

**APPENDIX K  
WASTE MANIFESTS**

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 00000501207	2. Page 1 of 1	3. Emergency Response Phone 206-298-9300	4. Manifest Tracking Number <b>009475988 JJK</b>
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5. Generator's Name and Mailing Address  
**TCC HOLDINGS CO**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233  
 Generator's Phone: (206) 298-1195

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
**STEVE SOBIER TRUCKING**

U.S. EPA ID Number  
WA 0000001263

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
**CWMNW, INC.**  
 17829 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 Facility's Phone: (503) 451-2612

U.S. EPA ID Number  
ORD029462353

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9 PGIII (F027)(PCP, DIOXINS)	1	DR	6100	P	F027	
	2.						
	3.						
	4.						

14. Special Handling Instructions and Additional Information  
**PROFILE OR302670 PCP DIOXINS**  
**E/R/P \* CHEMTREC (1-800-424-9300) CHEMTREC#CN24117**

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  
*Michael Chandler*

Signature  
*Michael Chandler*

Month Day Year  
9 11 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
*Rob Smith*

Signature  
*Rob Smith*

Month Day Year  
9 11 12

Transporter 2 Printed/Typed Name

Signature

Month Day Year

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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

INTL

TRANSPORTER

ALTERNATE FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D 0 0 9 5 2 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone 1-800-424-9300	4. Manifest Tracking Number <b>009475987 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO.**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 226-1126

6. Transporter 1 Company Name  
**STEVE FORLE TRUCKING**

U.S. EPA ID Number: WA D 0 0 0 0 0 0 1 2 8 2

7. Transporter 2 Company Name

U.S. EPA ID Number:

8. Designated Facility Name and Site Address  
**CWMNW, INC.**  
 17628 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709

Facility's Phone: (503) 451-2612

U.S. EPA ID Number: OR D 0 8 9 4 5 2 3 5 3

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	1. NA3077, HAZARDOUS WASTE, SOLID, H O S, 9, PG11 (F027)(PCP, DIOXINS)				P	F027	
	2.						
	3.						
	4.						

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670: PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AMM #CCN04117

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: *Michael Chandler* Signature: *Michael Chandler* Month: 7 Day: 11 Year: 12

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 1 Printed/Typed Name: Signature: Month: Day: Year:

Transporter 2 Printed/Typed Name: Signature: Month: Day: Year:

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number:

Facility's Phone:

18c. Signature of Alternate Facility (or Generator) Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name: Signature: Month: Day: Year:

GENERATOR

INT'L

TRANSPORTER

ALTERNATE FACILITY

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

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D 0 0 2 5 2 1 2 0 7	2. Page 1 of	3. Emergency Response Phone (206) 298 4405	4. Manifest Tracking Number <b>009475985 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO.**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98109-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 298 4405

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING**

U.S. EPA ID Number  
WA 5 0 0 0 0 0 1 2 0 3

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
**CAMINW, INC.**  
 17628 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709

U.S. EPA ID Number  
OR D 0 8 9 4 5 2 3 5 3

Facility's Phone: (541) 454-2643

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)				P	F027			
	2.								
	3.								
	4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670 PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/M/M #CCN24117

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: *Michael Quattrone* Signature: *Michael Quattrone* Month: 7 Day: 11 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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

INT'L

TRANSPORTER

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>009475984 JJK</b>
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5. Generator's Name and Mailing Address  
**TDC HOLDINGS CO**  
**2737 W COMMODORE WAY**  
**SEATTLE WA 98199-1233**

Generator's Phone: (206) 287-1105

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
**STEVE EARLER TRUCKING** U.S. EPA ID Number

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

8. Designated Facility Name and Site Address  
**CAMNWINC**  
**17629 CEDAR SPRINGS LANE**  
**ARLINGTON OR 97812-9709**

Facility's Phone: (503) 351-2812

U.S. EPA ID Number: OR 0 0 3 9 4 5 2 3 5 3

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S. & PGIII (F027)(PCP, DIOXINS)								
2.									
3.									
4.									

