacturing Manager.
11. This position does not require a particular educational background, but does require annual training after employment regarding the handling of hazardous material and/or hazardous waste consistent with 310 CMF 30:516(1 & 2)

Date: _____ Approved: _____

**JOB DESCRIPTION
PURCHASING/DISTRIBUTION MANAGER**

MANUFACTURING

Summary

The Purchasing/Distribution Manager reports to the Manufacturing Manager and is responsible for negotiating and awarding all purchase orders for assigned commodities as well as the coordination, documentation, rating, routing and control of outgoing and incoming shipments.

Duties

1. Responsible for the purchasing of all raw materials and packaging supplies, and review and approval of related invoices.
2. Prepares the operating and capital budgets for the warehouse and advertising.
3. Assures the safe and efficient operation of the warehouse and advertising areas.
4. Negotiates freight rates and assigns carriers to outbound shipments.
5. Reviews and approves all freight bills.
6. Responsible for export and import documentation.
7. Responsible for day-to-day communications with the warehouse supervisors, plant vendors and sales/marketing department.
8. Serves on the following committees:
 - A. Joint Labor Management Committee
 - B. Negotiating Committee
 - C. Plant Grievance Committee
 - D. Manufacturing Management Committee
9. Keeps attuned to new developments in the raw material and transportation areas and communicates these to the plant and general management.
10. Responsible for the housekeeping in the warehouse and advertising.
11. Performs other special projects as assigned by the Manufacturing Manager.
12. This position does not require a particular educational background, but does require annual training after employment regarding the handling of hazardous material and/or hazardous waste consistent with 310 CMF 30:516(1 & 2)

Date: _____ Approved: _____

Summary

The Technical Director reports to the President and the Manufacturing Manager and is responsible for planning, directing, and coordinating all activities of the Research/Development and Quality Control laboratories.

1. Responsible for the R&D and QC lab operating and Capital Budgets.
2. Stays attuned to new products, applications, and competition's efforts; Communicates this information internally.
3. Oversees and ensures the safe, efficient operation of the R&D and QC laboratories.
4. Responsible for interpretation of current EPA and DEQE regulations.
5. Serves as internal contact for all R&D communications with Cabot licensees' worldwide.
6. Communicates regularly with raw material vendors to ensure that Cabot quality and standards are being met.
7. Serves on the following committees:
 - A. Manufacturing Management Committee
 - B. R&D Committee
8. Maintains day-to-day communications between the laboratory, management, R&D and QC labs.
9. Acts as manufacturing liaison with sales and marketing personnel.
10. Works with manager of purchasing regarding new raw materials and prices for all products.
11. Performs special projects as assigned by the Manufacturing Manager.
12. This position requires an undergraduate degree in chemistry or chemical engineering, and in addition, requires an annual review regarding the handling of hazardous material and hazardous waste consistent with 310 CMF 30:516(1 & 2).

Date: _____ Approved: _____

JOB DESCRIPTION
SENIOR TECHNICIAN

LAB/Q.C. DEPARTMENT

Summary

The Senior Technician will perform the majority of work related duties with minimal supervision and be well versed in all aspects of an R & D and Q.C. Technician duties including the following:

Duties

1. Train technician in the proper procedures for preparing and making stain samples.
2. Responsible for the proper use and maintenance of Lab and Quality Control equipment.
3. Ensures that both the Lab and Quality Control areas are well stocked making sure that the proper materials and equipment needed to function properly have been ordered.
4. Investigate and develop solutions to any problems or issues concerning lab equipment and/or lab facilities. Confers with supervisor assure implementation of solutions.
5. Performs other work related duties as assigned by his/her supervisor.

Date: _____

4/19/89

Approved: _____

Lee M. D. Till

Summary

The Vice President of Finance and Treasurer reports to the President and is responsible for planning, directing and administering the financial activities of the Company.

Duties

1. Develops and establishes objectives for the finance organization consistent with Company goals.
2. Develops, maintains and directs an effective finance organization through selection, training, development, compensation and motivation of department personnel. Recommends and approves financial organization structure and staffing requirements.
3. Perform the duties of Treasurer as follows:
 - A. Treasury Services
 1. Pension fund administration (means all retirement funds and investment management).
 2. Shareholder records/services
 3. Corporate record custodianship/custodianship of corporate assets
 - B. Risk Management (Property and Executive Benefits)
 1. Insurance
 2. Claims management
 3. Risk avoidance procedures
 4. Property/casualty and benefits
 - C. Credit (currently assisted by controller's department)
 1. New customer analysis and approval
 2. Collections
 3. Receivable monitoring
 - D. Cash and Debt Management
 1. Cash management for optimization of cash flow
 2. Financing (provision of capital)
 3. Bank relations (development and maintenance) and custody
 4. Leasing
 5. Currency exposure (if any)
4. Directly responsible for the activities of the controller's department (including accounting, budgeting, and financial reporting), the Inventory Manager (including accounting for inventory, maintaining efficient levels of inventory, operational monitoring and reporting with regard to inventory and conduct of physical inventories), and the Information and Services Manager (including planning and organizing company data processing systems, formulating and recommending approval of data processing applications).

