

RFP#57-18
Household Hazardous Waste

Additional Information
March 22, 2018

Attached is information in regards to the previous contract for household hazardous waste services.

- RFP 58-15 Prices submitted
- Invoices from the last four HHW events

Continue below for attachments.

RFP#58-15
Household Hazardous Waste

RFP 58-15 Household Hazardous Waste		Clean Harbors	Clean Venture, Inc.	MXI Environmental Services, LL	Tradebe Environmental Servies, LLC				
Collection Services -		42 Longwater Dr.	138 Leland Street	26319 Old Trail Rd.	47 Gracey Avenue				
March 25, 2015 @ 2:00 p.m.		Norwell, MA 02061-9149	Framingham, MA 01702	Abingdon, VA 24210	Meriden, CT 06451				
		P: 800-792-5000	P: 508-872-5000	P: 276-628-6636	P: 888-276-0887				
			F:0508-875-5271	F: 276-623-0599	F: 203-630-4415				
		Attn: Seth Dawber	Attn: Stephen Ganley	Attn: Marc Kodrowki	Attn: Don Littlefield				
	# Units	Unit	Total	Unit	Total	Unit	Total	Unit	Total
Set Up Fee	1	\$ 1,500.00	\$ 1,500.00	\$ 1,400.00	\$ 1,400.00	\$ 3,500.00	\$ 3,500.00	\$ 1,700.00	\$ 1,700.00
Paint Related Material									
(29) Y3 Box*	29	\$ 345.00	\$ 10,005.00	\$ 375.00	\$ 10,875.00	\$ 355.00	\$ 10,295.00	\$ 661.82	\$ 19,192.78
Resins & Adhesives									
(2) Flex Bins*	2	\$ 650.00	\$ 1,300.00	\$ 350.00	\$ 700.00	\$ 355.00	\$ 710.00	\$ 661.82	\$ 1,323.64
Bulk Flamable Liquids									
(8) 55 Gallon Drums	8	\$ 125.00	\$ 1,000.00	\$ 150.00	\$ 1,200.00	\$ 185.00	\$ 1,480.00	\$ 85.00	\$ 680.00
Flamable Solid									
(1) 5 Gallon Drum	1	\$ 150.00	\$ 150.00	\$ 65.00	\$ 65.00	\$ 125.00	\$ 125.00	\$ 87.50	\$ 87.50
Lab pack Chemicals for Incineration									
(18) 55 Gallon Drums	18	\$ 250.00	\$ 4,500.00	\$ 150.00	\$ 2,700.00	\$ 250.00	\$ 4,500.00	\$ 350.45	\$ 6,308.10
Lab pack Chemicals for Treatment									
(22) 55 Gallon Drums	22	\$ 250.00	\$ 5,500.00	\$ 175.00	\$ 3,850.00	\$ 250.00	\$ 5,500.00	\$ 240.45	\$ 5,289.90
(2) Y3 Box	2	\$ 875.00	\$ 1,750.00	\$ 365.00	\$ 730.00	\$ 750.00	\$ 1,500.00	\$ 731.82	\$ 1,463.64
(1) 5 Gallon Drum	1	\$ 75.00	\$ 75.00	\$ 65.00	\$ 65.00	\$ 125.00	\$ 125.00	\$ 87.50	\$ 87.50
Oxidizing									
(2) 55 Gallon Drum	2	\$ 250.00	\$ 500.00	\$ 175.00	\$ 350.00	\$ 250.00	\$ 500.00	\$ 370.45	\$ 740.90
Mercury									
(1) 5 Gallon Drum	1	\$ 350.00	\$ 350.00	\$ 150.00	\$ 150.00	\$ 125.00	\$ 125.00	\$ 177.50	\$ 177.50
Aerosols									
(8) 55 Gallon Drums	8	\$ 225.00	\$ 1,800.00	\$ 130.00	\$ 1,040.00	\$ 185.00	\$ 1,480.00	\$ 210.45	\$ 1,683.60
Pesticide - Liquid									
(8) 55 Gallon Drums	8	\$ 250.00	\$ 2,000.00	\$ 295.00	\$ 2,360.00	\$ 250.00	\$ 2,000.00	\$ 370.45	\$ 2,963.60
Pesticide - Solid								x12	
(10) 55 Gallon DrumsFlex Bins	10	\$ 250.00	\$ 2,500.00	\$ 250.00	\$ 2,500.00	\$ 250.00	\$ 2,500.00	\$ 175.00	\$ 2,100.00
Lithium Batteries and Nickel, Magnesium Alkaline Batteries								*x12	
(2) 5 Gallon Drums	2	\$ 175.00	\$ 350.00	\$ 125.00	\$ 250.00	\$ 75.00	\$ 150.00		
Total			\$ 33,280.00		\$ 28,235.00		\$ 34,490.00		\$ 43,798.66
Fuel Surcharge			\$ 1,664.00						

March 25,2015

RFP#58-15
Household Hazardous Waste

RFP 58-15 Household Hazardous Waste		Clean Harbors	Clean Venture, Inc.	MXI Environmental Services, LL	Tradebe Environmental Servies, LLC	
Collection Services -		42 Longwater Dr.	138 Leland Street	26319 Old Trail Rd.	47 Gracey Avenue	
March 25, 2015 @ 2:00 p.m.		Norwell, MA 02061-9149	Framingham, MA 01702	Abingdon, VA 24210	Meriden, CT 06451	
		P: 800-792-5000	P: 508-872-5000	P: 276-628-6636	P: 888-276-0887	
			F:0508-875-5271	F: 276-623-0599	F: 203-630-4415	
		Attn: Seth Dawber	Attn: Stephen Ganley	Attn: Marc Kodrowki	Attn: Don Littlefield	
	# Units	Unit	Total	Unit	Total	Unit
			\$ 34,944.00			
*Contrator shall supply prices for all drum sizes and minimum per round rate if any.						
					Exceptions:	
					Lithium Batteries	
					1 -5 Gal pail	\$ 77.50
					Ni Cad Batteries	
					1 5 gal pail	77.50
					Alkaline Batteies	
					1- 5 gal pain	\$ 77.50
					Reactives	
					1- 5 gal pail	\$ 202.50
					Fire extinguishers (each)	
						\$ 18.00
					Asbestos - No hazard codes	
					1 - 5 gal pail	\$ 102.50
						\$ 44,354.16
References (3)			Y		Y	
Insurance - 2 Million General Aggregate			Y		N (Unbrella \$5,000,000.00)	
OSHA Traing						
NHDOT Hazardous Waste Hauling Permit						
Additional disposal fees						

CUSTOMER COPY

Clean Venture, Inc.

INVOICE NO.: 264316-IN



www.cleanventure.com

PLEASE REMIT PAYMENT IN FULL TO: CLEAN VENTURE, INC. P.O. BOX 674981 Detroit, MI. 48267-4981	FOR ANY INFO PERTAINING TO THIS INVOICE DIAL 508-872-5000
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INVOICE DATE: 6/3/2016

EFT TO: COMERICA 39200 6 MILE ROAD LIVONIA, MI 48152	CHECKING ACCOUNT: ABA ROUTING #072000096 BANK ACCOUNT #1853236220
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JOB LOCATION/DESCRIPTION

CITY OF PORTSMOUTH
680 PEVERLY HILL RD.
PORTSMOUTH, NH

CITY OF PORTSMOUTH NH
1 JUNKINS AVENUE
ATTN: JACOB LEVENSON
PORTSMOUTH, NH 03801

Date: MAY 14, 2016

THANK YOU FOR THE OPPORTUNITY TO SERVE YOU.

SALES REP: NICK FOOTE

YOUR ORDER NO.	OUR ORDER NO.	CUSTOMER NO.	TERMS	PAYMENT DUE DATE
N/A	MA39240	00-2001340	Net 30	7/3/2016

CHARGE FOR HOUSEHOLD HAZARDOUS WASTE
COLLECTION, WASTE REMOVAL, AND DISPOSAL

SITE SET-UP FEE	1 EACH	1,400.000	1,400.00
DISPOSAL MANIFEST 014392341 JJK:			
PESTICIDE SOLIDS - CYBX	2 CYBX	1,000.000	2,000.00
PESTICIDE LIQUIDS - CYBX	2 CYBX	1,180.000	2,360.00
ACID LAB PACK - 55 G	1 DRUM	175.000	175.00
ALKALINE LAB PACK - 55 G	1 DRUM	175.000	175.00
DISPOSAL MANIFEST 014392342 JJK:			
CONS. FLAMMABLE PAINT - 55 G	3 DRUM	150.000	450.00
CONS. FLAMMABLE LIQUID - 55 G	6 DRUM	150.000	900.00
AEROSOLS - CYBX	2 CYBX	510.000	1,020.00
PAINT RELATED MATERIAL - CYBX	8 CYBX	375.000	3,000.00
DISPOSAL MANIFEST 014392343 JJK:			
OXIDZIER LAB PACK - 55 G	1 DRUM	175.000	175.00
DISPOSAL NON-HAZ MANIFEST 76550A:			
ANTIFREEZE & OIL - 55 G	5 DRUM	145.000	725.00
DISPOSAL NON-HAZ MANIFEST 2150729:			
RESISN & ADHESIVES - CYBX	5 CYBX	350.000	1,750.00



www.cleanventure.com

Clean Venture, Inc.

CUSTOMER COPY

INVOICE NO.: 264316-IN

PLEASE REMIT PAYMENT INFULL TO: CLEAN VENTURE, INC. P.O. BOX 674981 Detroit, MI. 48267-4981	FOR ANY INFO PERTAINING TO THIS INVOICE DIAL 508-872-5000
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INVOICE DATE: 6/3/2016

EFT TO: COMERICA 38200 6 MILE ROAD LIVONIA, MI 48152	CHECKING ACCOUNT: ABA ROUTING #072000096 BANK ACCOUNT #1853236220
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JOB LOCATION/DESCRIPTION

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680 PEVERLY HILL RD.
PORTSMOUTH, NH

CITY OF PORTSMOUTH NH
1 JUNKINS AVENUE
ATTN: JACOB LEVENSON
PORTSMOUTH, NH 03801

Date: MAY 14, 2016

THANK YOU FOR THE OPPORTUNITY TO SERVE YOU.