14. Special Handling Instructions and Additional Information  
**PROFILE OR302670, PCP DIOXINS**  
**ERP = CHEMTREC (1-800-424-9300) CHEMTREDAAM #02N24117**

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: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 9 Day: 10 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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

INT'L

TRANSPORTER

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

2. Page 1 of

3. Emergency Response Phone

4. Manifest Tracking Number

009475983 JJK

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

TOC HOLDINGS CO.  
2737 W COMMODORE WAY  
SEATTLE WA 98109-1233

Generator's Phone:

6. Transporter 1 Company Name

U.S. EPA ID Number

STEVE FORLER TRUCKING

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

U.S. EPA ID Number

CWMINW, INC.  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709

Facility's Phone:

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. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027) (PCP, DIOXINS)

No. 1 Type DT

6400

g

5027

14. Special Handling Instructions and Additional Information

PROFILE OR302670 PCP DIOXINS

E/R/P = CHEMTREC (1-800-424-9300)

CHEMTREC/AMA #CCN24117

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

Signature

Month Day Year

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 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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.
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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

INT'L

TRANSPORTER

ALTERNATE FACILITY

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

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
WA 0000501207

2. Page 1 of 1

3. Emergency Response Phone  
(206) 299-4395

4. Manifest Tracking Number

009475982 JJK

Generator's Site Address (if different than mailing address)

5. Generator's Name and Mailing Address

TCC HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Phone:

6. Transporter 1 Company Name

(206) 299-4395

U.S. EPA ID Number

STEVE FORLER TRUCKING

7. Transporter 2 Company Name

U.S. EPA ID Number

WA 0000001253

8. Designated Facility Name and Site Address

CWMW/INC.  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709

U.S. EPA ID Number

Facility's Phone:

(503) 451-2840

OR 0099452353

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. HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII  
(F027)(PCP, DIOXINS)

1

DT

420

P

F027

GENERATOR

14. Special Handling Instructions and Additional Information

PROFILE OR302670 PCP DIOXINS

E/R/P = CHEMTREC (1-800-424-9300)

CHEMTREC/M #00N24117

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

Signature

Month Day Year

TRANSPORTER INT'L

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 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

Month Day Year

TRANSPORTER

18. Discrepancy

18a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

IGNATED FACILITY

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. 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



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

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 00000501207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>009475981 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO.**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233  
 Generator's Phone: (206) 226-1125

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING**  
 U.S. EPA ID Number  
WA 00000001280

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

8. Designated Facility Name and Site Address  
**CYMNW, INC**  
 17629 CEDAR SPRINGS LANE  
 BURLINGTON OR 97812-9709  
 Facility's Phone: (503) 321-2812  
 U.S. EPA ID Number  
OR 00000452353

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.	HA3077, HAZARDOUS WASTE, SOLID, H O S, 9, PGIII (F027) PCP, DIOXINS	1	DT	11000	P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670 PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MN #CCN24117

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

Generator's/Offor's Printed/Typed Name: *Steve Forler* Signature: *[Signature]* Month: 9 Day: 10 Year: 12

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 1 Printed/Typed Name: *CHRY* Signature: *[Signature]* Month: 9 Day: 10 Year: 12

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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 INT'L

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone 1 800 424 9300	4. Manifest Tracking Number <b>009475980 JJK</b>
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5. Generator's Name and Mailing Address  
 TDC HOLDINGS CO  
 3737 W COMMODORE WAY  
 SEATTLE WA 98199-1233  
 Generator's Phone: (206) 798-1495

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number WA R 0 0 0 0 0 1 2 6 3
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address  
 CWMWINC  
 17829 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 Facility's Phone: (503) 351-2012

U.S. EPA ID Number  
OR D 0 8 9 4 5 2 3 5 3

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027) (PCP, DIOXINS)				P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302870 PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/CWM #CCN24117

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: *Mark A. Brinkley* Signature: *Mark A. Brinkley* Month: 9 Day: - Year: -

16. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_  
 Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: *Steve Forler* Signature: *Steve Forler* Month: 7 Day: 11 Year: 98

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. _____
----------	----------	----------	----------

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: \_\_\_\_\_

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (206) 298 4405	4. Manifest Tracking Number <b>009475979 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 298 4405

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING**

U.S. EPA ID Number  
WA 0 0 0 0 0 0 1 2 0 2

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
**CWMNW, INC**  
 17629 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709

U.S. EPA ID Number  
OR 0 0 8 9 4 5 2 3 5 3

Facility's Phone: (511) 451 2812

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)				P	F027			
2.									
3.									
4.									