JOB DESCRIPTION
VICE PRESIDENT OF FINANCE AND TREASURER
PAGE 2

5. Advises and assists the President and other members of management on matters pertaining to finance including:
 - A. Review of contracts and proposals for proper cost/pricing and payment terms.
 - B. Developing data for product pricing and customer proposals.
 - C. Corporate strategic planning, acquisition, profitability and other special studies including the review of capital expenditure requests.
6. Stays abreast of current developments and maintains relationships with the financial community and audit firms.
7. Performs all special projects assigned by the President.

DATE:

5/11/89

APPROVED:



Summary

The Information Systems Services Manager reports to the Vice President of Finance and is responsible for planning and organizing the company data processing systems to attain management objectives; to formulate and recommend approval of data processing applications to solve business problems.

Duties

1. Data processing planning and development
 - A. Hardware needs
 - B. Software needs
 - C. Personnel needs
 - D. Data processing budget
 - E. Management needs
 - F. Coordination and preparation of Data Processing Procedural Manual
2. Data Processing Operations
 - A. Job scheduling
 - B. Data entry training
 - C. Data control, data flow and security
 - D. User/operator documentation maintenance
3. Remote Locations
 - A. Maintenance of software as required
 - B. Training and problem solving
 - C. Ensure system controls and periodic file backup procedures to ensure the accuracy of the data being used.
4. Maintain list of goals
5. Responsible for purchasing and maintaining all office support systems such as copiers, telephones and metered mail machine.
6. Performs other assignments as requested by the Vice President of Finance.

Date: 4/20/85

Approved: 

JOB DESCRIPTION
TECHNICIAN

Lab/QC DEPARTMENT

Summary

The technician is responsible for performing process/Quality Control inspections on beginning batch, in process and final testing of all manufactured products.

Duties

1. Makes and prepares stain samples according to written formulas and directions.
2. Evaluate stain samples using accepted Quality Control methods and performs other tests such as outdoor exposures.
3. Responsible for written reports on lab projects and for maintaining a neat up-to-date lab notebook on all assigned projects.
4. Operates, cleans and assists in the maintenance of laboratory equipment.
5. Uses and operates the laboratory personal computer.
6. Cross-trained to work in either Quality Control or Research and Development group as needed.
7. Interacts and communicates on a daily basis with lab and plant personnel.
8. Performs other work related assignments as requested by his/her supervisor.

Date: _____

4/19/89

Approved: _____



JOB DESCRIPTION
QUALITY CONTROL MANAGER

LAB/QC DEPARTMENT

Summary

The Quality Control Manager reports to the Technical Director or the Laboratory Manager and is responsible for organizing, staffing, implementing and directing Quality Control Program of Samuel Cabot, Inc. and its affiliates.

Duties

1. Establishes and administers proper quality specifications for in-process controls and final product controls to cost effectively meet corporate and customer reliability requirements.
2. Performs analysis and evaluation testing of production from international groups to ensure compliance with accepted standards.
3. Identifies and analyzes causes of production defects or failures. Recommends and implements positive corrective actions in conjunction with the research and Development Lab.
4. Responsible for issuance of product formulas, the wash solvent system, establishment of filling controls and all raw materials.
5. Directs, supervises and trains quality control technicians.
6. Interfaces with Customer Service personnel and provides training and guidance where needed.
7. Assists customers with recommendations on the proper use of stains.
8. Acts as Liaison between Production Department and R & D Lab.
9. Performs other assignments as requested by the Technical Director.

Date:

6/6/89

Approved:

Luke M. D. Selby

SAMUEL CABOT INC.
JOB DESCRIPTION

Job Title: Process Engineer
Department: Manufacturing
Reports To: Plant Superintendent
FLSA Status: Salaried Exempt
Prepared by: Dick Papenfuss **Date:** 9/25/02
Approved by: **Date:**

SUMMARY

The Process Engineer position reports to the Plant Superintendent. This position provides engineering support for manufacturing process problems.

ESSENTIAL DUTIES AND RESPONSIBILITIES include the following. Other duties may be assigned.

- Perform continuous improvement activities relative to manufacturing process, including Statistical Process Control and Failure Mode Analysis in support of annual and 5-year plans.
- Continuous improvement: Responsible for identifying and implementing opportunities to continually reduce total cost. Develop and implement continuous improvement initiatives and metrics.
- Participate in startup and commissioning of production equipment.
- Fill in for a manager of any production department as requested including Plant Superintendent.
- Works with Maintenance Manager in the development of preventive maintenance programs for production equipment.
- Perform production employee training and skill certification.
- Participate in the implementation of ISO9000 Quality System for manufacturing, for the purpose of obtaining third party certification.
- Update and develop the quality system documentation for manufacturing as required.
- Responsible for State and Federal Environmental compliance.
- Coordinates capital projects with outside vendors and the Maintenance Department.
- Performs special projects as directed by Plant Superintendent.

SUPERVISORY RESPONSIBILITIES

- Supervises unit bargaining employees when filling in for Production Supervisors or Plant Superintendent.

QUALIFICATIONS

- Experience in batch production processing in a fast-paced manufacturing environment.
- Experience with solving production process problems and a history of continuous process improvement successes utilizing engineering skills.
- Experience setting up and operating equipment.

- Experience with environmental issues.
- Hands-on support of ISO9000 Quality System, including writing of work instructions, training operators, and measuring results.
- Ability to make decisions and to exercise good judgment utilizing up-to-date management techniques for direction and evaluation.

