

**REPUBLIC**
SERVICES**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4908915

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes la-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: Longmont, CO 80504 303-737-6015			e. Generator's Mailing Address: Longmont, CO 80504 303-737-6015			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
612 181512	1/14/2018	Crude Petroleum Hydrocarbon Impured Sol Non-Hazardous			10.14	Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print)	q. Signature	r. Date
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II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wright Choice		
b. Phone: 781-544-1111		
c. Driver Name (Print)	d. Signature	e. Date 8/17/18

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:	b. c. US EPA Number	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date 8-17-18

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908916

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes la-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: FOR OPERATING County Line Road Lafayette, CO 80026 303-727-8915			e. Generator's Mailing Address: FOR OPERATING County Line Road Lafayette, CO 80026 303-727-8915			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
4908916	8-14-2015	Crude Petroleum Hydrocarbon Impured Oil Non Hazardous			8.12	tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date		

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wright Choice		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date
Drew Hood	[Signature]	8-18-15

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:		c. US EPA Number	d. Discrepancy Indication Space:
b.			
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date
Amy		[Signature]	8-18-15

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**REPUBLIC
SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4908917

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80504 303-727-2416		e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80504 303-727-2416				
f. Phone:		g. Phone:				
If owner of the generating facility differs from the generator, provide:		i. Owner's Phone No.:				
h. Owner's Name:		i. Owner's Phone No.:				
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
1028 1813617	07/14/21	Crude / Petroleum Hydrocarbon Industrial Sol Non Hazardous			8.71	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date		

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wright Choice		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: TOP Operating County Line Road Longmont, CO 80504 Account # 10218 TOP Operating		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**REPUBLIC**
SERVICES**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4908918

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: RCF Company County Line Road Longmont, CO 80504 303-727-8016			e. Generator's Mailing Address: RCF Company County Line Road Longmont, CO 80504 303-727-8016		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:		
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
4181 1573412	8/14/2018	Crude / Petroleum Hydrocarbon Impurities Soil Non-Hazardous		8.81	Yps

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print)	q. Signature	r. Date
David Hood	[Signature]	8/20/18

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wishel Clear		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date
David Hood	[Signature]	8-20-18

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: RCF Company 30th & Tower Rd Longmont, CO 80504 303-727-8016	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date
[Signature]	[Signature]	8-20-18

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908919

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: FOR Updating County Line Road Longmont, CO 80504 303-777-1810			e. Generator's Mailing Address: FOR Updating County Line Road Longmont, CO 80504 303-777-1810			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
800P 1812512	8/14/2018	Crude Petroleum Hydrocarbon Impured Sol Non-Hydrocarbon			8.53	Ton

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print)	q. Signature	r. Date
Theresa Smith	[Signature]	8/19/18

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wright		
b. Phone:		
Dion Hood	[Signature]	8-20-18
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: FOR Updating with 2 Tower Rd Commerce City, CO (Account # 184119) FOR Updating.		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date
[Signature]		[Signature]	8/20/18

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
[Signature]		[Signature]	
i. Date		[Signature]	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



REPUBLIC
SERVICES

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908920

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: County Line Road Longmont, CO 80501 303-727-9416			e. Generator's Mailing Address: County Line Road Longmont, CO 80501 303-727-9416		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:		
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
		Crude Petroleum / Motor Oil Hazardous / Non-Hazardous		9.32	Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print)	q. Signature	r. Date
Travis Meyer	[Signature]	8/20/18

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wright Choice		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date
Travis Meyer	[Signature]	8/20/18

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:	c. US EPA Number	d. Discrepancy Indication Space:
b.		
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date
[Signature]	[Signature]	8/20/18

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**REPUBLIC**
SERVICES**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4908921

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: ICF Operating County Line Road Longmont, CO 80501 303-727-8915			e. Generator's Mailing Address: ICF Operating County Line Road Longmont, CO 80501 303-727-8915			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
9105 1519912	5-14-2021	Crude Petroleum Hydrocarbon Impacted Soil Non Hazardous			8.39	Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print) Trent Smith		q. Signature Trent Smith	r. Date
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II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wright + Choice		
b. Phone: Trent Smith		
c. Driver Name (Print) Trent Smith	d. Signature Trent Smith	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: ICF Operating County Line Road Longmont, CO 80501 Account # 90216 ICF Operating	b. US EPA Number	c. Discrepancy Indication Space:
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I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

e. Name of Authorized Agent (Print) Trent Smith	f. Signature Trent Smith	g. Date 8-18-18
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IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			

f. ☐ Friable ☐ Non-Friable ☐ Both % Friable % Non-Friable

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

g. Operator's Name and Title (Print)	h. Signature	i. Date
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*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both

**REPUBLIC
SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4908922

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: FOR Operating County Line Road Longmont, CO 80504 303-727-8916			e. Generator's Mailing Address: FOR Operating County Line Road Longmont, CO 80504 303-727-8916			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
015 1513512	01423021	Crude Petroleum Hydrocarbon Leached Soil Non-Hazardous			212	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date		