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670 PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AMM #DCN24117

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: *Mark A. ...* Signature: *[Signature]* Month: 9 Day: 12 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: *[Name]* Signature: *[Signature]* Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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

INT'L

TRANSPORTER

DESIGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number W A D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 800 ) 424-8300	4. Manifest Tracking Number <b>009475978 JJK</b>		
5. Generator's Name and Mailing Address TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98109-1233			Generator's Site Address (if different than mailing address)				
Generator's Phone: ( 206 ) 286-4495							
6. Transporter 1 Company Name STEVE FORLER TRUCKING			U.S. EPA ID Number W A R 0 0 0 0 0 1 2 6 3				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address COMMUNW, INC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709			U.S. EPA ID Number O R D 0 3 9 4 5 2 3 5 3				
Facility's Phone: ( 503 ) 451-2513							
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	1. NA3077, HAZARDOUS WASTE, SOLID, H O S., 9, POH (F027)(PCP, DIOXINS)				P	F027	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information  PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-8300) CHEMTREC M.M #CCN24117							
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/Offorer's Printed/Typed Name <i>Walter A. ...</i>			Signature <i>Walter A. ...</i>		Month 9	Day 7	Year 11
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>Steve Forler Trucking</i>			Signature <i>Steve Forler</i>		Month 7	Day 31	Year 11
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)			Signature		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

GENERATOR

INT'L

TRANSPORTER

SIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 00 00 50 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (206) 474 2100	4. Manifest Tracking Number <b>009475977 JJK</b>
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5. Generator's Name and Mailing Address  
**TOO HOLDINGS CO**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98109-1233  
 Generator's Phone: (206) 298 4196

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING**

U.S. EPA ID Number  
WA R 0 0 0 0 0 1 0 0 3

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
**CWMNW, INC**  
 17629 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 Facility's Phone: (503) 454-2613

U.S. EPA ID Number  
OR D 0 8 9 1 5 2 3 5 3

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9 POH (F027) PCB, DIOXINS	1	DT	69000	P	F027			
	2.								
	3.								
	4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302679 PCB DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/M/I #00N24117

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: *Michael J. Spender* Signature: *Michael J. Spender* Month: 9 Day: 7 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: *Bob Jones* Signature: *Bob Jones* Month: 9 Day: 7 Year: 12

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA0009591207	2. Page 1 of 1	3. Emergency Response Phone 1-800-424-9300	4. Manifest Tracking Number <b>009475976 JJK</b>
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5. Generator's Name and Mailing Address  
 TOC HOLDINGS CO  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233  
 Generator's Site Address (if different than mailing address)  
 Generator's Phone: (206) 290-4105

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING  
U.S. EPA ID Number: WA0000001283

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

8. Designated Facility Name and Site Address  
 CWMNW, INC.  
 17629 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 Facility's Phone: (541) 451-2612  
 U.S. EPA ID Number: ORD089460353

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. X	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DRUM	1	P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670. PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#MM#CCN21117

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: *Michael Smith* Signature: *Michael Smith* Month: 2 Day: 7 Year: 10

16. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_  
 Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 4 Day: 10 Year: 10  
 Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy  
 18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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 INTL

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (206) 298-1105	4. Manifest Tracking Number <b>009475975 JJK</b>
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5. Generator's Name and Mailing Address  
TDC HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 298-1105

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
WA R 0 0 0 0 0 1 2 6 3

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CAMINWING  
17620 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9700

U.S. EPA ID Number  
OR D 0 0 9 1 6 2 3 5 3

Facility's Phone: (503) 451-2819

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.	HA3077, HAZARDOUS WASTE, SOLID, N O S, 9, PGIII (F027, PCP, DIOXINS)	1	DT	14000	P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
PROFILE OR302070, PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/OMMI #CCN24117

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/Offeor's Printed/Typed Name  
*Mark J. [Signature]*

Signature  
*[Signature]*

Month Day Year  
9 7 2

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
CHRIS J BYCKE

Signature  
*[Signature]*

Month Day Year  
9 7 19

Transporter 2 Printed/Typed Name

Signature

Month Day Year

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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 INT'L  
TRANSPORTER  
DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
WA D 0 0 0 5 9 1 2 0 7

2. Page 1 of 1

3. Emergency Response Phone  
1-800-424-9300

4. Manifest Tracking Number

009475974 JJK

Generator's Site Address (if different than mailing address)