SALES REP: NICK FOOTE

YOUR ORDER NO.	OUR ORDER NO.	CUSTOMER NO.	TERMS	PAYMENT DUE DATE
N/A	MA39240	00-2001340	Net 30	7/3/2016

DISPOSAL NON-HAZ MANIFEST 76550C:

MERCURY DEVICES - 5 G	1 PAIL	150.000	150.00
NICKEL CADMIUM BATTERIES - 5 G	1 PAIL	125.000	125.00
LITHIUM BATTERIES - CYBX	589 LBS	6.750	3,975.75
STRAIGHT FLUORESCENT LAMPS - BOX	1 EACH	25.000	25.00

CONTACT: JUDIE BELANGER
LME #: MATM-11078
07-65

IF YOU HAVE ANY SUGGESTIONS ON HOW WE CAN
IMPROVE OUR SERVICE, PLEASE CONTACT DEBBIE
SCERBO - VIP CUSTOMER CARE COORDINATOR.

NET INVOICE: 18,405.75
SALES TAX: 0.00
AMOUNT DUE: 18,405.75

INTEREST CHARGES OF 1.5% PER MONTH (18% PER YEAR) WILL ACCRUE ON ALL PAST DUE AMOUNTS, ON UNPAID AMOUNTS, INTEREST AND ALL EXPENSES OF COLLECTIONS INCLUDING A REASONABLE ATTORNEY FEE IN AN AMOUNT OF 20% WILL BE CHARGED.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NHD510153315	2. Page 1 of 1	3. Emergency Response Phone (014) 395-0887	4. Manifest Tracking Number 014392341 JJK	
5. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702			Generator's Site Address (if different than mailing address) 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801			
6. Transporter 1 Company Name CLEAN VENTURE, INC.			U.S. EPA ID Number NJ0000027193			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address CYCLE CHEM INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206			U.S. EPA ID Number NJ0002200046			
Facility's Phone: (908) 355-5800			U.S. EPA ID Number			
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
RQ	UN2588 , WASTE, PESTICIDES, SOLID, TOXIC, N.O.S. (DIAZINON, LINDANE) 6.1 PG II (RQ D004 1# D014 1#) ERG# 151	002	CF	1,000	P	D004 D014 D016 D020 D036 NHX2
RQ	UN2902 , WASTE, PESTICIDES, LIQUID, TOXIC, N.O.S. (DIAZINON, LINDANE) 6.1 PG II (RQ D004 1# D014 1#) ERG# 151	002	CF	1,000	P	D004 D014 D016 D020 D036 NHX2
RQ	UN3264 , WASTE, CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S. (SULFURIC ACID, MURIATIC ACID) 8 PG II (RQ D002 100#) ERG# 154	001	DF	55	G	D002 NHX2
RQ	UN3266 , WASTE, CORROSIVE LIQUID, BASIC, INORGANIC, N.O.S. (SODIUM HYDROXIDE, AMMONIUM HYDROXIDE) 8 PG II (RQ D002 100#) ERG# 154	001	DF	55	G	D002 NHX2
14. Special Handling Instructions and Additional Information LDR On File 808203/801041/76550/40927/392400765 GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT (1)SPEST-2 SOLID PESTICIDES & HERBICIDES (2)LPEST-1 LIQUID PESTICIDES & HERBICIDES (3)UDM-9 ACID LAB PACK (4)UDW-9 ALKALINE LAB PACK 2xCYB, 2xCYB, 1x55, 9/9/16						
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/Offoror's Printed/Typed Name PAT M'GILLICUDDY				Signature <i>[Signature]</i>		Month Day Year 05 14 16
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 PAT M'GILLICUDDY				Signature <i>[Signature]</i>		Month Day Year 05 14 16
Transporter 2 Printed/Typed Name				Signature		Month Day Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
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. H141		2. H141		3. H141		4. H141
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>[Signature]</i>				Signature <i>[Signature]</i>		Month Day Year 05 18 16

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NHD510153315	2. Page 1 of 1	3. Emergency Response Phone (508) 872-5000	4. Manifest Tracking Number 014392342 JJK	
6. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702			Generator's Site Address (if different than mailing address) 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801			
6. Transporter 1 Company Name CLEAN VENTURE, INC.			U.S. EPA ID Number NJ0000027193			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address CYCLE CHEM INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206			U.S. EPA ID Number NJ0002200046			
Facility's Phone: (908) 355-5800						
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
		No.	Type			
RQ	UN1263, WASTE, PAINT RELATED MATERIAL 3 PG III (RQ D001 100#) ERG# 128	003	DM	165	G	0001 NHX2
RQ	UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (GASOLINE, ACETONE) 3 PG II (RQ D018 10# D001 100#) ERG# 128	006	DM	330	G	0001 F003 F005 D018 D035 NHX2
RQ	UN1950, WASTE, AEROSOLS 2.1 (RQ D001 100#) ERG# 126	002	CF	500	P	0001 NHX2
RQ	UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (XYLENE, TOLUENE) 3 PG II (RQ D001 100# F003 100#) ERG# 128	008	CF	5,000	P	0001 F003 F005 NHX2
14. Special Handling Instructions and Additional Information LDR On File 808203/801041/76550/40928/392400765 GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT (1)IK-6 FLAMMABLE PAINTS - 9/19/88 CONSOLIDATED (2)IK-6 FLAMMABLE LIQUIDS - CONSOLIDATED (3)CR1-5 AEROSOL SPRAY CANS - LOOSE PACK (4)UIK-7 FLAMMABLE MATERIALS IN ORIGINAL CONTAINERS - LOOSE PACK 3x55, 6x55, 2x45, 8x518						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Officer's Printed/Typed Name PAT M'GILLICUDDY				Signature 		Month Day Year 05/14/16
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 PAT M'GILLICUDDY				Signature 		Month Day Year 05/14/16
Transporter 2 Printed/Typed Name				Signature		Month Day Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number: _____						
18b. Alternate Facility (or Generator)						U.S. EPA ID Number
Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator)						Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
H061	H061	H141	H061			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 19a						Month Day Year
Printed/Typed Name 				Signature 		05/18/16

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NHD510153315	2. Page 1 of 1 1	3. Emergency Response Phone (508) 872-5000	4. Manifest Tracking Number 014392343 JJK	
5. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702				Generator's Site Address (if different than mailing address) 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801		
6. Transporter 1 Company Name CLEAN VENTURE, INC.				U.S. EPA ID Number NJ0000027193		
7. Transporter 2 Company Name				U.S. EPA ID Number		
8. Designated Facility Name and Site Address CYCLE CHEM INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206				U.S. EPA ID Number NJD002200046		
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit WL/Vol.	13. Waste Codes
RQ	UN3139, WASTE, OXIDIZING LIQUID, N.O.S. (CALCIUM HYPOCHLORITE, SODIUM HYPOCHLORITE) 5.1 PG II (RQ D007 10#) ERGH 140	001 DF		55	G	D001 D007 NHX2
X	UN3103 WASTE, ORGANIC PEROXIDE TYPE C, LIQUID 5.2 PG II ERGH 146					D001 NHX2
X	UN1325 WASTE, FUSEE 4.1 PG II ERGH 133					D001 NHX2
	WASTE, Waste Asbestos Not Shipped	ERGH 140		002	CF	3500 P
14. Special Handling Instructions and Additional Information B08203/B01041/76550/40929/392400765 GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT (1)UOX-OXIDIZER - LOOSE PACK (2)TWI-9 ORGANIC PEROXIDE - LOOSE PACK (3)R067-11 ROAD FLARES IN WATER 1x55 2x48 979188						
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 PAT M'GILLIVUDDY				Signature <i>[Signature]</i>		Month Day Year 10/14/16
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 PAT M'GILLIVUDDY Signature <i>[Signature]</i> Month Day Year 10/14/16 Transporter 2 Printed/Typed Name _____ Signature _____ Month Day Year _____						
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____						
18b. Alternate Facility (or Generator) Facility's Name: _____				U.S. EPA ID Number: _____		
18c. Signature of Alternate Facility (or Generator) Printed/Typed Name: _____						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.			
H141	H141	H341				
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>[Signature]</i>						Month Day Year 10/18/16

		1. Generator's US EPA ID No.					Manifest Document No.					2. Page 1		
		NH0510153315					7655DA					of 1		
3. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702										A.				
										B. State Gen. ID 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801				
4. Generator's Phone ((508) 872-5000					6. US EPA ID Number					C. State Trans. ID				
5. Transporter 1 Company Name CLEAN VENTURE, INC.					NJ000000027193									
7. Transporter 2 Company Name					8. US EPA ID Number					D. Transporter's Phone ()				
										E. State Trans. ID				
9. Designated Facility Name and Site Address TRADEBE TREATMENT AND RECYCLING NORTHEAST, LLC 136 GRACEY AVENUE MERIDEN, CT 06450										10. US EPA ID Number				
										CITD021816889				
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)										12. Containers No.	Type	13. Total Quantity	14. Unit wt/vol	15. WASTE NO.
a. NON RCRA NON DOT REGULATED MATERIAL (ANTIFREEZE & OIL) 1516376-80										005DM		275 G		CR02 CR04 NHX2
b.														
c.														
d.														
J. Additional Descriptions for Materials Listed Above (include physical state and hazard code.)										K. Handling Codes for Wastes Listed Above				
a. 5x55					c.					a.	c.			
b.					d.					b.	d.			
15. Special Handling Instructions and Additional Information 808203/801041/76550/40930/392400765 (P.O.# 176229) GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT 24 Hour Emergency Number: (508) 872-5000 (1)C00-12 P111313001AFLH ANTIFREEZE & OIL														
16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to Federal Regulations for reporting proper disposal of hazardous waste.										Date				
Printed/Typed Name PAT McGillicuddy					Signature					Month	Day	Year		
										05	14	16		
17. Transporter 1 Acknowledgement of Receipt of Materials										Date				
Printed/Typed Name PAT McGillicuddy					Signature					Month	Day	Year		
										05	14	16		
18. Transporter 2 Acknowledgement of Receipt of Materials										Date				
Printed/Typed Name					Signature					Month	Day	Year		
19. Discrepancy Indication Space														
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19										Date				
Printed/Typed Name					Signature					Month	Day	Year		

GENERATOR

TRANSPORTER

FACILITY



NON-HAZARDOUS WASTE MANIFEST

2150729

1. Generator's US EPA ID Number: OH0512153
Manifest Document Number: 7653-12
2. Page 1 of 1

3. Generator's Name and Mailing Address: CCF OF VENTURE CORP, 133 W. MAIN STREET, FARMERSBURGH, OH 44722
4. Phone (503) 572-5300
5. Generating Location (if different): 600 VENTURE ROAD, FARMERSBURGH, OH 44722
6. Phone ()

7. Transporter #1 Company Name: CCF OF VENTURE CORP
8. US EPA ID Number: NJ000027193
9. Transporter #1's Phone: (503) 572-5300

10. Transporter #2 Company Name
11. US EPA ID Number
12. Transporter #2's Phone

13. Designated T/S/D Facility Name and Site Address: Carbon Limestone Landfill, 8100 S. Stateline Road, Lowellville, OH 44436
14. US EPA ID Number: OH0887048212
15. Facility's Phone: 330-536-8013

16. Waste Shipping Name and Description	17. Republic Services Approval # and Exp. Date	18. Containers		19. Total Quantity	20. Unit Wt/Vol
		No.	Type		
a. <i>Asphalt concrete (AC) (Pavement) (Asphalt concrete)</i> 156381-85	5076191511 04/11/11		NHX2	4,000	P
b.					
c.					

