

16330

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>CAR000013680</b>		2. Page 1 of 1		3. Emergency Response Phone <b>800-990-9278</b>		4. Manifest Tracking Number <b>009458267 FLE</b>			
5. Generator's Name and Mailing Address <b>ALAMEDA CORRIDOR TRANS. AUTHORITY 3760 KILROY AIRPORT WAY, #200 LONG BEACH, CA 90806 (562) 247-7777</b>						Generator's Site Address (if different than mailing address) <b>Segment 2 Alameda Corridor Vernon, CA 90058</b>					
6. Transporter 1 Company Name <b>CAL WEST ENVIRONMENTAL SERVICES, INC.</b>						U.S. EPA ID Number <b>CAR000047613</b>					
7. Transporter 2 Company Name <b>LIGHTING RESOURCES, LLC</b>						U.S. EPA ID Number <b>CAR000156125</b>					
8. Designated Facility Name and Site Address <b>LIGHTING RESOURCES, LLC 1522 EAST VICTORY STREET, #4 PHOENIX, AZ. 85040 (602) 276-4278</b>						U.S. EPA ID Number <b>AZD983476680</b>					
Facility's Phone:											
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		<b>UN3432, WASTE POLYCHLORINATED BIPHENYLS SOLID, 9, II (SMALL LIGHT BALLAST)</b>				No.	Type				
						<b>1</b>	<b>DM</b>	<b>50</b>	<b>K</b>	<b>261</b>	
14. Special Handling Instructions and Additional Information <b>981 PCB BALLAST OUT OF SERVICE 1X55</b> <b>Wear Appropriate Protective Gear</b> <b>Emergency Response Guide # 981-171</b> <b>Emergency Phone Number (800) 990-9278</b> <i>15 day in Transit Facility Lighting Resources LLC 1625 E. FRANCIS ST. OHTAWA, IL 61704 EPA ID# CAR000156125</i>											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name <b>Elaine Silvestro Agent for ACTA</b>						Signature <i>Elaine Silvestro</i>		Month <b>7</b>	Day <b>5</b>	Year <b>16</b>	
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____										
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: <b>BOBBY DIAZ</b> Signature: <i>Bobby Diaz</i> Month: <b>7</b> Day: <b>5</b> Year: <b>16</b> Transporter 2 Printed/Typed Name: <b>MARNELE RODRIGUEZ</b> Signature: <i>Marnele Rodriguez</i> Month: <b>7</b> Day: <b>11</b> Year: <b>16</b>										
DESIGNATED FACILITY	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator) Facility's Phone: _____						U.S. EPA ID Number: _____				
	18c. Signature of Alternate Facility (or Generator) Printed/Typed Name: _____ Signature: <i>[Signature]</i> Month: <b>07</b> Day: <b>18</b> Year: <b>16</b>										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1: <b>H040</b> 2: _____ 3: _____ 4: _____											
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: <b>Dawn Blackwell</b> Signature: <i>Dawn Blackwell</i> Month: <b>07</b> Day: <b>18</b> Year: <b>16</b>											