5. Generator's Name and Mailing Address  
TOO HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1235  
Generator's Phone: (206) 258-2195

6. Transporter 1 Company Name

U.S. EPA ID Number

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

U.S. EPA ID Number

CWMNWINC  
17829 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709  
Facility's Phone: (541) 251-2812

OR 0 0 9 9 4 5 2 3 5 3

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9. POIII (F027)(PCP, DIOXINS)				P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information

PROFILE OR302678 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC OWM #CCN24117

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: \_\_\_\_\_ Signature: \_\_\_\_\_  
Month: 9 Day: 6 Year: 12

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 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_  
Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy  
18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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 INT'L  
TRANSPORTER  
DESIGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WA 0 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (206) 385 4105	4. Manifest Tracking Number <b>009475973 JJK</b>	
5. Generator's Name and Mailing Address TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233						
Generator's Site Address (if different than mailing address)						
Generator's Phone: (206) 385 4105						
6. Transporter 1 Company Name STEVE FORLER TRUCKING				U.S. EPA ID Number WA R 0 0 0 0 0 1 2 8 3		
7. Transporter 2 Company Name				U.S. EPA ID Number		
8. Designated Facility Name and Site Address CWMNW, INC. 17829 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709				U.S. EPA ID Number OR D 0 9 9 4 5 2 3 5 3		
Facility's Phone: (541) 451 2812						
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.	HA3077, HAZARDOUS WASTE, SOLID, N O S, 9 PGHII (F027)(PCP, DIOXINS)	1	D		P	F027
2.						
3.						
4.						
14. Special Handling Instructions and Additional Information PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/CWM #CCN24117						
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>Mark A. Marshall</i>				Signature <i>Mark A. Marshall</i>		Month Day Year 7 6 12
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>Steve Forler</i>				Signature <i>Steve Forler</i>		Month Day Year 7 6 12
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)				Signature		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

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WA 0009591207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>009475972 JJK</b>			
		5. Generator's Name and Mailing Address TDC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98190-1233 Generator's Phone: (206) 298-2105				Generator's Site Address (if different than mailing address)		
6. Transporter 1 Company Name STEVE FOSLER TRUCKING		7. Transporter 2 Company Name		U.S. EPA ID Number WA 0000001283		U.S. EPA ID Number		
8. Designated Facility Name and Site Address CWMN/INC 17828 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709 Facility's Phone: (503) 251-2612				U.S. EPA ID Number OR 0089452353				
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
	X	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., B, PGIII (F027)(PCP, DIOXINS)		1	DT	64	P	F027
		2.						
		3.						
		4.						
14. Special Handling Instructions and Additional Information PROFILE OR302870: PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AMM #CCN24117								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offor's Printed/Typed Name <i>Mark Chapple</i>				Signature <i>Mark Chapple</i>		Month	Day	Year
						9	6	12
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name <i>Kid GAVINI</i>				Signature <i>Kid GAVINI</i>		Month	Day
						9	6	12
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)			
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

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>009475971 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO**  
**2737 W COMMODORE WAY**  
**SEATTLE WA 98109-1233**

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 296-4105

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING**

U.S. EPA ID Number  
WA 8 0 0 0 0 0 1 2 8 3

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
**CWMN INC.**  
**17620 CEDAR SPRINGS LANE**  
**ARLINGTON OR 97812-9709**

U.S. EPA ID Number  
OR 0 8 9 4 5 2 3 5 3

Facility's Phone: (511) 151-2612

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DR	2000	P	F027			
2.									
3.									
4.									

14. Special Handling Instructions and Additional Information  
**PROFILE OR 302670. PCP DIOXINS**  
**E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MN #CCH24117**

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/Offendor's Printed/Typed Name: *Mark A. Chandler* Signature: *[Signature]* Month: 7 Day: 6 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: *Steve Forler* Signature: *[Signature]* Month: 7 Day: 6 Year: 12

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. _____
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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 INT'L

DESIGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D D 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone 1-800-424-9300	4. Manifest Tracking Number <b>009475970 JJK</b>
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5. Generator's Name and Mailing Address  
 TOC HOLDINGS CO.  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233  
 Generator's Site Address (if different than mailing address)  
 Generator's Phone: (206) 286-4495