EDUCATION AND/OR EXPERIENCE

- Bachelor's degree in Engineering plus 2-5 years work experience.
- Computer skills—Word, Excel.

LANGUAGE SKILLS

- Ability to communicate professionally and effectively with internal and external contacts at all organizational levels.

MATHEMATICAL SKILLS

- Engineering mathematical skills.

REASONING ABILITY

- Organized, logical problem solving skills.

CERTIFICATES, LICENSES, REGISTRATIONS

N/A

PHYSICAL DEMANDS

- Climbing stairs.
- Working extended periods on concrete floor.

WORK ENVIRONMENT

- Manufacturing, warehouse, laboratory, and office environment.

US EPA ARCHIVE DOCUMENT

0052-0286

SAMUEL CABOT INC.
JOB DESCRIPTION

Job Title: Process Engineer
Department: Manufacturing
Reports To: Plant Superintendent
FLSA Status: Salaried Exempt
Prepared by: Dick Papenfuss **Date:** 9/25/02
Approved by: **Date:**

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- Ability to communicate professionally and effectively with internal and external contacts at all organizational levels.

MATHEMATICAL SKILLS

- Engineering mathematical skills.

REASONING ABILITY

- Organized, logical problem solving skills.

CERTIFICATES, LICENSES, REGISTRATIONS

N/A

PHYSICAL DEMANDS

- Climbing stairs.
- Working extended periods on concrete floor.

WORK ENVIRONMENT

- Manufacturing, warehouse, laboratory, and office environment.

Samuel Cabot Incorporated
Response to Request for Information for
Turchin Junkyard Superfund Site

[Person(s) who provided information relied on in answering questions denoted by ()]

We note that the EPA's Information Request is addressed to Samuel Cabot Manufacturing. We have never used that name, and we do not know who Samuel Cabot Manufacturing is. We are responding to EPA's request as if it were addressed to Samuel Cabot Incorporated.

1. Respondent's Operations (Cabot, Gihlstorf, Marini, Rust)

a. Address of Plants

Samuel Cabot Incorporated (Discontinued)
229 Marginal Street
Chelsea, MA 02150

Samuel Cabot Incorporated
100 Hale Street
Newburyport, MA 01950

Samuel Cabot Incorporated (Discontinued)
442 Valley Drive
Brisbane, CA 94005

Samuel Cabot Incorporated
23284 Eichler Street
Hayward, CA 94545

Samuel Cabot Incorporated (Discontinued)
Vancouver, BC
CANADA

b. Nature of Operations at Each Location

i. **Chelsea, MA** (Cabot, Gihlstorf, Rust)

Still Operation:

1877 - 1976 with a short interruption for rebuilding after the Great Chelsea Fire in 1908. The Company purchased coal tar from Boston Edison and transported the material in company ships to Cabot's Chelsea location where it was distilled into

creosote oil and pitch. The pitch was sold as a roofing material while the creosote oil was used in the manufacture of wood stain and other consumer products such as tree healing paint, tasgon, gutter paint, and so forth.

The still operation was discontinued in 1976 and dismantled in 1979.

Prior to 1975, the manufacture of wood stain consisted of collecting a variety of combustible solvents (mineral spirits, kerosene, heavy aromatic naphtha, and oils such as creosote oil, linseed oil, fish oil, and pigments) in a chaser mill where the ingredients were mixed and blended with some size reduction also occurring and commonly referred to as "grinding."

The manufacturing procedure from 1975 to the close of the plant in 1985 used a high-speed disperser to mix and blend the same ingredients; however, no size reduction occurred.

Following the mixing, blending, and grinding procedure, other rheological ingredients were added as the batch was standardized. Once the product was standardized for color and specific gravity, it was packaged in pint, quart, gallon, 5-gallon, and 55-gallon containers.

**ii. Vancouver, BC (Cabot)
CANADA**

The plant operated for approximately ten years and closed in 1971. The plant manufactured wood stain; and the technology was similar to the Chelsea manufacturing operation, using chaser mills.

iii. Brisbane, CA (Marini)

This plant operated from 1970 - 1985 and consisted only of a blending operation. A product called "paste" was manufactured in Chelsea which consisted of a very heavy stain paste compound. The paste was shipped to Brisbane and was reduced in viscosity using mineral spirits. It was then packaged for sale on the West Coast.

iv. Hayward, CA (Marini)

This plant opened in 1985 and is equipped to manufacture wood stain with a high-speed disperser and several holding tanks. This plant continues to receive approximately half of its volume in the form of paste from Newburyport.

v. **Newburyport, MA** (Gihlstorf)

This plant has been in operation since 1985. Because of its design to control and prevent pollution, it is considered to be a "state-of-the-art" facility. The plant uses high-speed dispersers to mix and blend the various ingredients to produce a wide range of wood stain including opaque stains, semi-solid stains, semi-transparent stains, decking stains, and PTW stains.

c. Changes in Operations

See "b" above.

d. List of Products (Gihlstorf, Rust)

A list of the products manufactured by Samuel Cabot Incorporated is enclosed. See Appendix I.

The Chelsea and Newburyport sites manufactured the whole range of Cabot products in the Company's line of products at the time of their operation.

e. Types of Raw Materials Used (Doherty, Gourlay)

The manufacture of wood stain involves the use of combustible solvents, pigments, driers, oils, and other rheological ingredients. See Appendix II.