21. Additional Descriptions for Materials Listed Above: 5x CYB

22. Special Handling Instructions and Additional Information: (Generator's name and address) (P.O.# 176263) (1360MLD-13) RESINE, RESINES, UNRES, ETC.

23. 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.

Printed/Typed Name: PAT McMillenuddy
Signature: [Signature]
Month: 05, Day: 14, Year: 16

24. Transporter #1: Acknowledgement of Receipt of Materials
Printed/Typed Name: PAT McMillenuddy
Signature: [Signature]
Month: 05, Day: 14, Year: 16

25. Transporter #2: Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature
Month, Day, Year

26. Discrepancy Indication Space

27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19)
Carbon Limestone Landfill, LLC (330) 536-8013
8100 S. Stateline Rd., Lowellville, OH 44436
Printed/Typed Name
Signature
Month, Day, Year

1. Generator's US EPA ID No. NH0510153315		Manifest Document No. 765500		2. Page 1 of 1	
3. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702				A.	
4. Generator's Phone ((508) 872-5000				B. State Gen. ID 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801	
5. Transporter 1 Company Name CLEAN VENTURE, INC.		6. US EPA ID Number NJ00000027193		C. State Trans. ID	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone ()	
9. Designated Facility Name and Site Address COMPLETE RECYCLING SOLUTIONS 1075 AIRPORT ROAD FALL RIVER, MA 02720		10. US EPA ID Number MAR0000510123		E. State Trans. ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				F. Transporter's Phone ()	
<input checked="" type="checkbox"/> UN3506 UNIVERSAL WASTE - MERCURY CONTAINED IN MANUFACTURED ARTICLES 8 PG III ERG# 172 <i>156386</i>				G. State Facility's ID NOT REQUIRED	
<input checked="" type="checkbox"/> BATTERIES, DRY, SEALED, N.O.S. (NICKEL CADMIUM BATTERIES - UNIVERSAL WASTE) <i>156387</i>				H. Facility's Phone ((508) 402-7700	
<input checked="" type="checkbox"/> UN3090 LITHIUM BATTERY (UNIVERSAL WASTE) 9 PG II ERG# 138 <i>156388</i>				12. Containers No. Type	
<input type="checkbox"/> 4' straight fluorescent light bulbs <i>156389</i>				13. Total Quantity	
J. Additional Descriptions for Materials Listed Above (include physical state and hazard code.)				14. Unit Wt.	
a. <i>1x5</i>		c. <i>1x CYB</i>		WASTE NO. MA95 NHX2	
b. <i>1x5</i>		d. <i>1 Box 4' Bulbs</i>		K. Handling Codes for Wastes Listed Above	
15. Special Handling Instructions and Additional Information 808203/801041/76550/40932/392400765 (P.O.# 177389) GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT 24 Hour Emergency Number: (508) 872-5000 (1)MERMA-17 MERCURY-CONTAINING DEVICES (IN MFG. ARTICLES) (2)NIC-18 NICKEL CADMIUM BATTERIES (3)LIT-16 LITHIUM BATTERIES					
16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to Federal Regulations for reporting proper disposal of hazardous waste.					
Printed/Typed Name <i>PAT McMillen</i>				Signature <i>[Signature]</i>	
17. Transporter 1 Acknowledgement of Receipt of Materials				Date Month Day Year <i>05/14/19</i>	
Printed/Typed Name <i>PAT McMillen</i>				Signature <i>[Signature]</i>	
18. Transporter 2 Acknowledgement of Receipt of Materials				Date Month Day Year <i>05/14/19</i>	
Printed/Typed Name				Signature	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19					
Printed/Typed Name				Signature	
				Date Month Day Year	

GENERATOR

TRANSPORTER

FACILITY



Clean Venture, Inc.

CUSTOMER COPY

INVOICE NO.: 271843-IN

INVOICE DATE: 11/4/2016

JOB COMPLETED: 10/22/2016

PLEASE REMIT PAYMENT INFULL TO: CLEAN VENTURE, INC. P.O. BOX 674981 Detroit, MI. 48267-4981	FOR ANY INFO PERTAINING TO THIS INVOICE DIAL 508-872-5000
--	--

EFT to: Comerica 39200 6 MILE ROAD LIVONIA, MI 48152	CHECKING ACCOUNT: ABA ROUTING #072000096 BANK ACCOUNT #1853236220
--	---

JOB LOCATION
CITY OF PORTSMOUTH, NH
680 PEVERLY HILL ROAD
DPW
PORTSMOUTH, NH 03801

CITY OF PORTSMOUTH NH
1 JUNKINS AVENUE
ATTN: JACOB LEVENSON
Portsmouth, NH 03801

THANK YOU FOR THE OPPORTUNITY TO SERVE YOU.

SALES REP: NICK FOOTE

YOUR ORDER NO.	OUR ORDER NO.	CUSTOMER NO.	TERMS	PAYMENT DUE DATE
N/A	MA39442	00-2001340	Net 30	12/4/2016

DESCRIPTION	QUANTITY	UNIT	PRICE	TOTAL
SITE SET-UP FEE	1	DAILY	1,400.00	1,400.00
DISPOSAL MANIFEST 014393402 JJK:				
PESTICIDE SOLIDS - CYBX	1	CYBX	995.00	995.00
PESTICIDE LIQUIDS - 55 G	4	DRUM	295.00	1,180.00
PESTICIDE LIQUIDS - 30 G	1	DRUM	295.00	295.00
ACID LAB PACK - 55 G	2	DRUM	225.00	450.00
ALKALINE LAB PACK - 55 G	2	DRUM	225.00	450.00
ALKALINE LAB PACK - 30 G	1	DRUM	225.00	225.00
DISPOSAL MANIFEST 014393403 JJK:				
CONS. FLAMMABLE PAINT - 55 G	2	DRUM	275.00	550.00
CONS. FLAMMABLE LIQUID - 55 G	7	DRUM	150.00	1,050.00
AEROSOLS - CBX	2	CYBX	510.00	1,020.00
FLAMM. RESINS & ADHESIVES IN CANS - CYBX	6	CYBX	425.00	2,550.00
DISPOSAL MANIFEST 014393404 JJK:				
OXIDIZER LAB PACK - 55 G	1	DRUM	225.00	225.00
ORGANIC PEROXIDE, TYPE C - 5 G	1	PAIL	125.00	125.00
FUSEE (ROAD FLARES) - 5 G	1	PAIL	135.00	135.00
DISPOSAL MANIFEST 014393405 JJK:				
PCB BALLASTS - 5 G	1	PAIL	150.00	150.00
DISPOSAL NON-HAZ MANIFEST 77449A:				
ANTIFREEZE & OIL - 55 G	6	DRUM	145.00	870.00
DISPOSAL NON-HAZ MANIFEST 2667613:				
RESINS & ADHESIVES IN CANS - CYBX	4	CYBX	395.00	1,580.00



Clean Venture, Inc.

CUSTOMER COPY

INVOICE NO.: 271843-IN

INVOICE DATE: 11/4/2016

JOB COMPLETED: 10/22/2016

PLEASE REMIT PAYMENT INFULL TO: CLEAN VENTURE, INC. P.O. BOX 674981 Detroit, MI. 48267-4981	FOR ANY INFO PERTAINING TO THIS INVOICE DIAL 508-872-5000
--	--

EFT to: Comerica 39200 6 MILE ROAD LIVONIA, MI 48152	CHECKING ACCOUNT: ABA ROUTING #072000096 BANK ACCOUNT #1853236220
--	---

JOB LOCATION
CITY OF PORTSMOUTH, NH
680 PEVERLY HILL ROAD
DPW
PORTSMOUTH, NH 03801

CITY OF PORTSMOUTH NH
1 JUNKINS AVENUE
ATTN: JACOB LEVENSON
Portsmouth, NH 03801

THANK YOU FOR THE OPPORTUNITY TO SERVE YOU.

SALES REP: NICK FOOTE

YOUR ORDER NO.	OUR ORDER NO.	CUSTOMER NO.	TERMS	PAYMENT DUE DATE
N/A	MA39442	00-2001340	Net 30	12/4/2016

DISPOSAL NON-HAZ MANIFEST 77449C:

MERCURY DEVICES - 5 G	1 PAIL	150.00	150.00
NICKEL CADMIUM BATTERIES - 5 G	1 PAIL	125.00	125.00
LITHIUM BATTERIES - 5 G	1 PAIL	125.00	125.00

NET INVOICE: 13,650.00
 SALES TAX: 0.00
 AMOUNT DUE: 13,650.00

TM No.: MATM11596

INTEREST CHARGES OF 1.5% PER MONTH (18% PER YEAR) WILL ACCRUE ON ALL PAST DUE AMOUNTS, ON UNPAID AMOUNTS, INTEREST AND ALL EXPENSES OF COLLECTIONS INCLUDING A REASONABLE ATTORNEY FEE IN AN AMOUNT OF 20% WILL BE CHARGED.