6. Transporter 1 Company Name  
 STEVE FORLER TRUCKING  
 U.S. EPA ID Number  
 WA R 0 0 0 0 0 1 2 6 3

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

8. Designated Facility Name and Site Address  
 CWMW, INC.  
 17829 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 Facility's Phone: (503) 454-2613  
 U.S. EPA ID Number  
 O R D 0 8 9 4 5 2 3 5 3

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 3, PGIII (F027)(PCP, DIOXINS)	1	D		P	F027			
	2.								
	3.								
	4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670: PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AM #CCN21117

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: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Month: 7 Day: 6 Year: 12

16. International Shipments  Import to U.S.  Export from U.S.  
 Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_  
 Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Month: 7 Day: 6 Year: 12  
 Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy  
 18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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 INT'L

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 00000501207	2. Page 1 of 1	3. Emergency Response Phone (206) 308 3105	4. Manifest Tracking Number <b>009475969 JJK</b>
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5. Generator's Name and Mailing Address TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233		Generator's Site Address (if different than mailing address)	
Generator's Phone: (206) 308 3105			

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number WA 0000001203
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address CWMW, INC. 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709	U.S. EPA ID Number OR 00000450353
Facility's Phone: (514) 151 2012	

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (P027)(PCP, DIOXINS)	1	DT CHEM		P	P027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MW #DCN24117
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15. <b>GENERATOR'S/OFFEROR'S CERTIFICATION:</b> 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/Offeor's Printed/Typed Name <i>Mark A. Mueller</i>	Signature <i>Mark A. Mueller</i>	Month 7	Day 2	Year 11

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):	

17. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name CHRIS E BYRLEY	Signature <i>Chris E Byrley</i>	Month 9	Day 6	Year 11
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.

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

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 800 ) 424-9300	4. Manifest Tracking Number <b>009475968 JJK</b>
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5. Generator's Name and Mailing Address  
TOC HOLDINGS CO.  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233  
Generator's Phone: ( 206 ) 286-4195

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING  
U.S. EPA ID Number  
WA R 0 0 0 0 0 1 2 0 3

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

8. Designated Facility Name and Site Address  
CWMN/INC  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709  
Facility's Phone: ( 503 ) 454-2912

U.S. EPA ID Number  
O R D 0 8 9 4 5 2 3 5 3

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	1. NA3077, HAZARDOUS WASTE, SOLID, N O S, 9, PGII (F027)(PCP, DIOXINS)				P	F027	
	2.						
	3.						
	4.						

14. Special Handling Instructions and Additional Information  
PROFILE OR302870 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/CWM #CCN24117

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: *Mark A. Chandler* Signature: *Mark A. Chandler* Month: 9 Day: 5 Year: 12

16. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_  
Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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

INT'L

TRANSPORTER

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number WA 5 0 0 0 9 5 0 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (509) 331 0300	4. Manifest Tracking Number <b>009475967 JJK</b>
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5. Generator's Name and Mailing Address  
**TOP HOLDINGS CO**  
**2757 W COMMODORE WAY**  
**SEATTLE WA 98189-1233**  
 Generator's Phone: (206) 288-1125

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name <b>STEVE FORLER TRUCKING</b>	U.S. EPA ID Number WA 5 0 0 0 0 0 1 3 8 2
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address  
**CYMNIA, INC.**  
**17620 CEDAR SPRINGS LANE**  
**ARLINGTON OR 97812-9709**  
 Facility's Phone: (503) 451-2842

U.S. EPA ID Number  
ORD 0 8 9 4 5 2 3 5 3

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					
K	1. HAZ077, HAZARDOUS WASTE, SOLID, H.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DRUM	1	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
 PROFILE OR302870 PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#MM #CCN24117

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: *Mark Smith* Signature: *Mark Smith* Month: 7 Day: 5 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name <i>Mark Smith</i>	Signature <i>Mark Smith</i>	Month 7	Day 5	Year 12
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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.
----	----	----	----

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 INT'L

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WAD009591207	2. Page 1 of 1	3. Emergency Response Phone 1-800-424-9300	4. Manifest Tracking Number 009475966 JJK
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5. Generator's Name and Mailing Address  
TOC HOLDINGS CO.  
2737 W COMMODORE WAY  
SEATTLE WA 98109-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 286-1195

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
WAR00000127643

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CWMNW, INC  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709