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wright Choice		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date
Travis Mayer	J. OM 9/18	8/20/18

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: FOR Operating Burbank Tower Rd Commerce City, CO (Account # 000219) FOR Operating		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		i. Date	
h. Signature			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908923

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes la-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: RCF Operating County Line Road Longmont, CO 80504 303-727-9016			e. Generator's Mailing Address: RCF Operating County Line Road Longmont, CO 80504 303-727-9016		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:		
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity
4908923	01/20/2016	Crude / Petroleum Hydrocarbon injected Soil from Remediation			9.56 Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tom Jacobson		q. Signature Tom Jacobson		r. Date 3/10/16	

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: JL Trucking		
b. Phone: 1721/6008284		
c. Driver Name (Print) JL		d. Signature JL
e. Date 3/10/16		

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: RCF Operating County Line Road Longmont, CO 80504 (Account # 000210) RCF Operating		b. US EPA Number	c. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) Tom Jacobson		f. Signature Tom Jacobson	g. Date 3-10-16

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**REPUBLIC**
SERVICES**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4908927

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TOP Operating County Line Road Lynchburg, CO 80132			e. Generator's Mailing Address: TOP Operating County Line Road Lynchburg, CO 80132		
f. Phone: 303-727-8916			g. Phone: 303-727-8916		
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:		
h. Owner's Name:					
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	Type	n. Total Quantity
5126 1013017	8/14/2017	Crude, Petroleum Hydrocarbon Impured Soil Non Hazardous			8.87
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Teresa Smith		q. Signature Teresa Smith		r. Date 8/12/18	

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wright Choice		
b. Phone: Dion Hood		
c. Driver Name (Print) Dion Hood	d. Signature Dion Hood	e. Date 8-18-18

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: 101st & Tower Rd Commerce City, CO 80022	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) Dion Hood	f. Signature Dion Hood	g. Date 8-18-18

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908928

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes la-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80504 303-727-9910			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80504 303-727-9910			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
512F 1810512	3/14/2021	Crude / Petroleum Hydrocarbon Impacted Soil Non-Hazardous			11.40	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print)			q. Signature		r. Date	

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wright Choice		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Green & Parker Rd Commerce City, CO (Account # 060216 TCF Operating)		b. US EPA Number	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908931

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: County Line Road Longmont, CO 80504			e. Generator's Mailing Address: County Line Road Longmont, CO 80504		
f. Phone: 303-727-8916			g. Phone: 303-727-8916		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
1128 1813512	8/14/18	Crude / Petroleum Hydrocarbon Imported Prod Non Hazardous	2	8.73	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature	r. Date 8/11/18		

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wright Choice		
b. Phone:		
c. Driver Name (Print) Drew Hood	d. Signature	e. Date 8-17-18

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Earth & Tower Rd Commerce Co. CO Account # 140214 TOP's Landfill	b. c. US EPA Number	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) Drew Hood	f. Signature	g. Date 8-17-18

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both		i. Date	



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908932

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: For Operating: County Line Road Longmont, CO 80504 303-727-1815			e. Generator's Mailing Address: For Mailing: County Line Road Longmont, CO 80504 303-727-1815		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:		
h. Owner's Name:					
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity
5128 1513612	8/14/08	Crude Petroleum Hydrocarbon Impacted Soil Non-Hazardous			11.69 Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Trevor Smith		q. Signature		r. Date 8/14/08	

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wright Choice		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:		c. US EPA Number	d. Discrepancy Indication Space:
b.			
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908933

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II and III

1007

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80504 303-727-8915			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80504 303-727-8915		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:		
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity
4128 1813517	07/14/2021	Crude / Petroleum Hydrocarbon Impacted Soil Mass / Residue			12.23
					Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date	

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address:		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:		c. US EPA Number	d. Discrepancy Indication Space:
b.			
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**REPUBLIC
SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4908934

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

1025

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80501 303-727-8916			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80501 303-727-8916		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:		
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
5128 1013512	8/14/2011	Crude / Petroleum Hydrocarbon Impacted Soil Non-Hazardous		9.38	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date	

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address:		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908935

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: 101-0700000 County Line Road Longmont, CO 80501 303-727-9916			e. Generator's Mailing Address: 101-0700000 County Line Road Longmont, CO 80501 303-727-9916			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
5128 1012512	01/14/2017	Crude Petroleum Hydrocarbon Impacted Soil Non-Hazardous			20.90	Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print)	q. Signature	r. Date
Tony Smith	[Signature]	5/18/18

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: 720 810 0228 101-0700000		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date
	[Signature]	5/20/18

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: 101-0700000 County Line Road Longmont, CO 80501 303-727-9916		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	
	[Signature]	5/20/18	

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**REPUBLIC
SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4908936

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: County Line Plaza Lafayette, CO 80026		e. Generator's Mailing Address: County Line Road Lafayette, CO 80026			
f. Phone:		g. Phone:			
If owner of the generating facility differs from the generator, provide:		i. Owner's Phone No.:			
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
		Crude / Petroleum Hydrocarbon Impacted Soil / In / Asbestos		7.53	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature	r. Date		

