

APPENDIX F
WASTE DISPOSAL MANIFESTS

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

2. Page 1 of 1

3. Document Number

7375

4. Generator's Name and Mailing Address

Cal Trans D-4/Constr/EA04-163701
 11 1 Grand Ave 14th Floor
 Oakland, CA 94612
 Generator's Phone: 510-286-5668

Site:
 Highway 101 Doyle Drive, Presidio
 San Francisco, CA 94129

5. Transporter Company Name

6. US EPA ID Number

7. Transporter Phone

CLEARWATER ENVIRONMENTAL

CAR000007013

(510) 476-1740

8. Designated Facility Name and Site Address

9. US EPA ID Number

10. Facility's Phone

ALVISO INDEPENDENT OIL
 5002 ARCHER STREET
 ALVISO, CA 95002

CAL000161743

(510) 476-1740

11. Waste Shipping Name and Description

12. Containers

13. Total Quantity

14. Unit Wt/Vol

a. Non-Hazardous waste - Liquid

005 dm

210

G

b. NON-Hazardous waste - solid

021 dm

18000

P

15. Special Handling Instructions and Additional Information

Handling Codes for Wastes Listed Above

Wear PPE
 Emergency Contact
 (510) 476-1740
 Attn: Kirk Hayward

11a.

11b.

16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to state or federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name

Signature

Caltrans Agent

W White

Month Day Year
 4 | 15 | 09

17. Transporter Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

William Clark

William Clark

Month Day Year
 04 | 15 | 09

18. Discrepancy Indication Space

19. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 18.

Printed/Typed Name

Signature

Charles Seaton

Charles Seaton

Month Day Year
 4 | 20 | 9

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number C A C 0 0 2 6 3 9 4 0 4		2. Page 1 of 1		3. Emergency Response Phone (510)476-1740		4. Manifest Tracking Number 004450900 JJK			
		5. Generator's Name and Mailing Address CAL TRANS D-4/CONSTR/EA04-163701 111 GRAND AVE, 14TH FLOOR OAKLAND CA 94612				Generator's Site Address (if different than mailing address) HIGHWAY 101 DOYLE DRIVE, PRESI SAN FRANCISCO CA 94129					
6. Transporter 1 Company Name UNI WASTE		Generator's Phone: 510 286 5668		U.S. EPA ID Number CAL000317320		7. Transporter 2 Company Name Asbury Environmental Services		U.S. EPA ID Number CAD028277036			
8. Designated Facility Name and Site Address SIEMENS WATER TECHNOLOGIES CORP 5375 SOUTH BOYLE AVENUE VERNON CA 90058		Facility's Phone: (800)266-7747		U.S. EPA ID Number CAD097030993							
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. NON RCRA HAZARDOUS WASTE SOLID (OILY DEBRIS)			004 DM		900	P	352	
			2.								
			3.								
			4.								
14. Special Handling Instructions and Additional Information WEAR PPE, ERG # 171, EMERGENCY CONTACT KIRK HAYWARD 510-476-1740, PF # AP183040 D132721											
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 Agent for Caltrans				Signature <i>[Signature]</i>				Month Day Year 10/1/09			
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 William Clark				Signature <i>[Signature]</i>				Month Day Year 04/15/09			
Transporter 2 Printed/Typed Name Joseph Riley				Signature <i>[Signature]</i>				Month Day Year 04/21/09			
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) _____ Month Day Year _____											
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1. thru 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 Asreen				Signature <i>[Signature]</i>				Month Day Year 09/04/09			