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NHD510153315	2. Page 1 of 1	3. Emergency Response Phone (508) 872-5000	4. Manifest Tracking Number 014393402 JJK	
5. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702				Generator's Site Address (if different than mailing address) 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801		
6. Transporter 1 Company Name CLEAN VENTURE, INC.		Generator's Phone: (508) 872-5000		U.S. EPA ID Number NJ0000027193		
7. Transporter 2 Company Name				U.S. EPA ID Number		
8. Designated Facility Name and Site Address CYCLE CHEM INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206				U.S. EPA ID Number NJ0002200046		
Facility's Phone: (908) 355-5800						
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
		No.	Type			
RG1	UN2588, WASTE, PESTICIDES, SOLID, TOXIC, N.O.S. (DIAZINON, LINDANE) 6.1 PG II (RQ D004 1# D014 1#) ERGH 151 162085	XX1	CF	X500	P	D004 D014 D016 D020 D036 NHX2
RG2	UN2902, WASTE, PESTICIDES, LIQUID, TOXIC, N.O.S. (DIAZINON, LINDANE) 6.1 PG II (RQ D004 1# D014 1#) ERGH 151 55-162086-89 30-162090	XX5	DF	1000	P	D004 D014 D016 D020 D036 NHX2
RG3	UN3264, WASTE, CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S. (SULFURIC ACID, MURIATIC ACID) 8 PG II (RQ D002 100#) ERGH 154 162091-92	XX2	DF	X400	P	D002 NHX2
RG4	UN3266, WASTE, CORROSIVE LIQUID, BASIC, INORGANIC, N.O.S. (SODIUM HYDROXIDE, AMMONIUM HYDROXIDE) 8 PG II (RQ D002 100#) ERGH 154 30-162093	XX3	DF	X500	P	D002 NHX2
14. Special Handling Instructions and Additional Information LDR On File 808203/801041/77449/42602/394420765 GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT (1)SPEST-2 SOLID PESTICIDES & HERBICIDES (2)LPEST-1 LIQUID PESTICIDES & HERBICIDES (3)UDM-3 ACID LAB PACK (4)UDW-4 ALKALINE LAB PACK (1)1XC4B (2)4X55 1X30 (3)2X55 (4)2X55, 1X30						
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, 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/Offoror's Printed/Typed Name STEVEN GALLO				Signature <i>Steven Gallo</i>		Month Day Year 10 22 16
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 STEVEN GALLO				Signature <i>Steven Gallo</i>		Month Day Year 10 22 16
Transporter 2 Printed/Typed Name				Signature		Month Day Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						U.S. EPA ID Number
18b. Alternate Facility (or Generator)						
Facility's Phone:						Month Day Year
18c. Signature of Alternate Facility (or Generator)						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H141	2. H141	3. H141	4. H141			
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				Signature		Month Day Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NHD510153315	2. Page 1 of 1	3. Emergency Response Phone (508) 872-5000		4. Manifest Tracking Number 014393403 JJK					
		5. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702						Generator's Site Address (if different than mailing address) 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801			
6. Transporter 1 Company Name CLEAN VENTURE, INC.						U.S. EPA ID Number NJ0000027193					
7. Transporter 2 Company Name						U.S. EPA ID Number					
8. Designated Facility Name and Site Address CYCLE CHEM INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206						U.S. EPA ID Number NJD002200044					
Facility's Phone: (908) 355-5800											
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			
				No.	Type						
RQ ¹		UN1263, WASTE, PAINT RELATED MATERIAL 3 PG III (RQ D001 100#) ERG# 128 102696-97		XX2 DM		X110	G	D001 NHX2			
RQ ²		UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (GASOLINE, ACETONE) 3 PG II (RQ D018 10# D001 100#) ERG# 128 102698-704		XX7 DM		X385	G	D001 F003 F005 D018 D035 NHX2			
RQ ³		UN1950, WASTE, AEROSOLS 2.1 (RQ D001 100#) ERG# 126 102705-06		XX2 CF		X400	P	D001 NHX2			
RQ ⁴		UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (XYLENE, TOLUENE) 3 PG II (RQ D001 100# F003 100#) ERG# 128 102707-12		XX6 CF		1800	P	D001 F003 F005 NHX2			
14. Special Handling Instructions and Additional Information LDR On File 808203/801041/77449/42603/394420765 GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT (1)IK-8 FLAMMABLE PAINTS - CONSOLIDATED (2)IK-6 FLAMMABLE LIQUIDS - CONSOLIDATED (3)CR1-5 AEROSOL SPRAY CANS - LOOSE PACK (4)UIK-7 FLAMMABLE MATERIALS IN ORIGINAL CONTAINERS - LOOSE PACK											
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/recorded, 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/Offoror's Printed/Typed Name N STEVEN GALLO		Signature <i>Steven Gallo</i>		Month 10		Day 22		Year 16			
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 STEVEN GALLO		Signature <i>Steven Gallo</i>		Month 10		Day 22		Year 16	
		Transporter 2 Printed/Typed Name		Signature		Month		Day		Year	
18. Discrepancy		18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection		Manifest Reference Number:		U.S. EPA ID Number					
18b. Alternate Facility (or Generator)		Facility's Phone:		Signature		Month		Day		Year	
18c. Signature of Alternate Facility (or Generator)											
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1. H061		2. H061		3. H141		4. H061					
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		Signature		Month		Day		Year			

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

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number NHD510153315	2. Page 1 of 1	3. Emergency Response Phone (508) 872-5000	4. Manifest Tracking Number 014393404 JJK
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5. Generator's Name and Mailing Address: **CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702**
 Generator's Site Address (if different than mailing address): **680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801**

Generator's Phone: **(508) 872-5000** U.S. EPA ID Number: **NJ0000027193**

6. Transporter 1 Company Name: **CLEAN VENTURE, INC.** U.S. EPA ID Number: _____

7. Transporter 2 Company Name: _____ U.S. EPA ID Number: _____

8. Designated Facility Name and Site Address: **CYCLE CHEM INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206**
 Facility's Phone: **(908) 355-5800** U.S. EPA ID Number: **NJD002200046**

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
		No.	Type			
RG	1. UN3139, WASTE, OXIDIZING LIQUID, N.O.S. (CALCIUM HYPOCHLORITE, SODIUM HYPOCHLORITE) 5.1 PG II (RQ D007 10#) ERG# 140 162713	XXI	DF X200	P		D001 D007 NHX2
X	2. UN3103 WASTE, ORGANIC PEROXIDE TYPE C, LIQUID 5.2 PG II ERG# 146 162714	XXI	DF XXX5	P		D001 NHX2
X	3. NA1325 WASTE, FUSEE 4.1 PG II ERG# 133 162715	XXI	DF XXX5	P		D001 NHX2
4.						

14. Special Handling Instructions and Additional Information: **808203/801041/77449/42604/394420765** GENERATED FROM **HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT (1)UOX-10 OXIDIZER - LOOSE PACK (2)TWI-9 ORGANIC PEROXIDE - LOOSE PACK (3)R067-11 ROAD FLARES IN WATER**
① IX55 ② IX5 ③ IX5

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 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/Offoror's Printed/Typed Name: **STEVEN GALLO** Signature: *[Signature]* Month: **10** Day: **22** Year: **16**

16. International Shipments: Import to U.S. Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____

17. Transporter Acknowledgment of Receipt of Materials
 Transporter signature (for exports only): _____
 Transporter 1 Printed/Typed Name: **STEVEN GALLO** Signature: *[Signature]* Month: **10** Day: **22** Year: **16**
 Transporter 2 Printed/Typed Name: _____ Signature: _____

18. Discrepancy: Quantity Type Residue Partial Rejection Full Rejection

18a. Discrepancy Indication Space: _____ Manifest Reference Number: _____ U.S. EPA ID Number: _____

18b. Alternate Facility (or Generator): _____

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. **H141** 2. **H141** 3. **H141** 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: _____ Signature: _____ Month: _____ Day: _____ Year: _____

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NHD510153315	2. Page 1 of 1	3. Emergency Response Phone (508) 872-5000	4. Manifest Tracking Number 014393405 JJK	
5. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702 Generator's Phone: (508) 872-5000			Generator's Site Address (if different than mailing address) 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801			
6. Transporter 1 Company Name CLEAN VENTURE, INC.			U.S. EPA ID Number NJ0000027193			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address CYCLE CHEM INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206 Facility's Phone: (908) 355-5800			U.S. EPA ID Number NJ0002200046			
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
			No. Type			
	X	UN3432, POLYCHLORINATED BIPHENYLS, SOLID 9 PG II ERGH 171 <i>11027116</i>	XXI DF	XX10	P	NHX2
	X	2NA2212, ASBESTOS 9 PG III ERGH 171 <i>(1)</i>				ID10 NHX2 <i>(3)</i>
	3.					
4.						
14. Special Handling Instructions and Additional Information 808203/801041/77449/42605/394420765 GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT (1)PCBE4-15 PCB BALLASTS (2)SA1-14 ASBESTOS <i>(3)</i> <i>1 IXS</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 in accordance with 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/Offoror's Printed/Typed Name <i>STEVEN GALLO</i>			Signature <i>Steven Gallo</i>		Month Day Year 10 22 16	
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	Transporter 1 Printed/Typed Name <i>STEVEN GALLO</i>			Signature <i>Steven Gallo</i>		Month Day Year 10 22 16
	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. H132		2. H141		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			Signature		Month Day Year	

1. Generator's US EPA ID No. NH D 5 1 0 1 5 3 3 1 5		Manifest Document No. 7 7 4 4 8 A		2. Page 1 of 1	
3. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702				A.	
4. Generator's Phone ((508) 872-5000				B. State Gen. ID 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801	
5. Transporter 1 Company Name CLEAN VENTURE, INC.		6. US EPA ID Number NJ 0 0 0 0 0 0 2 7 1 9 3		C. State Trans. ID	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone ()	
9. Designated Facility Name and Site Address TRADEBE TREATMENT AND RECYCLING NORTHEAST, LLC 136 GRACEY AVENUE MERIDEN, CT 06450		10. US EPA ID Number CT D 0 2 1 8 1 6 8 8 9		E. State Trans. ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers No. Type	13. Total Quantity
a. NON RCRA NON DOT REGULATED MATERIAL (ANTIFREEZE & OIL) 162717-22				XX 4 DM XX 33 B G	14. Unit Wt/Vol
					1. WASTE NO. CR02 CR04 NHX2
J. Additional Descriptions for Materials Listed Above (include physical state and hazard code.)				K. Handling Codes for Wastes Listed Above	
a. (6x55)				a.	
b.				b.	
c.				c.	
d.				d.	
15. Special Handling Instructions and Additional Information 808203/801041/77449/42606/394420765 (P.O.# 181070) GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT 24 Hour Emergency Number: (508) 872-5000 (1)COO-12 P111313001AFLH ANTIFREEZE & OIL					
16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to Federal Regulations for reporting proper disposal of hazardous waste.					
Printed/Typed Name MARK K. CRONAN				Signature <i>Mark Cronan</i>	
Date 10 27 10				Date 10 27 10	
17. Transporter 1 Acknowledgement of Receipt of Materials				Signature <i>Mark Cronan</i>	
Printed/Typed Name Mark Cronan				Date 10 27 10	
18. Transporter 2 Acknowledgement of Receipt of Materials				Signature	
Printed/Typed Name				Date	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19					
Printed/Typed Name				Signature	
Date				Date	