All of the Cabot sites recycle wash solvent into subsequent batches which are compatible in color and formulation.

f. MSDS (Doherty, Gourlay, Synnott)

Copies of available MSDS', including those for all materials currently used, are included in Appendix II

g. Cleaning & Maintenance of Equipment (Gihlstorf)

- i. The cleaning of the chaser mills and dispersers is accomplished by withholding a small amount of mineral spirits from the batch to be used in the cleanup. The mills and dispersers are flushed with this solvent until they are clean, and the solvent is then pumped back into the batch and becomes part of the final formulation. Filters and fillers are cleaned by flushing with mineral spirits, and the spent solution is sent to a holding tank where it is used in subsequent batches.
- ii. The amount used annually depends on the number of batches made per year. From 1980 - 1990 our plants averaged between 750 and 1,100 batches per year.

h. Spill Clean-Up Methods (Gihlstorf)

There were no spills in the Newburyport plant during the period being investigated other than occasional, minor operational spills which were cleaned up using Speedi-Dri and/or rags.

Chelsea, MA - Spill #1

i. Type of Materials Spilled (Rust)

September 12, 1973: A spill of coal tar from a holding tank at the Chelsea site apparently caused by a disgruntled employee in the nighttime. Cleanup by the Morelli Maintenance Corp., 385 Elliott Street, Newton Upper Falls, MA 02164 and Coastal Services, 22 River Street, Braintree, MA 02184. Attempts to contact both companies at the above addresses indicate they may no longer be in business.

ii. Materials Used to Clean Up Spills (Rust)

Sand, floating boom, vacuum truck, and vacuum barge.

iii. Methods Used to Clean Up Spills (Rust)

Material was vacuumed into truck and barge.

iv. Disposal Site of Cleaned Up Material (Gihlstorf)

Unknown.

Chelsea, MA - Spill #2

i. Type of Materials Spilled (The1)

February 4, 1983: #4 Fuel Oil

ii. Materials Used to Clean Up Spills (The1)

Sand, floating boom, absorbent pads, vacuum truck, Bobcat.

iii. Methods Used to Clean Up Spills (The1)

Mixed sand with oil and collected with Bobcat. Used sausage booms and absorbent pads to collect oil on the water.

iv. Disposal Site of Cleaned Up Material (Gihlstorf)

Handled by Coastal Services under Hazardous Waste Manifest:

M5741, 5744, 5745, MA2209, MA5846, MA5848, MA5847, MA10557, and MA10556.

Sent to: Peabody Clean Industry
170 Border Street
E. Boston, MA 02128

CECOS International
4528 Royal Avenue
Niagara Falls, NY 14302

Chelsea, MA - Spill #3

i. Type of Materials Spilled (Gihlstorf)

March 6, 1983: #4 Fuel Oil

ii. Materials Used to Clean Up Spills (Gihlstorf)

Sand and shovel.

iii. Methods Used to Clean Up Spills (Gihlstorf)

Shovel used to mix sand and oil then transferred to other hazardous waste in process at the time.

iv. Disposal Site of Cleaned Up Material (Gihlstorf)

Unknown: Quantity was only one gallon and was cleaned up and handled by the regular Chelsea work crew and was commingled with other hazardous waste.

i. Schematic Diagram

Schematic diagram for Chelsea and Newburyport included.

2. Wastes & Waste Streams

a. Waste Survey (Papenfuss)

See attached.

b. Each Type of Waste from Samuel Cabot, Incorporated's Operations (Papenfuss)

- A. Asbestos Pipe Insulation from Remodeling: White solid, 4 ft.³ from disposal each in 1984 and 1985.
- B. Naphthalene: Off-white solid; odor unknown; 65 yd.³ for disposal in 1981.
- C. Aerocarb Cleaner: Liquid with dry paint sludge mixture of methylene chloride and cresylic acid; dark brown color; strong acrid odor; five drums in four years (1987-1990).
- D. Methylene Paint Stripper: Liquid with water and dry paint sludge; strong odor; four drums in 1989.
- E. Gardener Denver 6000 Lubrication Air Compressor Oil: Amber color; mild oil smell; 12 drums in four years (1987-1990).
- F. Hydraulic Fluid: Brown color; mild oil smell; four drums in 1987.
- G. Waste Stains/Sawdust: Mixture of off-spec stains and sawdust to form a solid of various colors of gray, brown, red, and blue consisting of mineral spirits, linseed oil, inert pigments with a mild solvent smell; 1,756 drums from 1983-1985.
- H. Waste Stains/Off-Spec Product: Various blends of liquid and solid sludges from precipitated product and unusable product; various colors of gray, brown, red, and blue with a mild solvent odor; 569 drums from 1987-1990.
- I. Latex Wash Water: Liquid with very low solids, cloudy gray and brown color; slight ammonia smell; 127 drums and 1,750 gallons from 1984-1985 and 1988-1989.
- J. Latex Wash Water with Super Ad It: Liquid with low solids; gray color containing a complex mercury compound and a preservative; slight ammonia smell; 16 drums and 5,000 gallons from 1987.
- K. Wash Solvents: Low solids liquid with mineral spirits, kerosene, and high aromatic naphtha; gray/brown color; mild solvent smell; 12,000 gallons from 1985-1986.
- L. Water/Solvent: Water contaminated with mineral spirits; cloudy off-white color; mild solvent smell; 2,950 gallons from 1986.
- M. Creosote/Dirt: Mixture of creosote, dirt, and Speedi-Dri absorbent from cleaning a spill. Dark brown solid; strong solvent/petroleum smell; 12 drums from 1986.

