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|---|--|------------------------|---|-----------------------------|-------------------------------------|-------------------|
| NON-HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number | 2. Page 1 of | 3. Emergency Response Phone | 4. Waste Tracking Number 612081A | |
| 5. Generator's Name and Mailing Address AL. Army National Guard AL. Army National Guard O.M.S - 28 | | | Generator's Site Address (if different than mailing address) AOC-1 Army Corp. Engineers | | | |
| Generator's Phone: | | | U.S. EPA ID Number NA | | | |
| 6. Transporter 1 Company Name Syncoast Env. Consultants | | | U.S. EPA ID Number | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | |
| 8. Designated Facility Name and Site Address Springhill Landfill Hwy 293, Campbellton Fl. | | | U.S. EPA ID Number | | | |
| Facility's Phone: | | | | | | |
| GENERATOR | 9. Waste Shipping Name and Description | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. |
| | | | No. | Type | | |
| | 1. | Non HAZ Soil Borings | 33 | MD | | 6 |
| | 2. | | | | | |
| | 3. | | | | | |
| 4. | | | | | | |
| 13. Special Handling Instructions and Additional Information Springhill Approval # VA2262 | | | | | | |
| 14. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of hazardous waste. | | | | | | |
| Generator's/Officer's Printed/Typed Name William P. Davis | | | Signature | | Month Day Year 6 12 08 | |
| 15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | |
| 16. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| Transporter 1 Printed/Typed Name Howard FCE - SEC | | | Signature | | Month Day Year 6 12 08 | |
| Transporter 2 Printed/Typed Name | | | Signature | | Month Day Year | |
| 17. Discrepancy | | | | | | |
| 17a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | |
| 17b. Manifest Reference Number: | | | | | | |
| 17c. Alternate Facility (or Generator) | | | U.S. EPA ID Number | | | |
| Facility's Phone: | | | | | | |
| 17d. Signature of Alternate Facility (or Generator) | | | Month Day Year | | | |
| 18. Designated Facility Owner or Operator. Certification of receipt of materials covered by the manifest except as noted in Item 17a | | | | | | |
| Printed/Typed Name P. Allen | | | Signature | | Month Day Year 6 13 08 | |