GENERATOR

TRANSPORTER

FACILITY



REPUBLIC SERVICES

NON-HAZARDOUS WASTE MANIFEST

2667613

Please print or type

1. Generator's US EPA ID Number NJ0512153215		Manifest Document Number 77449B		2. Page 1 of 1			
3. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PRINCETON, NJ 134 LELAND STREET PRINCETON, NJ 08542			5. Generating Location (if different) 600 FEDERAL HILL ROAD PRINCETON, NJ 08541				
4. Phone (505) 871-5000			6. Phone ()				
7. Transporter #1 Company Name CLEAN VENTURE INC.		8. US EPA ID Number NJ000027193		9. Transporter #1's Phone (505) 872-5000			
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone			
13. Designated T/S/D Facility Name and Site Address Carbon Limestone Landfill 8100 S. Stateline Road Lowellville, OH 44436		14. US EPA ID Number OHD987048212		15. Facility's Phone 330-536-8013			
16. Waste Shipping Name and Description a. 100 BAGS AND ONE REINFORCED CONCRETE (BAGS, CONCRETE) 162723-26		17. Republic Services Approval # and Exp. Date 5076413511 04/24/17 NJX2		18. Containers		19. Total Quantity 1600	20. Unit Wt/Vol P
				No.	Type		
b.							
c.							
21. Additional Descriptions for Materials Listed Above (4XC4B)							
22. Special Handling Instructions and Additional Information GENERATOR'S FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT (1) BANNED - 13 BAGS, LAMINATES, WOODS, ETC. (p.p. # 13/107)							
23. 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.							
Printed/Typed Name X MARK PRONAN		Signature X Mark Pronan		Month Day Year 10/22/16			
24. Transporter #1: Acknowledgement of Receipt of Materials							
Printed/Typed Name MARK PRONAN		Signature Mark Pronan		Month Day Year 10/22/16			
25. Transporter #2: Acknowledgement of Receipt of Materials							
Printed/Typed Name		Signature		Month Day Year			
26. Discrepancy Indication Space							
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) Carbon Limestone Landfill, LLC (330) 536-8013 8100 S. Stateline Rd., Lowellville, OH 44436							
Printed/Typed Name		Signature		Month Day Year			

GENERATOR

TRANSPORTER

T/S/D FACILITY

1. Generator's US EPA ID No. NH D 5 1 0 1 5 3 3 1 5		Manifest Document No. 7 7 4 4 9 c		2. Page 1 of 1		
3. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702				A.		
4. Generator's Phone (508) 872-5000				B. State Gen. ID 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801		
5. Transporter 1 Company Name CLEAN VENTURE, INC.		6. US EPA ID Number NJ 0 0 0 0 0 2 7 1 9 3		C. State Trans. ID		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone ()		
9. Designated Facility Name and Site Address COMPLETE RECYCLING SOLUTIONS 1075 AIRPORT ROAD FALL RIVER, MA 02720		10. US EPA ID Number MA R 0 0 0 5 1 0 1 2 3		E. State Trans. ID		
				F. Transporter's Phone ()		
				G. State Facility's ID NOT REQUIRED		
				H. Facility's Phone ((508) 402-7700		
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Weight	WASTE NO.
X UN3506 UNIVERSAL WASTE - MERCURY CONTAINED IN MANUFACTURED ARTICLES 8 PG III ERG# 172 102727		XXI	DF	XIXIX5	P	1A95 NHX2
X BATTERIES, DRY, SEALED, N.O.S. (NICKEL CADMIUM BATTERIES - UNIVERSAL WASTE) 102728		XXI	DF	XXIX15	P	1A95 NHX2
X UN3090 LITHIUM BATTERY (UNIVERSAL WASTE) 9 PG II ERG# 138 102729		XXI	DF	XXIX10	P	1A95 NHX2
d.						
J. Additional Descriptions for Materials Listed Above (include physical state and hazard code.)				K. Handling Codes for Wastes Listed Above		
a. (IX5)		c. (IX5)		a.	c.	
b. (IX5)		d.		b.	d.	
15. Special Handling Instructions and Additional Information 808203/801041/77449/42608/394420765 (P.O.# 183580) GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT 24 Hour Emergency Number: (508) 872-5000 (1)MERMA-17 MERCURY-CONTAINING DEVICES (IN MFG. ARTICLES) (2)NIC-18 NICKEL CADMIUM BATTERIES (3)LIT-16 LITHIUM BATTERIES						
16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to Federal Regulations for reporting proper disposal of hazardous waste.						Date
Printed/Typed Name MARK CRONAN				Signature <i>Mark Cronan</i>		Month Day Year 10 22 16
17. Transporter 1 Acknowledgement of Receipt of Materials						Date
Printed/Typed Name MARK CRONAN				Signature <i>Mark Cronan</i>		Month Day Year 10 22 16
18. Transporter 2 Acknowledgement of Receipt of Materials						Date
Printed/Typed Name				Signature		Month Day Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19						Date
Printed/Typed Name				Signature		Month Day Year

GENERATOR

TRANSPORTER

FACILITY



Clean Venture, Inc.

CUSTOMER COPY

INVOICE NO.: 279456-IN

PLEASE REMIT PAYMENT INFULL TO:
CLEAN VENTURE, INC.
P.O. BOX 674981
Detroit, MI. 48267-4981

FOR ANY INFO PERTAINING TO THIS INVOICE DIAL
508-872-5000

INVOICE DATE: 5/10/2017

JOB COMPLETED: 4/29/2017

EFT to: Comerica
39200 6 MILE ROAD
LIVONIA, MI 48152

CHECKING ACCOUNT:
ABA ROUTING #072000096
BANK ACCOUNT #1853236220

JOB LOCATION
CITY OF PORTSMOUTH, NH
DPW YARD
680 PEVERLY HILL ROAD
PORTSMOUTH, NH 03801

CITY OF PORTSMOUTH NH
1 JUNKINS AVENUE
ATTN: JACOB LEVENSON
PORTSMOUTH, NH 03801

THANK YOU FOR THE OPPORTUNITY TO SERVE YOU.

SALES REP: NICK FOOTE

YOUR ORDER NO.	OUR ORDER NO.	CUSTOMER NO.	TERMS	PAYMENT DUE DATE
N/A	MA39707	00-2001340	Net 30	6/9/2017

SITE SET-UP FEE	1 LUMP SUM	1,400.00	1,400.00
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DISPOSAL MANIFEST 014398158JJK

PESTICIDES/HERBICIDES - SOLIDS - CYBX	2 CYBX	995.00	1,990.00
PESTICIDES/HERBICIDES - LIQUIDS - 55 G	5 DRUM	295.00	1,475.00
ACID LAB PACK - 55 G	1 DRUM	225.00	225.00
ALKALINE LAB PACK - 35 G	1 DRUM	225.00	225.00

DISPOSAL MANIFEST 014398159JJK

CONSOLIDATED FLAMMABLE PAINT SLUDGE - 55 G	4 DRUM	275.00	1,100.00
FLAMMABLE LIQUIDS/SOLVENTS - 55 G	8 DRUM	150.00	1,200.00
AEROSOL CANS - CYBX	2 CYBX	510.00	1,020.00
FLAMMABLE MATERIALS - CYBX	5 CYBX	425.00	2,125.00

DISPOSAL MANIFEST 014398160JJK

OXIDIZERS - 55 G	1 DRUM	225.00	225.00
OXIDIZERS - 15 G	1 DRUM	195.00	195.00

DISPOSAL MANIFEST 78475A

ANTIFREEZE & OIL - 55 G	4 DRUM	145.00	580.00
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DISPOSAL MANIFEST 78475B

NON-HAZ RESINS & ADHESIVES - CYBX	3 CYBX	395.00	1,185.00
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Clean Venture, Inc.

CUSTOMER COPY

INVOICE NO.: 279456-IN

PLEASE REMIT PAYMENT INFULL TO:
CLEAN VENTURE, INC.
P.O. BOX 674981
Detroit, MI. 48267-4981

FOR ANY INFO
PERTAINING TO THIS
INVOICE DIAL
508-872-5000

INVOICE DATE: 5/10/2017

JOB COMPLETED: 4/29/2017

EFT to: Comerica
39200 6 MILE ROAD
LIVONIA, MI 48152

CHECKING ACCOUNT:
ABA ROUTING #072000096
BANK ACCOUNT #1853236220

JOB LOCATION
CITY OF PORTSMOUTH, NH
DPW YARD
680 PEVERLY HILL ROAD
PORTSMOUTH, NH 03801

CITY OF PORTSMOUTH NH
1 JUNKINS AVENUE
ATTN: JACOB LEVENSON
PORTSMOUTH, NH 03801

THANK YOU FOR THE OPPORTUNITY TO SERVE YOU.

SALES REP: NICK FOOTE

Table with 5 columns: YOUR ORDER NO., OUR ORDER NO., CUSTOMER NO., TERMS, PAYMENT DUE DATE. Values include N/A, MA39707, 00-2001340, Net 30, 6/9/2017.