U.S. EPA ID Number  
ORD039452353

Facility's Phone: (503) 451-2613

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	1. HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DT	4/100	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
PROFILE OR302670: PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#M#00124117

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

Generator's/Offor's Printed/Typed Name: *Michael Charles* Signature: *Michael Charles* Month: 9 Day: 5 Year: 12

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 1 Printed/Typed Name: *Bob Lavin* Signature: *Bob Lavin* Month: 9 Day: 5 Year: 12

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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

INT'L

TRANSPORTER

DESIGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 00000001207	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number <b>009475965 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98100-1233  
 Generator's Phone: (206) 226-4100

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING** U.S. EPA ID Number

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

8. Designated Facility Name and Site Address  
**CWMW, INC.**  
 17620 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 Facility's Phone: (503) 451-2642

U.S. EPA ID Number  
OR 00000001208

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	1. NA3077, HAZARDOUS WASTE, SOLID, N O S, 9, PGIII (E027)(PCP, DIOXINS)	1	DT	2800	P	E027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670 PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MJ #JCN24117

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: *David J. Chandler* Signature: *[Signature]* Month: 7 Day: 5 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: *Ray Swanson* Signature: *[Signature]* Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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

INT'L

TRANSPORTER

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>009475964 JJK</b>
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5. Generator's Name and Mailing Address  
 TOC HOLDINGS CO  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233  
 Generator's Phone: (206) 298-3495

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number WA R 0 0 0 0 0 1 2 0 3
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address  
 CWMNW, INC  
 17620 CEDAR SPRINGS LANE  
 ARLINGTON OR 97912-0709  
 Facility's Phone: (541) 454-2043

U.S. EPA ID Number  
O R D 0 8 9 4 5 2 8 5 3

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)				P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302870 PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/CVMI #CCN24117

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: *Steve Forler* Signature: *[Signature]* Month: 7 Day: 7 Year: 97

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: *Steve Forler* Signature: *[Signature]* Month: 6 Day: 1 Year: 97

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. _____
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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 INTL

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA0009591207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>009475963 JJK</b>
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5. Generator's Name and Mailing Address TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233	Generator's Site Address (if different than mailing address)
Generator's Phone: (206) 396-1105	

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number WA0000001263
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address CWMW, INC. 17620 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709	U.S. EPA ID Number OR0089452353
Facility's Phone: (503) 251-2012	

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DT	64000	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#00N24117
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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>Mark A. ...</i>	Signature <i>Mark A. ...</i>	Month 9	Day 15	Year 15
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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 GARY I BYERLEY	Signature <i>Gary I Byerley</i>	Month 9	Day 5	Year 14
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.

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



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WAD009591207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number 009475962 JJK
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5. Generator's Name and Mailing Address  
TOC HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98109-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 780-4195

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
WA8000001263

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CWMNWINC  
17820 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709

U.S. EPA ID Number  
ORD099152353

Facility's Phone: (503) 321-2613

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., PGIII (F027)(PCP, DIOXINS)	1	P	1	P	F027			
2.									
3.									
4.									

14. Special Handling Instructions and Additional Information  
PROFILE OR302870, PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AM #00N21117

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: *Mark A. Charles* Signature: *Mark A. Charles* Month: 9 Day: 4 Year: 15

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: *Steve Forler* Signature: \_\_\_\_\_ Month: 7 Day: 8 Year: 15

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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

INTL

TRANSPORTER

DESIGNATED FACILITY

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

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA00000501207	2. Page 1 of 1	3. Emergency Response Phone (206) 421-2300	4. Manifest Tracking Number <b>009475961 JJK</b>
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5. Generator's Name and Mailing Address TDC HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98199-1233	Generator's Site Address (if different than mailing address)
Generator's Phone: (206) 206-4405	

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address CWMN/INC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97912-9709	U.S. EPA ID Number ORD089152353
Facility's Phone: (503) 454-2613	

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9 PCBs (5027, PCB, DIOXINS)				p	P027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information PROFILE OR302670 POP DIOXINS E/R/P - CHEMTREC (1-800-424-9300) CHEMTREC/M #CCN24117
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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>Mark A. Smith</i>	Signature <i>Mark A. Smith</i>	Month 9	Day 4	Year 12
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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	Signature	Month	Day	Year
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.