- N. Mixed Solvents: Clear liquid with solvent smell of mineral spirits and high aromatic naphtha; 4,129 gallons from 1985.
- O. Sawdust/Linseed Oil: Amber liquid with sawdust to form a solid; mild odor; 76 drums from 1984-1985.
- P. Off-Spec Stain: Gray/brown liquid with some solids consisting of mixed petroleum solvents, linseed oil, alkyd resin, inert pigments; mild solvent odor; 3,932 gallons in 1984.
- Q. Tank Bottoms: High viscosity dark brown/black liquid mixture of asphalt and coal tar; petroleum smell; 233 drums from 1983.
- R. Oily Dirt from Spill: Mixture of dirt and heavy petroleum distillates; dark brown to black in color with a petroleum smell; 68,360 lbs. and 40 yd.³ from 1983.
- S. Tank Cleanings: Viscous dark brown petroleum-based sludge with a petroleum smell; 60 drums and 600 gallons from 1981 and 1983.
- T. Oil/Water from Spill: Mixture of petroleum distillates and water; two-phase with a petroleum smell; 9,600 gallons from 1983.
- U. Fiber Drums: Brown Kraft paper fiber drums previously used for shipping and storing various liquid and solid raw materials. Empty drums put into dumpster for disposal by trash hauler, BFI.
- V. Steel Cans, Pails, Drums: Damaged and dirty one-gallon cans from production, damaged and dirty five-gallon pails from production, and raw material usage and a few damaged 55-gallon drums from raw material usage. Empty containers put into the dumpster for disposal by trash hauler, BFI.
- W. Corrugated Packaging: Brown and white corrugated Kraft paper packaging materials from in-house use, raw material shipments, and supply shipments. Materials were put into dumpster for disposal by trash hauler, BFI.
- X. Plastic Wrap: Clear and colored polyethylene stretch wrap and shrink wrap from raw material pallets. Material was put into the dumpster for disposal by trash hauler, BFI.
- Y. Paper Bags: Brown and white Kraft multi-wall paper bags from shipments of dry powdered raw materials. Bags were put into dumpster for disposal by trash hauler, BFI.
- Z. Speedi-Dri Absorbent: Used to clean up various oil and stain spills when dry material was placed into dumpster for disposal by trash hauler, BFI.

AA. Cotton Rags: Used to wipe up small spills and wipe oil, grease, and stain off equipment. Usually soaked in water to prevent spontaneous combustion before being put into dumpster for disposal by trash hauler, BFI.

c. Schematic Diagram (Gihlstorf)

See attached.

d. Person(s) Responsible for Collecting & Managing Each Type of Waste (Gihlstorf)

Gus Herman - Plant Superintendent 1938-1978 (Deceased)
 Howard Rust - Plant Superintendent 1959-1985
 Mark Stairs - Plant Superintendent 1981-1987
 Dick Papenfuss - Plant Superintendent 1987-1990

e. Description of how Waste was Collected & Stored Prior to Disposal (Gihlstorf)

Waste described in "b" above was collected in 55-gallon drums and either mixed with sawdust to solidify the contents or the drum was pumped into a larger tanker and then transported. Waste drums were stored on cement floors in Chelsea and Newburyport. Regular trash was collected and disposed of in a dumpster.

3. Disposal/Treatment/Storage/Recycling/Sale of Waste

a. Individuals who Currently have or have had Responsibility for Disposal of Waste (Gihlstorf)

See "2d." above.

b. Individuals who Currently have or have had Knowledge of Disposal of Waste (Gihlstorf)

See "2d." above.

c. Individuals who Currently have or have had Responsibility for Environmental Matters (Gihlstorf)

John Gihlstorf - Manufacturing Manager Chelsea & Newburyport operations	1980 - 1990
Dick Papenfuss - Plant Superintendent Newburyport operations	1987 - 1990
Howard Rust - Retired Chelsea operations	1959 - 1985

Mark Stairs - No longer employed 1970 - 1987
Chelsea & Newburyport operations

Gus Herman - Plant Superintendent 1938 - 1978 (Deceased)
Chelsea operations

- d. For the Previous Three Responses, Provide each Individual's Job Description, Length of Time on Job, & Nature of Information Possessed by Individual (Gihlstorf)

See "3c." above and the attached job descriptions.

- e. Waste Containers (Papenfuss)

In order of decreasing volume, waste was shipped in 55-gallon drums, tank trucks, dumpsters, bags, and cartons.

The drums were black open-head 17H drums. Very few were any other color. There were no distinctive markings on the drums. The only labeling would be the standard hazardous waste label with the Company name and address, EPA ID number, content description, and UN/NA number. Most of these drums were purchased from a drum recycler with a limited number coming from the use of raw materials in the plant.

The tank trucks were the standard over-the-road, 5,000-7,000 gallon capacity tankers as supplied by the waste haulers.

The dumpsters used were 30 yd.³, open top, roll off containers as supplied by the waste hauler.

Very small shipments of asbestos were contained in poly bags. Lab pack chemicals were contained in corrugated and wooden cartons.