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.		2. Page 1 of 1		3. Document Number 7481		
GENERATOR	4. Generator's Name and Mailing Address Trans D-4/Constr/EA04-163701 111 Grand Ave, 14 th Floor Oakland, CA 94612 Generator's Phone: 510-286-5668			Site: Highway 101 PM 8.0-9.8 San Francisco, CA 94129				
	5. Transporter Company Name CLEARWATER ENVIRONMENTAL		6. US EPA ID Number CAR000007013		7. Transporter Phone (510) 476-1740			
	8. Designated Facility Name and Site Address ALVISO INDEPENDENT OIL 5002 ARCHER STREET ALVISO, CA 95002		9. US EPA ID Number CAL000161743		10. Facility's Phone (510) 476-1740			
	11. Waste Shipping Name and Description				12. Containers		13. Total Quantity	14. Unit Wt/Vol
	a. Non-Hazardous waste - Liquid				003 dm		140	G
b. Non-Hazardous waste - solid				006 dm		4,000	P	
15. Special Handling Instructions and Additional Information Wear PPE Emergency Contact (510) 476-1740 Attn: Kirk Hayward				Handling Codes for Wastes Listed Above 11a. 11b.				
16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to state or federal regulations for reporting proper disposal of Hazardous Waste.								
Printed/Typed Name <i>William Whiteley</i>				Signature <i>William Whiteley</i>				
				Month Day Year 07 02 09				
17. Transporter Acknowledgement of Receipt of Materials								
Printed/Typed Name <i>William Clark</i>				Signature <i>William Clark</i>				
				Month Day Year 07 02 09				
18. Discrepancy Indication Space								
19. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in Item 18.								
Printed/Typed Name <i>Charles Seaton</i>				Signature <i>Charles Seaton</i>				
				Month Day Year 07 06 09				

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number C A C 0 0 2 6 3 9 4 0 4	2. Page 1 of 1	3. Emergency Response Phone (510)476-1740	4. Manifest Tracking Number 004450128 JJK						
5. Generator's Name and Mailing Address CAL TRANS D-4/CONSTR/EA04-163701 111 GRAND AVE 14TH FLOOR OAKLAND CA 94612				Generator's Site Address (if different than mailing address) HIGHWAY 101 DOYLE DRIVE, PRESI SAN FRANCISCO CA 94129							
6. Transporter 1 Company Name UNI WASTE				U.S. EPA ID Number C A L 0 0 0 3 1 7 3 2 0							
7. Transporter 2 Company Name <i>Asbury Environmental Services</i>				U.S. EPA ID Number <i>CAD028277036</i>							
8. Designated Facility Name and Site Address SIEMENS WATER TECHNOLOGIES CORP 5375 SOUTH BOYLE AVENUE VERNON CA 90058				U.S. EPA ID Number C A D 0 9 7 0 3 0 9 9 3							
Facility's Phone: <i>(800)266-7747</i>											
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes			
		1. NON RCRA HAZARDOUS WASTE SOLID		No.	Type			352			
		2. Hazardous Waste Solid, Nos. 9, NA 3077, P6111		003	DM	2000	P		352 D007		
		3.									
		4.									
14. Special Handling Instructions and Additional Information Wear PPE, ERG # 171, EMERGENCY CONTACT KIRK HAYWARD 510-476-1740, PF # <i>AP 183040</i> <i>AP 184067</i> <i>184725</i> <i>D13926</i> <i>RS66967</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 <i>William Whiteley</i>								Signature <i>William Whiteley</i>		Month Day Year <i>07 02 09</i>	
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.: _____										
	Transporter signature (for exports only): _____										
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials										
	Transporter 1 Printed/Typed Name <i>William Clark</i>								Signature <i>William Clark</i>		Month Day Year <i>12 2 09</i>
Transporter 2 Printed/Typed Name <i>Joseph Riley</i>								Signature <i>Joseph Riley</i>		Month Day Year <i>07 09 09</i>	
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
	Manifest Reference Number: _____ 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. <i>H111</i>			2. <i>H111</i>			3. _____			4. _____		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
Printed/Typed Name <i>Mads Hansen</i>								Signature <i>Mads Hansen</i>		Month Day Year <i>07 21 09</i>	

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)