DISPOSAL MANIFEST 78475C

WATER METERS W/ LITHIUM BATTERIES - CYBX 2109 POUNDS 6.75 14,235.75

PROJECT NAME DESCRIPTION HHW Day

P.O.# PROJECT #

VEHICLE #

APPROVED BY [Signature]

ACCT#

TM No.: MATM12151

NET INVOICE: 27,180.75
SALES TAX: 0.00
AMOUNT DUE: 27,180.75

INTEREST CHARGES OF 1.5% PER MONTH (18% PER YEAR) WILL ACCRUE ON ALL PAST DUE AMOUNTS, ON UNPAID AMOUNTS, INTEREST AND ALL EXPENSES OF COLLECTIONS INCLUDING A REASONABLE ATTORNEY FEE IN AN AMOUNT OF 20% WILL BE CHARGED.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NHD510153315	2. Page 1 of 1	3. Emergency Response Phone (508) 872-5000	4. Manifest Tracking Number 014398158 JJK		
5. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702				Generator's Site Address (if different than mailing address) 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801			
Generator's Phone: (508) 872-5000				PORTSMOUTH NH 03801			
6. Transporter 1 Company Name CLEAN VENTURE, INC.					U.S. EPA ID Number NJ0000027193		
7. Transporter 2 Company Name					U.S. EPA ID Number		
8. Designated Facility Name and Site Address CYCLE CHEM INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206					U.S. EPA ID Number NJ0002200046		
Facility's Phone: (908) 355-5800					NJ0002200046		
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	
		No.	Type				
RD1	UN2588, WASTE, PESTICIDES, SOLID, TOXIC, N.O.S. (DIAZINON, LINDANE) 6.1 PG II (RQ D004 1# D014 1#) ERG# 151	003	CF	700	P	D004 D014 D016 D020 D036 NHX2	
RD2	UN2902, WASTE, PESTICIDES, LIQUID, TOXIC, N.O.S. (DIAZINON, LINDANE) 6.1 PG II (RQ D004 1# D014 1#) ERG# 151	005	DF	400	F	D004 D014 D016 D020 D036 NHX2	
RD3	UN3264, WASTE, CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S. (SULFURIC ACID, MURIATIC ACID) 8 PG II (RQ D002 100#) ERG# 154	001	DF	300	P	D002 NHX2	
RD4	UN3266, WASTE, CORROSIVE LIQUID, BASIC, INORGANIC, N.O.S. (SODIUM HYDROXIDE, AMMONIUM HYDROXIDE) 8 PG II (RQ D002 100#) ERG# 154	001	DF	75	P	D002 NHX2	
14. Special Handling Instructions and Additional Information LDR On File 808203/801041/78475/44280/397070765 GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT (1)SPEST-2 SOLID PESTICIDES & HERBICIDES (2)LPEST-1 LIQUID PESTICIDES & HERBICIDES (3)UDM-3 ACID LAB PACK (4)UDW-4 ALKALINE LAB PACK (1) 2 CF (2) 55 DF (3) 65 DF (4) 35 DF							
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 ON BEHALF OF STEVEN GALLO				Signature <i>Steven Gallo</i>		Month Day Year 04 29 17	
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 STEVEN GALLO				Signature <i>Steven Gallo</i>		Month Day Year 04 29 17	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number: _____							
18c. Signature of Alternate Facility (or Generator) Facility's Phone: _____ Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H141		2. H141		3. H141		4. H141	
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				Signature		Month Day Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NHD510153315	2. Page 1 of 1	3. Emergency Response Phone (508) 872-5000	4. Manifest Tracking Number 014398159 JJK		
5. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702			Generator's Site Address (if different than mailing address) 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801				
6. Transporter 1 Company Name CLEAN VENTURE, INC.		U.S. EPA ID Number NJ0000027193					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address CYCLE CHEM INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206			U.S. EPA ID Number NJD002200046				
Facility's Phone: (908) 355-5800							
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	
		No.	Type				
RD1	UN1263, WASTE, PAINT RELATED MATERIAL III (RD D001 100#) ERG# 128 <i>16876-91</i>	604	DM	700	G	D001 NHX2	
RD2	UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (GASOLINE, ACETONE) 3 PG II (RD D018 100#) ERG# 128 <i>80-81</i>	208	DM	200	G	D001 F003 F005 D018 D035 NHX2	
RD3	UN1950, WASTE, AEROSOLS 2.1 (RD D001 100#) ERG# 126 <i>88-89</i>	202	CF	800	P	D001 NHX2	
RD4	UN1993, WASTE, FLAMMABLE LIQUIDS, N.O.S. (XYLENE, TOLUENE) 3 PG II (RD D001 100#) ERG# 128 <i>90-94</i>	505	CF	2500	P	D001 F003 F005 NHX2	
14. Special Handling Instructions and Additional Information LDR On File 808203/801041/78475/44281/397070765 GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT (1)IK-8 FLAMMABLE PAINTS - CONSOLIDATED (2)IK-6 FLAMMABLE LIQUIDS - CONSOLIDATED (3)CR1-5 AEROSOL SPRAY CANS - LOOSE PACK (4)UIK-7 FLAMMABLE MATERIALS IN ORIGINAL CONTAINERS - LOOSE PACK							
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 262.2(a) (i) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offoror's Printed/Typed Name ON BEHALF OF STEVEN GALLO				Signature <i>[Signature]</i>		Month Day Year 04 29 17	
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 STEVEN GALLO				Signature <i>[Signature]</i>		Month Day Year 04 29 17	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number: _____							
18b. Alternate Facility (or Generator)					U.S. EPA ID Number		
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator)						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems):							
1.	H061	2.	H061	3.	H141	4.	H061
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				Signature		Month Day Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NHD510153315	2. Page 1 of 1	3. Emergency Response Phone (508) 872-5000	4. Manifest Tracking Number 014398160 JJK	
5. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702			Generator's Site Address (if different than mailing address) 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801			
Generator's Phone: (508) 872-5000			U.S. EPA ID Number NJ0000027193			
6. Transporter 1 Company Name CLEAN VENTURE, INC.			U.S. EPA ID Number			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address CYCLE CHEM INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206			U.S. EPA ID Number NJ0002200046			
Facility's Phone: (908) 355-5800			U.S. EPA ID Number			
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
		No.	Type			
RQ 1	UN3139, WASTE, OXIDIZING LIQUID, N.O.S. (CALCIUM HYPOCHLORITE, SODIUM HYPOCHLORITE) 5.1 PG II (RQ D007 10#) ERG# 140	002	DF	75	P	D001 D007 NHX2
X 2	UN3103 WASTE, ORGANIC PEROXIDE TYPE C, LIQUID 5.2 PG II ERG# 146					D001 NHX2
X 3	UN1325 WASTE, FUSEE 4.1 PG II ERG# 133					D001 NHX2
4.						
14. Special Handling Instructions and Additional Information LDR On File 808203/801041/78475/44282/397070765 GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT (1)UOX-10 OXIDIZER - LOOSE PACK (2)TWI-9 ORGANIC PEROXIDE - LOOSE PACK (3)R067-11 ROAD FLARES IN WATER <i>(1) 55 (1) 15</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/Offoror's Printed/Typed Name ON BEHALF OF STEVEN GALLO			Signature <i>[Signature]</i>		Month Day Year 04 29 17	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name STEVEN GALLO			Signature <i>[Signature]</i>		Month Day Year 02 29 17	
Transporter 2 Printed/Typed Name			Signature		Month Day Year	
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number: _____						
16b. Alternate Facility (or Generator)			U.S. EPA ID Number			
Facility's Phone:						
16c. 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.			
H141	H141	H141				
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			Signature		Month Day Year	

1. Generator's US EPA ID No. NHHD510153B15		Manifest Document No. 73475A		2. Page 1 of 1	
3. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702				A.	
4. Generator's Phone (508) 872-5000				B. State Gen. ID 690 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801	
5. Transporter 1 Company Name CLEAN VENTURE, INC.		6. US EPA ID Number NJ00000027193		C. State Trans. ID	
7. Transporter 2 Company Name		3. US EPA ID Number		D. Transporter's Phone ()	
9. Designated Facility Name and Site Address TRADEBE TREATMENT AND RECYCLING NORTHEAST, LLC 136 GRACEY AVENUE MERIDEN, CT 06450		10. US EPA ID Number CTD021816889		E. State Trans. ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				12. Containers No. Type	
a. NON RCRA NON DOT REGULATED MATERIAL (ANTIFREEZE & OIL)				13. Total Quantity	
168897-00				14. Unit Wt/Vol	
				15. WASTE NO. CR02 CR04 NHX2	
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above (include physical state and hazard code.)				K. Handling Codes for Wastes Listed Above	
a. 4(55)				a.	
b.				b.	
c.				c.	
d.				d.	
15. Special Handling Instructions and Additional Information 808203/801041/78475/44284/397070765 (P.O.# 192171) GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT 24 Hour Emergency Number: (508) 872-5000 (1)CO0-12 P111313001AFLH ANTIFREEZE & OIL					
16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to Federal Regulations for reporting proper disposal of hazardous waste.					
Printed/typed Name ON BEHALF OF STEVEN GALLO				Signature [Signature]	
				Date 08/27/11	
17. Transporter 1 Acknowledgement of Receipt of Materials					
Printed/typed Name STEVEN GALLO				Signature [Signature]	
				Date 08/27/11	
18. Transporter 2 Acknowledgement of Receipt of Materials					
Printed/typed Name				Signature	
				Date	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19					
Printed/typed Name				Signature	
				Date	

GENERATOR

TRANSPORTER

FACILITY

306 5280



NON-HAZARDOUS WASTE MANIFEST

2667636

Please print or type

1. Generator's US EPA ID Number 11465213315		Manifest Document Number 72718 B		2. Page 1 of 1	
3. Generator's Name and Mailing Address CLEAN WASTE SERVICES, LLC 123 11th Street P.O. Box 160 Lowville, OH 44336			5. Generating Location (if different) CLEAN WASTE SERVICES, LLC 123 11th Street P.O. Box 160 Lowville, OH 44336		
4. Phone (506) 677-5000			6. Phone ()		
7. Transporter #1 Company Name C.R. Lee Waste Services, LLC		8. US EPA ID Number OH 10027193		9. Transporter #1's Phone 713-720-0000	
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone	
13. Designated T/S/D Facility Name and Site Address Carbon Limestone Landfill 8100 S. State Line Road Lowville, OH 44336		14. US EPA ID Number OHD987048212		15. Facility's Phone 330-536-8013	
16. Waste Shipping Name and Description		17. Republic Services Approval # and Exp. Date		18. Containers	
a. NHX2		APR 15 2014 12:51:15		No. Type	
b.		168901-23		003CF 1500 P	
c.					
19. Total Quantity					
20. Unit Wt/Vol					
21. Additional Descriptions for Materials Listed Above					
22. Special Handling Instructions and Additional Information GENERATOR (OH) HAS BEEN ADVISED THAT THIS WASTE IS NOT A HAZARDOUS WASTE AS DEFINED BY 40 CFR 261 OR ANY APPLICABLE STATE LAW, 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.O. # 192172)					
23. 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.					
Printed/Typed Name MARK LAMBERT			Signature [Signature]		
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name MARK LAMBERT			Signature [Signature]		
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name [Name]			Signature [Signature]		
26. Discrepancy Indication Space					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) Carbon Limestone Landfill, LLC 8100 S. State Line Rd., Lowville, OH 44336 (330) 536-8013					
Printed/Typed Name			Signature		
Month Day Year			Month Day Year		

