



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

LOAD 64

5634469

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

## I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number	b. Manifest Document Number	c. Page 1 of		
d. Generator's Name and Location: City EPA 965 Edward St, Galion, OH 44833 419/373-3148		e. Generator's Mailing Address: 347 Limeridge Rd Bowling Green, OH 43402 419/373-3148		
f. Phone: If owner of the generating facility differs from the generator, provide:		g. Phone:		
h. Owner's Name:		i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No.      Type
43872015766	11/30/2021	Non Haz Waste Sails, NOS		20 PMS 23.88
				TN

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.

Don Snyder Generator City EPA	<i>[Signature]</i>	12-11-20
p. Generator Authorized Agent Name (Print)	q. Signature	r. Date

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

a. Transporter's Name and Address: Mike's Trucking, 1935 US 42, West Jefferson, OH 43162 614/879-7043			
b. Phone:			
BRANK TERRANCE	<i>[Signature]</i>	12-11-2020	
c. Driver Name (Print)	d. Signature	e. Date	

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

a. Disposal Facility and Site Address: County Environmental of Wyandot 11164 CR #4, Carey, OH 43316 419/396-3581	c. US EPA Number	d. Discrepancy Indication Space:
b.		

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

<i>[Signature]</i>	<i>[Signature]</i>	12-11-20
e. Name of Authorized Agent (Print)	f. Signature	g. Date

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

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

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

5634470

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

LOAD 05

## I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number	b. Manifest Document Number	c. Page 1 of			
d. Generator's Name and Location: Care EPA 965 Edward St, Galion, OH 44833 419/373-3148		e. Generator's Mailing Address: 347 Dunbridge Rd Bowling Green, OH 43402 419/373-3148			
f. Phone:		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers	n. Total Quantity
43872015766	11/30/2021	Non Haz Waste Soils, NOS		No.	Type

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.

<i>John Snyder</i> <i>Authorizing Representative</i>	<i>John Snyder</i>	12-11-20
p. Generator Authorized Agent Name (Print)	q. Signature	r. Date

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

a. Transporter's Name and Address: Mike's Trucking, 1935 US 42, West Jefferson, OH 43162 614/879-7043			
b. Phone:			
<i>Joe VNBUREN</i>	<i>Joe VNBUREN</i>	12-11-20	
c. Driver Name (Print)	d. Signature	e. Date	

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

a. Disposal Facility and Site Address: 11164 CR #4, Carey, OH 43316 419/396-3381	c. US EPA Number	d. Discrepancy Indication Space:
b.	I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.	
<i>Kris Wenz</i>	<i>Kris Wenz</i>	12-11-20
e. Name of Authorized Agent (Print)	f. Signature	g. Date

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

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

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

LOAD 016

5634471

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

## I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number	b. Manifest Document Number			c. Page 1 of		
d. Generator's Name and Location: 965 Edward St, Galion, OH 44833 419/373-3148			e. Generator's Mailing Address: 347 Lantana Rd Bowling Green, OH 43402 419/373-3148			
f. Phone: If owner of the generating facility differs from the generator, provide:			g. Phone:			
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers	n. Total Quantity	o. Unit Wt/Vol
43872015766	11/30/2021	Non-Haz Waste Soils, NOS			14/45	TN

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.

John Snyder Generator	John Snyder Transporter	12-11-20
p. Generator Authorized Agent Name (Print)	q. Signature	r. Date

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

a. Transporter's Name and Address: Mike's Trucking, 1935 US 42, West Jefferson, OH 43162 614/879-7043	b. Phone: John Snyder	c. Driver Name (Print) John Snyder	d. Signature John Snyder	e. Date 12-11-20
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## III. DESTINATION (Generator complete IIIa-c and Destination Site completes IIId-g)

a. Disposal Facility and Site Address: 11164 CR #4, Carey, OH 43316 419/396-3581	c. US EPA Number	d. Discrepancy Indication Space:
b.	I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.	
e. Name of Authorized Agent (Print) Kaleb Adair	f. Signature Kaleb Adair	g. Date 12-11-20

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

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

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

LOAD 013

5634468

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

## I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number	b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: Ohio EPA 965 Edward St, Galion, OH 44833 419/373-3148		e. Generator's Mailing Address: 347 Lambridge Rd Bowling Green, OH 43402 419/373-3148			
f. Phone:		g. Phone:			
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers	n. Total Quantity
43872015766	11/30/2021	Non-Haz Waste Sails, NOS		No. Type	o. Unit Wt/Vol
					18.05 TN

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.

John Snyder  
of Ohio EPA

12-11-20

12-11-20

p. Generator Authorized Agent Name (Print)

q. Signature

r. Date

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

a. Transporter's Name and Address:

Mike's Trucking, 1935 US 42, West Jefferson, OH 43162  
614/879-7043

b. Phone:

George Lent

12-11-2020

c. Driver Name (Print)

d. Signature

e. Date

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

a. Disposal Facility and Site Address:

11164 CR #4, Carey, OH 43316  
419/396-3581

b.

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Kathy Leder

12-11-20

e. Name of Authorized Agent (Print)

f. Signature

g. Date

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

a. Operator's Name and Address:

b. Phone:

c. Responsible Agency Name and Address:

d. Phone:

e. Special Handling Instructions and Additional Information:

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

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

g. Operator's Name and Title (Print)

h. Signature

i. Date

\*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both