- f. Contracts/Agreements for Waste Disposal (Papenfuss)

Typically, a licensed handler of hazardous waste is contacted and told of a waste needing disposal. As a rule, there is no contract or agreement beyond the understanding they are licensed and insured to handle the particular waste. BFI contract dated 1985 included.

- g. Copies of Contracts/Agreements (Gihlstorf)

A copy of the Trash Hauling Contract effective April 1, 1989 is enclosed.

h. Locations Where Waste was Sent (Papenfuss)

1950-1985 - Chelsea: Attempts to locate information on Chelsea trash hauler have failed. The trash hauler was purchased by a larger company, and we cannot determine the buyer.

1985-1990 - Newburyport: Browning Ferris Industries (BFI). Plant trash is sent to either the incinerator in North Andover, MA, or to a Boston-area collection point for further disposal. See Appendix III.

i. Waste Carriers (Papenfuss)

Suffolk Services Inc.
98 Taylor Street
Boston, MA 02122
617/825-9045 617/825-9043
MAD049440951

Clean Industry Inc.
Peabody Clean Industry Inc.
170 Border Street
E. Boston, MA 02128
617/567-6500
MAD0066588906

Price Trucking
67 Beacon Street
Buffalo, NY 14220
800/828-1043
NYD046765574

Solvent Recovery Services of NE Inc.
Lazy Lane
Southington, CT 06489
203/628-8084
CTD009717604

SCA Chemical Services Inc. (Clean Harbors of Boston)
385 Quincy Avenue
Braintree, MA 02184
617/849-1800
MADD053452637

Emergency Technical Services Corp.
Rte. 515
Vernon, NJ
201/697-4424
NJD000692053

Clean Harbors
P.O. Box 193
Kingston, MA 02364
617/585-5111
MAD039322250

Environmental Transfer Corp.
NJD99129184
(No additional information known. May be part of Advanced Environmental Technical Corp., Goldmine Road, Flanders, NJ 07836; NJD080631369.)

Clean Harbors of Natick Inc.
10 Mercer Road
Natick, MA 01760
MAD980523203

Environmental Waste Resources
130 Freight Street
Waterbury, CT 06725
203/755-2283
CTD072138969

Northeast Solvents Reclamation Corp.
300 Canal Street 221 Sutton Street
Lawrence, MA 01840 N. Andover, MA 01845
 508/683-1002
MAD000604447

Browning-Ferris Industries
164 Market Street
Brighton, MA 02135

j. Transported Waste (Papenfuss)

Samuel Cabot Inc. did not transport any of its own wastes from 1981-1990. Information on prior periods is unknown, but it is unlikely any waste was transported.

k. Waste Type/Waste Carrier (Papenfuss)

See Appendix III.

l. Frequency Waste was Picked Up (Papenfuss)

See Appendix III.

m. Volume of Waste Picked Up (Papenfuss)

See Appendix III.

n. Dates Waste was Picked Up (Papenfuss)

See Appendix III.

o. Documents Containing Information Regarding Previous Seven Questions (Papenfuss)

See Waste Manifests.

p. Vehicles Used by Each Waste Carrier (Papenfuss)

See Appendix III.

q. Waste Carriers' Employees who Collected Waste (Papenfuss)

See Appendix III.

r. Ultimate Disposal Site (Papenfuss)

The ultimate disposal site for the waste is chosen by the waste handler and in many cases is unknown to us. Those that are known include:

- | | |
|--|---|
| Naphthalene: | Sent to a secure landfill near Baltimore, MD |
| Flammable Solids: | Sent to SCA Chemical Services secure landfill in Pinewood, SC |
| Combustible Liquids, Sludges, Solids to: | Rollins Environmental - Incineration
Norlite Corp. - Incineration
Marine Shale Processors - Thermal Oxidation
Heritage Environmental - Thermal Oxidation
Tricil Inc. - Incineration |

Non-Hazardous Latex: Sent to GSX Services of SC - Secure landfill

Trash sent to incinerator in North Andover, MA, or Boston area collection station.

s. Documents Indicating Ultimate Disposal Location (Papenfuss)

See Appendix III.

t. How Samuel Cabot, Inc. Managed Pickups of Waste (Papenfuss)

Waste was segregated by type. When a determination was made that the material had no rework potential, the decision was made to dispose of it. A waste handler would be called for a quote if it was a new waste stream. If the price was agreeable, a call would be made for pickup and disposal of the waste. When an invoice for the pickup and disposal was received, the Accounting Dept. would issue a check after a signoff by the appropriate staff member. The check was sent directly to the waste carrier. See enclosed invoices for the amount of each check. See enclosed BFI contract for trash hauling.

No records were kept of who was contacted at the waste carriers' business for pickup. No records are kept of which person in accounting issues which checks, so we do not know which individual paid which bills. Checks are sent to the waste carrier and only indicate a company name and address, not an individual name.

u. Individual/Organization who Selected Location of Waste Disposal (Papenfuss)

In all cases, the waste carrier picked the location where the wastes were to be taken

v. Basis for/Documents Supporting Answer to Previous Question (Papenfuss)

There are no documents to support this, but it is common industry practice.

w. Dates & Circumstances when Waste was Taken to Site and Supporting Documentation (Gihlstorff, Rust, Welsh)

Samuel Cabot Inc. can find no records in its files or any indication from current or previous employees that we ever had any dealings with or ever sent any material to the Turchin Junkyard Superfund Site in Tilton, NH.