GENERATOR

TRANSPORTER

T/S/D FACILITY

GENERATOR'S COPY

COM00033

1. Generator's US EPA ID No. N H D 5 1 0 1 5 3 3 1 5		Manifest Document No. 7 6 4 7 5 2		2. Page 1 of 1	
3. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 158 LELAND STREET FRAMINGHAM, MA 01702				A.	
4. Generator's Phone ((508) 872-5000				B. State Gen. ID 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801	
5. Transporter 1 Company Name CLEAN VENTURE, INC.		6. US EPA ID Number N J 0 0 0 0 0 2 7 1 9 3		C. State Trans. ID	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone ()	
9. Designated Facility Name and Site Address COMPLETE RECYCLING SOLUTIONS 1075 AIRPORT ROAD FALL RIVER, MA 02720		10. US EPA ID Number M A R 0 0 0 5 1 0 1 2 3		E. State Trans. ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				13. Total Quantity	
X UN3506 UNIVERSAL WASTE - MERCURY CONTAINED IN MANUFACTURED ARTICLES 8 PG III ERG# 172				WASTE NO. MA95 NHX2	
X BATTERIES, DRY, SEALED, N.O.S. (NICKEL CADMIUM BATTERIES - UNIVERSAL WASTE)				MA95 NHX2	
X UN3090 LITHIUM BATTERY (UNIVERSAL WASTE) 9 PG II ERG# 138				MA95 NHX2	
d.					
J. Additional Descriptions for Materials Listed Above (include physical state and hazard code.)				K. Handling Codes for Wastes Listed Above	
a.		c.		a.	
b.		d.		b.	
15. Special Handling Instructions and Additional Information 808203/801041/78475/44298/397070765 (P.U.# 191671) GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT 24 Hour Emergency Number: (508) 872-5000 (1)MERMA-17 MERCURY-CONTAINING DEVICES (IN MFG. ARTICLES) (2)NIC-18 NICKEL CADMIUM BATTERIES (3)LIT-16 LITHIUM BATTERIES					
16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to Federal Regulations for reporting proper disposal of hazardous waste.					
Printed/Typed Name <i>ON BEHALF OF STEVEN GALLO</i>				Signature <i>[Signature]</i>	
17. Transporter 1 Acknowledgement of Receipt of Materials				Date Month Day Year <i>07/29/11</i>	
Printed/Typed Name <i>STEVEN GALLO</i>				Signature <i>[Signature]</i>	
18. Transporter 2 Acknowledgement of Receipt of Materials				Date Month Day Year <i>07/29/11</i>	
Printed/Typed Name				Signature	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19					
Printed/Typed Name				Signature	
				Date Month Day Year	

GENERATOR

TRANSPORTER

FACILITY

1689-04-06

DOB OF 1800 P



www.acvenviro.com

CUSTOMER COPY

INVOICE NO.: 287033

PLEASE REMIT PAYMENT IN FULL TO:
Clean Venture, Inc.
PO Box 674981
Detroit, MI. 48267-4981

FOR ANY INFO
PERTAINING TO THIS
INVOICE DIAL
508-872-5000

INVOICE DATE: 11/3/2017

JOB COMPLETED: 10/28/2017

EFT to: Comerica
39200 6 MILE ROAD
LIVONIA, MI 48152

CHECKING ACCOUNT:
ABA ROUTING # 072000096
BANK ACCOUNT # 1853236248

JOB LOCATION
CITY OF PORTSMOUTH, NH
680 PEVERLY HILL ROAD
DPW
PORTSMOUTH, NH 03801

CITY OF PORTSMOUTH NH
1 JUNKINS AVENUE
ATTN: JACOB LEVENSON
Portsmouth, NH 03801

THANK YOU FOR THE OPPORTUNITY TO SERVE YOU.

ACCOUNT EXECUTIVE: NICK FOOTE

SALES REP: NICK FOOTE

YOUR ORDER NO.	OUR ORDER NO.	CUSTOMER NO.	TERMS	PAYMENT DUE-DATE
N/A	MA40068	00-2001340	Net 30	12/3/2017

LABOR & EQUIPMENT - SATURDAY 10/28/17:

SITE SET-UP FEE	1 L/S	1,550.00	1,550.00
FORKLIFT RENTAL	1 EACH	975.00	975.00

DISPOSAL MANIFEST 016818480JJK:

PESTICIDE SOLIDS - CYBX	2 CYBX	995.00	1,990.00
PESTICIDE LIQUIDS - 55 G	7 DRUM	295.00	2,065.00
ACID LAB PACK - 30 G	2 DRUM	225.00	450.00
ALKALINE LAB PACK - 30 G	2 DRUM	225.00	450.00

DISPOSAL MANIFEST 016818481JJK:

CONS. FLAMMABLE PAINT - 55 G	4 DRUM	275.00	1,100.00
CONS. FLAMMABLE LIQUID - 55 G	5 DRUM	150.00	750.00
AEROSOLS - CYBX	2 CYBX	510.00	1,020.00
FLAMM. RESINS & ADHESIVES - CYBX	7 CYBX	425.00	2,975.00

DISPOSAL MANIFEST 016818482JJK:

OXIDIZER LAB PACK - 55 G	2 DRUM	225.00	450.00
FUSEE (ROAD FLARES) - 5 G	1 PAIL	125.00	125.00
AEROSOLS - 55 G	1 DRUM	130.00	130.00

DISPOSAL MANIFEST 016818486JJK:

ORGANIC PEROXIDE, TYPE C - 5 G	1 PAIL	250.00	250.00
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DISPOSAL MANIFEST 016818487JJK:

ASBESTOS - 15 G	1 DRUM	160.00	160.00
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www.acvenviro.com

CUSTOMER COPY

INVOICE NO.: 287033

PLEASE REMIT PAYMENT IN FULL TO:
Clean Venture, Inc.
PO Box 674981
Detroit, MI. 48267-4981

FOR ANY INFO
PERTAINING TO THIS
INVOICE DIAL
508-872-5000

INVOICE DATE: 11/3/2017

JOB COMPLETED: 10/28/2017

EFT to: Comerica
39200 6 MILE ROAD
LIVONIA, MI 48152

CHECKING ACCOUNT:
ABA ROUTING # 072000096
BANK ACCOUNT # 1853236246

JOB LOCATION
CITY OF PORTSMOUTH, NH
680 PEVERLY HILL ROAD
DPW
PORTSMOUTH, NH 03801

CITY OF PORTSMOUTH NH
1 JUNKINS AVENUE
ATTN: JACOB LEVENSON
Portsmouth, NH 03801

THANK YOU FOR THE OPPORTUNITY TO SERVE YOU.

ACCOUNT EXECUTIVE: NICK FOOTE

SALES REP: NICK FOOTE

YOUR ORDER NO.	OUR ORDER NO.	CUSTOMER NO.	TERMS	PAYMENT DUE DATE
N/A	MA40068	00-2001340	Net 30	12/3/2017

ANTIFREEZE & OIL - 55 G	8 DRUM	145.00	1,160.00
DISPOSAL MANIFEST 016818551JJK:			
NON-HAZ RESINS & ADHESIVES -CYBX	4 CYBX	395.00	1,580.00
DISPOSAL MANIFEST NON-HAZ 79530:			
MERCURY DEVICES - 5 G	1 PAIL	150.00	150.00
LITHIUM BATTERIES - 5 G	1 PAIL	125.00	125.00

NET INVOICE: 17,455.00
SALES TAX: 0.00
AMOUNT DUE: 17,455.00

TM No.: MATM13214, MATM13210

INTEREST CHARGES OF 1.5% PER MONTH (18% PER YEAR) WILL ACCRUE ON ALL PAST DUE AMOUNTS, ON UNPAID AMOUNTS, INTEREST AND ALL EXPENSES OF COLLECTIONS INCLUDING A REASONABLE ATTORNEY FEE IN AN AMOUNT OF 20% WILL BE CHARGED.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND012152115	2 Page 1 of 3	3 Emergency Response Phone 1-800-424-9303	4. Manifest Tracking Number 016818481 JJK		
5. Generator's Name and Mailing Address CITY OF FORT MOUTH, ONE TWO EIGHT SEVEN FIFTH AVENUE, FORT MOUTH, MA 01704		Generator's Site Address (if different than mailing address) ONE TWO EIGHT SEVEN FIFTH AVENUE, FORT MOUTH, MA 01704					
Generator's Phone: (508) 977-2000							
6. Transporter 1 Company Name CLEAN VENTURES, INC.		U.S. EPA ID Number MA000000000					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address 717 SOUTH FIRST STREET, ELIZABETH, NJ 07206		U.S. EPA ID Number					
Facility's Phone: (908) 355-5400							
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
		176119-22 WASTE, FLAMMABLE LIQUIDS, N.O.S. (GASOLINE, RESIDUE) (UNCL) (UNCL) (UNCL) FROM 120	204	24	200	G	
		23-21 WASTE, FLAMMABLE LIQUIDS, N.O.S. (GASOLINE, RESIDUE) (UNCL) (UNCL) (UNCL) FROM 120	005	24	37	G	
		28-29 WASTE, FLAMMABLE LIQUIDS, N.O.S. (GASOLINE, RESIDUE) (UNCL) (UNCL) (UNCL) FROM 120	2072	CF	200	R	
		30-34 WASTE, FLAMMABLE LIQUIDS, N.O.S. (GASOLINE, RESIDUE) (UNCL) (UNCL) (UNCL) FROM 120	007	CF	400	R	
14. Special Handling Instructions and Additional Information GENERALLY FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT. CONTAINS FLAMMABLE LIQUIDS. PACKED IN FLAMMABLE MATERIALS WITH NEUTRALIZING CAPACITY.							
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(d) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offoror's Printed/Typed Name Mark ...				Signature <i>Mark ...</i>		Month Day Year 10 28 17	
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 Mark ...				Signature <i>Mark ...</i>		Month Day Year 10 28 17
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. 1001		2. 1001		3. 1001		4. 1001	
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				Signature		Month Day Year	

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number 0411111111	2. Page 1 of 1	3. Emergency Response Phone 610-271-1234	4. Manifest Tracking Number 016818482 JJK
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5. Generator's Name and Mailing Address CITY OF FRAMINGHAM, 100 STATE STREET FRAMINGHAM, MA 01902	Generator's Site Address (if different than mailing address) 100 STATE STREET FRAMINGHAM, MA 01902
Generator's Phone: (508) 877-2000	

6. Transporter 1 Company Name CLEAN WASTE INC.	U.S. EPA ID Number MA01111111
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address 217 SOUTH MAIN STREET ELIZABETH, NJ 07208	U.S. EPA ID Number
Facility's Phone: (908) 355-5000	

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		
		No.	Type					
202	1. HAZARDOUS WASTE, LIQUID, CORROSIVE, N.O.S. (SOLUTION OF PHOSPHATE, POLYMER SOLUTIONS OF ETC.) N.I.E. 1.1 (PO) 202 FROM 100	39	DR	39	P			
202	2. HAZARDOUS WASTE, LIQUID, CORROSIVE, N.O.S. (SOLUTION OF PHOSPHATE, POLYMER SOLUTIONS OF ETC.) N.I.E. 1.1 (PO) 202 FROM 100	40	DR	40	P			
3.								
4.								