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wright Choice		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:	c. US EPA Number	d. Discrepancy Indication Space:
b.		
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**REPUBLIC
SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4908937

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TOP Operating County Line Road Lehigh, CO 80804 303-737-1016			e. Generator's Mailing Address: TOP Operating County Line Road Lehigh, CO 80804 303-737-1016		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:		
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
1024 1813512	8/14/2018	Crude / Petroleum / Non-hazardous Impure Oil Non-hazardous		8.84	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date	

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address:		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		i. Date	
h. Signature			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908938

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes la-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: County Line Plaza Longmont, CO 80504 303-777-1816			e. Generator's Mailing Address: County Line Plaza Longmont, CO 80504 303-777-1816		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:		
h. Owner's Name:					
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity
814270	8/14/2018	Crude / Petroleum Hydrocarbon Impacted Soil (Non-Asbestos)			17.48
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date	

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Waste Management 8501 W 11th St Denver, CO 80202		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: 2215 E. Tower Rd Longmont, CO 80504		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



REPUBLIC
SERVICES

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908939

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

30

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: TCL Operating County Line Road Longmont, CO 80501 303-727-0915			e. Generator's Mailing Address: TCL Operating County Line Road Longmont, CO 80501 303-727-0915			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
5128 1813512	8/14/2012	Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous			8.22	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date		

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: TCL Environmental Services 17301 6th St #204		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: TCL Operating 4500 S. Tower Rd Commerce City, CO 80022 (Account # 440219 TCL Operating)		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908940

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II and III

24

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: For Operating County Line Road Longmont, CO 80501 303-727-9016			e. Generator's Mailing Address: For Operating County Line Road Longmont, CO 80501 303-727-9016		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:		
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
5120 16175-12	8/14/2018	Crude / Petroleum / Corrosion Impacted Soil / Non-hazardous		11.32	Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print)		q. Signature	r. Date
Tina S. [Signature]		[Signature]	8/12/18

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: JG Trucking 270 366 7058 20 MP 10897		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date
	[Signature]	8/12/18

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: 11750 Colorado Highway 66 & Lower Rd Commerce City, CO Account # 000270 (for Operating)		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date
[Signature]		[Signature]	8/12/18

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		i. Date	
[Signature]		[Signature]	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908941

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location:			e. Generator's Mailing Address:		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity
					19.71

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print)	q. Signature	r. Date
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II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address:		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address:	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both		i. Date	



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908943

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes la-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80501 303 737 9916			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80501 303 737 9916			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
6108 1213512	8/14/2021	Crude / Petroleum / Impregnation Impregnated Soil Non Hazardous			16.79	Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print)	q. Signature	r. Date
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II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Wicked Vibe 5701 Bell St Longmont, CO 80501		
b. Phone: 720 290 0028		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Rocky Mountain 20th & Iovest Rd Longmont, CO 80501 (Account # 1002121011)		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908944

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: FOR Operating County Line Road Longmont, CO 80504 303-727-8016			e. Generator's Mailing Address: FOR Operating County Line Road Longmont, CO 80504 303-727-8016			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
5428 1013510	01/14/2017	Crude / Petroleum Hydrocarbon Increased Soil Non-Hazardous			7.50	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date		

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: JL TRUCKING			
b. Phone: 720-600-8334			
c. Driver Name (Print) Jesse Lopez		d. Signature Jesse Lopez	e. Date August 22, 2017

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: JL TRUCKING 3030 W. 10th St Commerce City, CO 80022 Account # 90219 Trucking		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) Amy		f. Signature Amy	g. Date 8-22-17

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

**REPUBLIC
SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4908945

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is **NOT** asbestos waste, complete Sections I, II and III

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: County Line Road Longmont, CO 80504 303-727-9916			e. Generator's Mailing Address: County Line Road Longmont, CO 80504 303-727-9916			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:			
h. Owner's Name:						
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
8106 1013512	8/1/22	Crude / Petroleum Hydrocarbon Impacted Soil Non-Hazardous			10.35	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date		

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: UL Trucking, Inc. 4200 S. 22nd St. Denver, CO 80202		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Columbia St. W. - Parcel # 000218 (City of Longmont)		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4908948

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete Sections I, II and III

524

I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TOP Generating County Line Road Longmont, CO 80504 303 727-9015			e. Generator's Mailing Address: TOP Generating County Line Road Longmont, CO 80504 303 727-9015		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity
5173 1813512	10/1/2017	Crude / Petroleum Hydrocarbon Inactivated Sol Non Hazardous			15-83 Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print)	q. Signature	r. Date
Thomas S. Smith	[Signature]	3/29/18

II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: W. Chad K. 92		
b. Phone: 770 790 0224		
c. Driver Name (Print)	d. Signature	e. Date
12/1/18	[Signature]	1/22/18

III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: Dun & Foster Rd Commerce City, CO 80022		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	
[Signature]	[Signature]	3/20/18	

IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
i. Date			
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			