4. Environmental Reporting

- a. RCRA I.D. Numbers Issued by EPA or State for Operations (Gihlstorf)

EPA #MAD981067515
 EPA #MAROOA492 Storm Water Permit
 EPA #99M000043 Pesticide Registration
 EPA #MADNE-91-028 Recycling Permit
 US EPA #MAOOO3344 National Pollution Discharge Elimination System Permit in force from 1975 - 1979.

- b. Identify all Federal Offices to Which Respondent (Samuel Cabot Inc.) has Sent or Filed Hazardous Substance or Hazardous Waste Information (Gihlstorf)

U.S. EPA Region I
 JFK Federal Building
 Boston, MA 02203-2211

- c. Years in Which Information was Sent or Filed (Gihlstorf)

Information regarding hazardous waste and other hazardous substances was sent during the years 1981 - 1993.

- d. Identify all State Offices to Which Respondent (Samuel Cabot Inc.) has Sent or Filed Hazardous Substance or Hazardous Waste Information (Gihlstorf)

Dept. of Environmental Protection
 10 Commerce Way
 Woburn, MA 01801

MA Dept. of Environmental Protection
 P.O. Box 4062
 Boston, MA 02211

MA Dept. of Environmental Protection
 One Winter St., 5th Floor
 Boston, MA 02108

- e. Years in Which Information was Sent or Filed (Gihlstorf)

1981 - 1993

- f. List all Federal & State Environmental Laws and Regulations Under Which Respondent has Reported to Federal or State Governments (Gihlstorf)

Emergency Planning & Community Right-to-Know Act of 1986

Sent to: EPCRA Reporting Center
P.O. Box 3348
Merrifield, VA 22116-3348

EPA Title 3, Section 312

Sent to: Brad Stuart
Dept. of Environmental Protection
5 Commonwealth Ave.
Woburn, MA 01801

Massachusetts Dept. of Environmental Protection Toxic Use Reduction Act Forms

Sent to: P.O. Box 4062
Boston, MA 02211

310 CMR-30.000 Hazardous Waste Regulations Annual Report

Sent to: Dept. of Environmental Quality Engineering
Div. of Solid & Hazardous Waste
One Winter St., 5th Floor
Boston, MA 02108

National Pollution Discharge & Elimination System MA003344

Federal Water Pollution Control Act; Section 43-44 of Chapter 21

Sent to: EPA Region I
Permit Branch
JFK Federal Building
Boston, MA 02203-2211

MA Water Resource Commission

Div. of Water Pollution Control
Leveritt Saltonstall Bldg.
Boston, MA 02202

MA Air Pollution Control Regulation 310CMR7.12

Sent to: Dept. of Environmental Protection
Bureau of Waste Prevention
10 Commerce Way
Woburn, MA 01801

Federal EPA 40 CPR Waste Minimization Report

Sent to: U.S. EPA Region I
Waste Management Division
JFK Federal Building
Boston, MA 02203-2211

U.S. EPA Annual Pesticide Report Section 7 under FIFRA - 000043-MA-01

Sent to: U.S. EPA Region I
Pesticide Section APP
JFK Federal Building
Boston, MA 02203-2211

- g. Federal & State Offices Information was Sent To (Gihlstorf)

See "4f." above.

5. General Information About Samuel Cabot Inc.

- a. Full Legal Name & Mailing Address (Gihlstorf)

Samuel Cabot Incorporated
100 Hale Street
Newburyport, MA 01950

- b. For Each Person Answering These Questions on Behalf of Samuel Cabot Inc., provide:
(Gihlstorf)

John Gihlstorf
Manufacturing Manager
Samuel Cabot Inc.
100 Hale Street
Newburyport, MA 01950

Phone: 508/465-1900

Fax: 508/462-0511

- c. Person Designated for Future Correspondence Regarding This Site (Gihlstorf)

John Gihlstorf
Samuel Cabot Inc.
100 Hale Street
Newburyport, MA 01950

508/465-1900

- d. Provide the Names of all Superfund Sites Throughout the Country for which Samuel Cabot Inc. has Received Notification of its Potential Liability from EPA (Gihlstorf)

The Solvents Recovery Service of New England
Southington, CT

Cannon Superfund Sites:

- A. Bridgewater, MA
- B. Plymouth, MA

- C. Tinkhans Garage Site
Londonderry, NH

- D. Gilson Road Site
Nashua, NH

- e. Provide the Names of all Superfund Sites in Region I (New England) for which Samuel Cabot Inc. has Received a Request for Information from EPA (Gihlstorf)

See "d" above.

6. Samuel Cabot Incorporated's Legal & Financial Status

- a. Number of Current Employees: 77 (Gihlstorf)
- b. State the Annual Average Number of Persons Employed by Samuel Cabot Inc. for every Five Year Period during the Period being Investigated (Gihlstorf)

1952 - 1980: 115-125 (estimate)
1980 - 1985: 90
1985 - 1990: 75

- c. Doing Business Under Any Other Name: Cabot Stains (not registered as a d/b/a) (Gihlstorf)
- d. Financial Information for each of the Last Three Years (McGonigle)

Confidential information; see Appendix IV.