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b> (Continuation Sheet)		21. Generator ID Number <b>CAR00013680</b>	22. Page <b>2 of 2</b>	23. Manifest Tracking Number <b>009458267 FLE</b>		
24. Generator's Name <b>Alexander Corridor Trans Authority</b>						
25. Transporter <b>3</b> Company Name <b>Lighting Resources, LLC</b>				U.S. EPA ID Number <b>CAR000156125</b>		
26. Transporter <b>4</b> Company Name <b>Lighting Resources, LLC</b>				U.S. EPA ID Number <b>AZD9834126680</b>		
27a. HM	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Containers		29. Total Quantity	30. Unit Wt./Vol.	31. Waste Codes
		No.	Type			
<div style="position: absolute; transform: rotate(-45deg); opacity: 0.5; font-size: 2em; font-weight: bold;">                     For Trans Purposes Only                 </div>						
32. Special Handling Instructions and Additional Information						
DESIGNATED FACILITY	33. Transporter <b>3</b> Acknowledgment of Receipt of Materials					
	Printed/Typed Name <b>SANTOS RODRIGUEZ</b>	Signature <i>Santos Rodriguez</i>	Month <b>7</b>	Day <b>15</b>	Year <b>16</b>	
TRANSPORTER	34. Transporter <b>4</b> Acknowledgment of Receipt of Materials					
	Printed/Typed Name <b>Wesley Lore</b>	Signature <i>Wesley Lore</i>	Month <b>7</b>	Day <b>16</b>	Year <b>16</b>	
35. Discrepancy						
36. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <i>CAP000013673</i>	2. Page 1 of	3. Emergency Response Phone <i>909-949-0500</i>	4. Manifest Tracking Number <b>010979923 JJK</b>					
5. Generator's Name and Mailing Address <i>ALAMEDA CORRIDOR TRANSPORTATION AUTH. 3700 KILROY AIRPORT WAY STE. 300 LONG BEACH, CA 90805</i>				Generator's Site Address (if different than mailing address) <i>SEGMENT 1 ALAMEDA CORR E 35TH ST. &amp; S. ALAMEDA ST VERNON, CA 94088</i>						
Generator's Phone: <i>562-347-9777</i>				U.S. EPA ID Number <i>CA098361202</i>						
6. Transporter 1 Company Name <i>Nathan McDonald</i>				U.S. EPA ID Number						
7. Transporter 2 Company Name				U.S. EPA ID Number						
8. Designated Facility Name and Site Address <i>NORTHWEST REGIONAL LANDFILL 19401 W. DEER VALLEY ROAD SURPRISE, AZ 85081</i>				U.S. EPA ID Number <i>AZP00001503</i>						
Facility's Phone: <i>623-674-6005</i>										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
		1.	<i>NON-FCRA HAZARDOUS WASTE SOLID ARIZONA REGULATED PCB SPECIAL WASTE</i>	No.	Type					
		2.								
		3.								
		4.								
14. Special Handling Instructions and Additional Information <i>PROFILE # A2283074 ADEC# 7620305 PLEASE WEAR PROPER PERSONAL EQUIPMENT WHEN HANDLING EMERGENCY CONTACT: BRAD VERMAD - (800) 297-8043</i>										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offeror's Printed/Typed Name <i>Elaine Silvestro Agent for ACTA</i>					Signature <i>Elaine Silvestro</i>			Month	Day	Year
								<i>12</i>	<i>09</i>	<i>14</i>
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
	17. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name <i>Nathan McDonald</i>					Signature <i>Nathan McDonald</i>			Month	Day	Year
								<i>12</i>	<i>09</i>	<i>14</i>
Transporter 2 Printed/Typed Name					Signature			Month	Day	Year
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	18b. Alternate Facility (or Generator) U.S. EPA ID Number									
	Facility's Phone: _____									
18c. Signature of Alternate Facility (or Generator)								Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. <i>H130</i>		2.		3.		4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name <i>Simon McCarty</i>					Signature <i>Simon McCarty</i>			Month	Day	Year
								<i>12</i>	<i>10</i>	<i>14</i>

2203 / 45840

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number CAR000019722	2. Page 1 of 1	3. Emergency Response Phone 62 247-7777	4. Manifest Tracking Number 015062547 JJK							
5. Generator's Name and Mailing Address Alameda Corridor Transp Authority 3750 Kirby Airport Way, Suite 200 San Pedro, CA 90706		Alt: Elaine Sylvestro		Generator's Site Address (if different than mailing address) Alameda Corridor Transp Authority Segment 5 Alameda Corridor Compton, CA 90221								
Generator's Phone: 562 247-7777		6. Transporter 1 Company Name PAC Environmental Services, Inc										
		U.S. EPA ID Number CAR000030114										
7. Transporter 2 Company Name		U.S. EPA ID Number										
8. Designated Facility Name and Site Address SOUTH TOWSON COUNTY LANDFILL 19536 S AVENUE 1E YUMA AZ 85365		U.S. EPA ID Number AZR000505980										
Facility's Phone: 928 341 8454												
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes				
		Non-PCRA Hazardous Waste Solid (Dry Debris)		No.	Type			552				
					CM S		Y					
		2.										
		3.										
	4.											
14. Special Handling Instructions and Additional Information NLL BYD #9208 PAC 3972 Alt: ID# 1017 FOOT												
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true:												
Generator's/Offero's Printed/Typed Name Elaine Sylvestro Agent for ACTA								Signature Elaine Sylvestro		Month 11	Day 3	Year 2016
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____											
	17. Transporter Acknowledgment of Receipt of Materials											
	Transporter 1 Printed/Typed Name MARIO MURGUIA								Signature [Signature]		Month 11	Day 3
Transporter 2 Printed/Typed Name								Signature		Month	Day	Year
DESIGNATED FACILITY	18. Discrepancy											
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
	18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____											
	Facility's Phone: _____											
	18c. Signature of Alternate Facility (or Generator)								Month	Day	Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)												
1.		2.		3.		4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a												
Printed/Typed Name NATHAN RIVON								Signature [Signature]		Month 11	Day 4	Year 16