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  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number 009475960 JJK
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5. Generator's Name and Mailing Address  
TOC HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)  
Generator's Phone: (206) 258-1196

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
WA R 0 0 0 0 0 1 2 6 3

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CWMINW, INC  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97112-9709

U.S. EPA ID Number  
OR 0 0 8 9 4 5 2 3 5 3

Facility's Phone: (503) 454-2612

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PBIII (F027)(PCP, DIOXINS)	1	DT	2900	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
PROFILE OR302670: PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#M #00N23117

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  
*Walter Smith*

Signature  
*Walter Smith*

Month Day Year  
9 4 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
*Bob Gavin*

Signature  
*Bob Gavin*

Month Day Year  
9 4 12

Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month Day Year \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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 INT'L

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

WA 0000501207

2. Page 1 of

3. Emergency Response Phone

4. Manifest Tracking Number

009475959 JJK

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

TOO HOLDINGS CO.  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Phone:

(206) 258-1107

6. Transporter 1 Company Name

U.S. EPA ID Number

STEVE FORLER TRUCKING

WA 000001203

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

U.S. EPA ID Number

CWMNW, INC.  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709

OR 0089452353

Facility's Phone:

(503) 451-2811

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	1. HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027 (PCP, DIOXINS))	1	Drum	13.220	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information

PROFILE OR302670 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#M #CCN24117

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/Offorer's Printed/Typed Name

Signature

Month Day Year  
7 4 12

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 1 Printed/Typed Name

Signature

Month Day Year  
2 4 12

Transporter 2 Printed/Typed Name

Signature

Month Day Year

18. Discrepancy

18a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

18b. Alternate Facility (or Generator)

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.
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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

INTL

TRANSPORTER

IGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0009591207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>009475958 JJK</b>
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5. Generator's Name and Mailing Address  
 TOC HOLDINGS CO.  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233  
 Generator's Phone: (206) 725-1105

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number WA R 000001203
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address C/MINW, INC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709 Facility's Phone: (511) 154-2612	U.S. EPA ID Number OR D 089452353
--	--------------------------------------

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.	HA3077, HAZARDOUS WASTE, SOLID, H.O.S., 9, PGIII (F027) (PCP, DIOXINS)				P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670 PCP DIOXINS  
 E/R/F = CHEMTREC (1-800-424-9300) CHEMTREC/M/M #CCN24117

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: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Month: 2 Day: 4 Year: 12

16. International Shipments  Import to U.S.  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: _____	Signature: _____	Month: 2 Day: 4 Year: 12
Transporter 2 Printed/Typed Name: _____	Signature: _____	Month: 2 Day: 4 Year: 12

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. _____
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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 INT'L

DESIGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WAD009591207	2. Page 1 of 1	3. Emergency Response Phone (208) 434-9300	4. Manifest Tracking Number 009475986 JJK		
5. Generator's Name and Mailing Address TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233 Generator's Phone: (208) 288-4495				Generator's Site Address (if different than mailing address)			
6. Transporter 1 Company Name STEVE FORBER TRUCKING				U.S. EPA ID Number WA9000001263			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address CWMW, INC. 17829 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709 Facility's Phone: (541) 451-2813				U.S. EPA ID Number ORD089452353			
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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	PT	64000	P	F027	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information PROFILE OR302670: PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MW #CCN24117							
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 Walter A. Mueller				Signature Walter A. Mueller		Month Day Year 9 11 12	
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 GARY BROWN				Signature Gary Brown		Month Day Year 9 11 12	
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: _____						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. _____		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 _____	

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WA00000501007	2. Page 1 of 1	3. Emergency Response Phone (206) 296 4195	4. Manifest Tracking Number <b>009475957 JJK</b>		
5. Generator's Name and Mailing Address TGC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233				Generator's Site Address (if different than mailing address)			
Generator's Phone: (206) 296 4195		6. Transporter 1 Company Name STEVE FORLER TRUCKING		U.S. EPA ID Number WA0000001183			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address CWMNW, INC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709				U.S. EPA ID Number ORD089452353			
Facility's Phone: (503) 451 2612							
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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PCBII (F027)(PCP, DIOXINS)	1	DT	54100	P	F027	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/CWM #DCN24117							
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/Offeor's Printed/Typed Name Mark A. Chandler				Signature <i>Mark A. Chandler</i>		Month Day Year 9 9 02	
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 GARY E BYLHILL				Signature <i>Gary E Bylhill</i>		Month Day Year 9 4 02	
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)							
19.1		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	