- e. If Samuel Cabot Inc. is a Corporation, provide: (McGonigle)
 - i. **Date of Incorporation:** 1907
 - ii. **State of Incorporation:** Massachusetts
 - iii. **Agent for Service of Process:** Sullivan & Worcester
Attn: Chris Cabot
 - iv. **Name of Current Officers:** Samuel Cabot III, , Deborah Bertges, Robert Marini,
William F. McGonigle Jr., John Schutz
 - v. **Name of Current Directors:** Chris Cabot, Bayard Henry, Raymond Miller,
Fred Webster, David Weiner
 - vi. **Name of Current Shareholders Owning more than 5% of Stock:**
Confidential information; see Appendix IV.
 - vii. **Names of all Officers During Period being Investigated:**
Samuel Cabot Jr., Samuel Cabot III, Anthony Faria, J. Alden Keyser,
 - viii. **Names of all Directors During Period being Investigated:**
Christopher Cabot, Henry Cabot, Samuel Cabot, Samuel Cabot Jr.,
Samuel Cabot III, John Bryant, Charles Cheevers, Bayard Henry, Phillip Ketchum,
Elizabeth Lyman, Henry Lyman, Raymond Miller, Fred Webster, David Weiner
 - ix. **Names of all Shareholders Owning More than 5% of Stock at Any Time
During the Period being Investigated:** Confidential information; see
Appendix IV.
- f. Respondent a Partnership: N/A (McGonigle)
- g. Respondent a Trust: N/A (McGonigle)
- h. Respondent Affiliated with Another Corporation: N/A (McGonigle)
- i. Respondent's Predecessors-in-Interest: N/A (McGonigle)
- j. Respondent No Longer Exists as Legal Entity: N/A (McGonigle)
- k. Respondent No Longer Exists as the Same Legal Entity: N/A (McGonigle)
- l. Respondent Filed for Bankruptcy: N/A (McGonigle)

7. Information About Others

a. Information Concerning the Operation of the Site (Gihlstorf, Rust, Welsh)

We note that the request for information was directed to Samuel Cabot Manufacturing. We have never used that name, and we do not know who Samuel Cabot Manufacturing is. We are responding to the information request as if it were addressed to Samuel Cabot Incorporated.

Samuel Cabot Incorporated and its present and former employees consulted in the preparation of this information response have never heard of the Turchin Junkyard or the Turchin Junkyard Superfund Site in Tilton, NH, and have no knowledge of its operation.

b. Availability of Additional Information (Gihlstorf)

Samuel Cabot Inc. believes there are no other people with knowledge of our operation which would provide additional information or documents.

c. Current & Former Employees who have Information Concerning the Site (Gihlstorf)

Same as "a" above.

8. Compliance with this Request

a. Describe all Sources Reviewed or Consulted in Responding to this Request, including but not Limited to: (Gihlstorf)

i. **Names of all Individuals Consulted & Current Titles**

Samuel Cabot, III
President

John Gihlstorf
Manufacturing Manager

William F. McGonigle
Treasurer

Richard Papenfuss
Plant Superintendent

Burt Synnott
Purchasing & Distribution Manager

Ken Fitzgerald
Manager of Information Systems & Services

Jean-Yves Gourlay
Technical Director

Ed Doherty, Jr.
Sr. Lab Technician

Howard Rust (retired)
Operations Manager/Purchasing Manager

Robert Welsh (retired)
Director of Quality Control

Robert Marini
VP Western Division

ii. Current Job Title & Job Description

See enclosed job descriptions for the following positions:

Manufacturing Manager
Controller
Plant Superintendent
Purchasing & Distribution Manager
Manager of Information Systems & Services
Technical Director
Sr. Lab Technician
Director of Quality Control

iii. Job Title & Job Description During the Period Being Investigated

Samuel Cabot, III
Treasurer (1969 - 1978)
President (1978 - present)

John Gihlstorff
Manufacturing Manager (1980 - present)

William F. McGonigle
Controller (1984 - present)

Richard Papenfuss
Plant Superintendent (1987 - present)

Burt Synnott
 Purchasing & Distribution Manager (1983 - present)

Ken Fitzgerald
 Manager of Information Systems & Services (1980 - present)

Jean-Yves Gourlay
 Technical Director (1993 - present)

Ed Doherty, Jr.
 Sr. Lab Technician (1959 - present)

Howard Rust
 Operations Manager/Purchasing Manager (1959 - 1985)

Robert Welsh
 Director of Quality Control (1952 - 1981)

Robert Marini
 VP Western Division (1978 - present)

iv. Current or Past Employee

Samuel Cabot, III:	Current
John Gihlstorff:	Current
William F. McGonigle:	Current
Richard Papenfuss:	Current
Burt Synnott:	Current
Ken Fitzgerald:	Current
Jean-Yves Gourlay:	Current
Ed Doherty, Jr.:	Current
Howard Rust:	Past
Robert Welsh:	Past
Robert Marini:	Current

v. Names of all Divisions of Samuel Cabot, Inc. for which Records were Reviewed

Division records for Chelsea and Newburyport.

vi. Nature of all Documents Reviewed

- Product formulations
- Raw material MSDS sheets
- Sales order forms
- Employment records
- Various reports to EPA, DEQE, and DEP
- Waste manifests

vii. Locations where Documents were Reviewed

Newburyport

viii. Location where Documents are Currently Kept

Newburyport

turchin