14. Special Handling Instructions and Additional Information FROM HOUSEHOLD WASTE. WASTE COLLECTION FROM HOUSEHOLD WASTE. (2005) 11 ROAD PLAZA, IN WASH
--

15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.

Generator's/Officer's Printed/Typed Name <i>[Signature]</i>	Signature <i>[Signature]</i>	Month Day Year 12/28/17
--	---------------------------------	----------------------------

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>[Signature]</i>	Signature <i>[Signature]</i>	Month Day Year 12/28/17
Transporter 2 Printed/Typed Name	Signature	Month Day Year

18. Discrepancy					
18a. Discrepancy Indication Space	<input type="checkbox"/> Quantity	<input type="checkbox"/> Type	<input type="checkbox"/> Residue	<input type="checkbox"/> Partial Rejection	<input type="checkbox"/> Full Rejection

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. 112 01	2. 111 01	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	Signature	Month Day Year

GENERATOR
TRANSPORTER
DESIGNATED FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number 016818486 JJK			
		5. Generator's Name and Mailing Address CITY OF PORTSMOUTH, 100 1ST AVENUE STAGE 1 FARMINGTON, MO 64241		Generator's Site Address (if different than mailing address) 100 1ST AVENUE STAGE 1 FARMINGTON, MO 64241				
6. Transporter 1 Company Name CLEAN STRUCTURE, INC.		7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address SSO INDUSTRIAL ENTERPRISE LEWISBORO, PA 17039		Facility's Phone: (717) 338-4100		U.S. EPA ID Number				
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	1001/1/3 MOBILE, UNCLE SAM'S BIRTHDAY CAKE C. 1001/1/3 5.0 PG 11 ENCL 194		No.	Type	5	5	
	2							
	3							
	4							
14. Special Handling Instructions and Additional Information FROM HOLIDAY WORLD INC. HAZARDOUS WASTE COLLECTION CENTER 2101 W. WASHINGTON ST. LEWISBORO, PA 17039								
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 262.2(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>MARC MANION</i>				Signature <i>Marc Manion</i>			Month Day Year 10/28/17	
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>MARC MANION</i>				Signature <i>Marc Manion</i>		Month Day Year 10/28/17	
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:			
	Facility's Phone:				U.S. EPA ID Number			
	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				Signature			Month Day Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <i>1761 3H</i>	2 Page 1 of 1	3. Emergency Response Phone <i>6081 472 5000</i>	4. Manifest Tracking Number 016818487 JJK	
5. Generator's Name and Mailing Address CITY OF FOSTERTON, MA 138 CLEVELAND STREET FRONTISBURGH, MA 01702			Generator's Site Address (if different than mailing address) <i>138 CLEVELAND STREET FRONTISBURGH, MA 01702</i>			
Generator's Phone: <i>(508) 472 5000</i>						
6. Transporter 1 Company Name CLEAN VENTURE, INC.			U.S. EPA ID Number <i>NEW ENGLAND 1001</i>			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address CYCLONE OIL INC. 517 SOUTH FIRST STREET ELIZABETH, NJ 07206			U.S. EPA ID Number			
Facility's Phone: <i>(908) 351 5000</i>						
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
		No.	Type			
1	<i>HAZARDOUS WASTE NON-FLAMMABLE LIQUID ANTIFREEZE & OIL</i>	<i>001</i>	<i>DF</i>	<i>5</i>	<i>5</i>	
2	<i>HAZARDOUS WASTE NON-FLAMMABLE LIQUID ANTIFREEZE & OIL</i>	<i>001</i>	<i>DF</i>	<i>1</i>	<i>5</i>	
3	<i>HAZARDOUS WASTE NON-FLAMMABLE LIQUID ANTIFREEZE & OIL</i>	<i>001</i>	<i>DF</i>	<i>1</i>	<i>5</i>	
4						
14. Special Handling Instructions and Additional Information <i>HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT 138 CLEVELAND STREET, FOSTERTON, MA 01702 10/20/11</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>MIKE MANNA</i>			Signature <i>Mike Manna</i>		Month <i>10</i>	Day <i>20</i>
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit Transporter signature (for exports only): Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name <i>MIKE MANNA</i>			Signature <i>Mike Manna</i>		Month <i>10</i>	Day <i>20</i>
Transporter 2 Printed/Typed Name			Signature		Month	Day
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
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. <i>H141</i>	2. <i>H141</i>	3. <i>H141</i>	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			Signature		Month	Day

GENERATOR
INTL
TRANSPORTER
DESIGNATED FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number <i>ATD50153315</i>	2. Page 1 of <i>1</i>	3. Emergency Response Phone <i>503 872 5000</i>	4. Manifest Tracking Number 016818551 JJK		
5. Generator's Name and Mailing Address <i>City of Portsmouth NH 138 Island St Framingham MA 01707</i>			Generator's Site Address (if different than mailing address) <i>600 Revealy Hill Rd (DPW) Portsmouth, NH 03801</i>				
6. Transporter 1 Company Name <i>Clear Venture, Inc.</i>			U.S. EPA ID Number <i>NJ 000027173</i>				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address <i>Cycle Chem Inc. 217 South First Street Elizabeth, NJ 07206</i>			U.S. EPA ID Number <i>NJ D00220046</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.	
			No.	Type			
		<i>1 NON HARA NON DOT Regulated Material (Resins, Adhesives)</i>	<i>56</i>	<i>004</i>	<i>CF</i>	<i>2100</i>	<i>P</i>
13. Waste Codes <i>ID 2K NH XX</i>							
14. Special Handling Instructions and Additional Information <i>NH-13 Resins, Adhesives, Waxes, Sealers, Cleaners</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/Officer's Printed/Typed Name <i>MARK CROGAN</i>			Signature <i>Mark Crogan</i>		Month <i>10</i>	Day <i>28</i>	
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>MARK CROGAN</i>			Signature <i>Mark Crogan</i>		Month <i>10</i>	Day <i>28</i>	
Transporter 2 Printed/Typed Name			Signature		Month	Day	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number: _____							
18b. Alternate Facility (or Generator)					U.S. EPA ID Number		
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator)					Month	Day	
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			Signature		Month	Day	

1. Generator's US EPA ID No. NH/D/5/1/0/1/5/3/3/1/5		Manifest Document No. 791530		2. Page 1 of 1	
3. Generator's Name and Mailing Address CLEAN VENTURE FOR: CITY OF PORTSMOUTH, NH 138 LELAND STREET FRAMINGHAM, MA 01702 4. Generator's Phone (508) 872-5000				A.	
5. Transporter 1 Company Name CLEAN VENTURE, INC.				B. State Gen. ID 680 PEVERLY HILL ROAD (DPW) PORTSMOUTH NH 03801	
6. US EPA ID Number NJ70000000771193		7. Transporter 2 Company Name		C. State Trans. ID 89390 MA	
9. Designated Facility Name and Site Address CYCLE CHEM INC. 217 SOUTH FIRST STREET ELIZABETH, NJ 07206				D. Transporter's Phone (100684330)	
10. US EPA ID Number NJ/D/0/0/2/2/0/0/0/4/6		E. State Trans. ID		F. Transporter's Phone ()	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)				G. State Facility's ID NOT REQUIRED	
12. Containers No. Type				H. Facility's Phone ((908) 355-5800)	
* UN3506 UNIVERSAL WASTE - MERCURY CONTAINED MANUFACTURED ARTICLES 8 ERGH 172		12. Containers No. Type 001 DF		13. Total Quantity 12	
* BATTERIES, DRY, SEALED, N.O.S. (NICKEL CADMIUM BATTERIES - UNIVERSAL WASTE)				WASTE NO. 1A95 NHX2	
* UN3090 LITHIUM BATTERY (UNIVERSAL WASTE) 9 ERGH 138		001 DF		1A95 NHX2	
				1A95 NHX2	
J. Additional Descriptions for Materials Listed Above (include physical state and hazard code.)				K. Handling Codes for Wastes Listed Above	
a.		c.		a.	
b.		d.		b.	
15. Special Handling Instructions and Additional Information 808203/801041/79530/46265/400680765 GENERATED FROM HOUSEHOLD HAZARDOUS WASTE COLLECTION EVENT 24 Hour Emergency Number: (508) 872-5000 (1)MMD-17 MERCURY-CONTAINING DEVICES (IN MFG. ARTICLES) (2)IN006R-18 NICKEL CADMIUM BATTERIES (3)BLIR-16 LITHIUM BATTERIES					
16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to Federal Regulations for reporting proper disposal of hazardous waste.					
Printed/Typed Name Mark Cronan		Signature Mark Cronan		Date 10/28/17	
17. Transporter 1 Acknowledgement of Receipt of Materials				Date	
Printed/Typed Name Mark Cronan		Signature Mark Cronan		Date 10/28/17	
18. Transporter 2 Acknowledgement of Receipt of Materials				Date	
Printed/Typed Name		Signature		Date	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19					
Printed/Typed Name		Signature		Date	

GENERATOR

TRANSPORTER

FACILITY