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA0009591207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>009475956 JJK</b>
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5. Generator's Name and Mailing Address TDC HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98189-1238	Generator's Site Address (if different than mailing address)
Generator's Phone: (206) 286 4405	

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number WA000001283
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7. Transporter 2 Company Name	U.S. EPA ID Number
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8. Designated Facility Name and Site Address CWMW, INC. 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709	U.S. EPA ID Number OR0000152355
Facility's Phone: (541) 251 7613	

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S. 9 PG(I) (P027)(POP. DIOXINS)	1	DT	24.25	P	6027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information PROFILE OR302670 POP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AM#CCND4117
--

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>Mark A. Charles</i>	Signature <i>Mark A. Charles</i>	Month 8	Day 31	Year 12

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.: _____
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17. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name Kod (AVI)	Signature <i>[Signature]</i>	Month 8	Day 31	Year 12
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.

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

INT'L

TRANSPORTER

IGNATED FACILITY



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

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0009591202	2. Page 1 of 1	3. Emergency Response Phone (206) 295 1105	4. Manifest Tracking Number <b>009475955 JJK</b>
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5. Generator's Name and Mailing Address: TOC HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233  
Generator's Phone: (206) 295 1105

Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: STEVE FORLER TRUCKING  
U.S. EPA ID Number: WA R 000001262

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

8. Designated Facility Name and Site Address: CWMNW, INC  
17829 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9700  
Facility's Phone: (503) 464 2612  
U.S. EPA ID Number: OR 0029152353

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.	HA3077, HAZARDOUS WASTE, SOLID, H O S, 9 PGII (F027)(PCP, DIOXINS)	1	P		P	F027
2.						
3.						
4.						

14. Special Handling Instructions and Additional Information:  
PROFILE OR302670 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-474-9300) CHEMTREC/MN #CCU23117

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: [Signature]  
Signature: [Signature] Month: 8 Day: 31 Year: 11

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 1 Printed/Typed Name: [Signature] Month: 8 Day: 31 Year: 11

Transporter 2 Printed/Typed Name: [Signature] Month: 8 Day: 31 Year: 11

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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) [Signature] Month: 8 Day: 31 Year: 11

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: 8 Day: 31 Year: 11

GENERATOR

TRANSPORTER INTL

IGNATED FACILITY

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

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

WA 0000591207

2. Page 1 of

3. Emergency Response Phone

4. Manifest Tracking Number

009475954 JJK

5. Generator's Name and Mailing Address

TOO HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone:

(206) 296-1105

6. Transporter 1 Company Name

STEVE FORBES TRUCKING

U.S. EPA ID Number

WA R 0000001283

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

CWMNW, INC  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709

U.S. EPA ID Number

OR 0089452353

Facility's Phone:

(503) 454-2812

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

1. HA3077, HAZARDOUS WASTE, SOLID, H.C.S., 9 PCBII  
F027 (PCP, DIOXINS)

1

Drum

P

F027

GENERATOR

14. Special Handling Instructions and Additional Information

PROFILE OR302670 PCP DIOXINS

E/R/P - CHEMTREC (1-800-424-9300)

CHEMTREC/CWM #CCN23117

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

Generator's/Offor's Printed/Typed Name

Signature

Month Day Year

16. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

8 3 12

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year

Transporter 2 Printed/Typed Name

Signature

8 5 12

18. Discrepancy

18a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

18b. Alternate Facility (or Generator)

Manifest Reference Number:

U.S. EPA ID Number

Facility's Phone:

18c. Signature of Alternate Facility (or Generator)

Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name

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: WA 0000010007  
 2. Page 1 of 1  
 3. Emergency Response Phone: (206) 296-4406  
 4. Manifest Tracking Number: 009475953 JJK

5. Generator's Name and Mailing Address: TOC HOLDINGS CO., 2737 W COMMODORE WAY, SEATTLE WA 98109-1233  
 Generator's Site Address (if different than mailing address):  
 Generator's Phone: (206) 296-4406

6. Transporter 1 Company Name: STEVE FORLER TRUCKING  
 U.S. EPA ID Number: WA 0000010007  
 7. Transporter 2 Company Name:  
 U.S. EPA ID Number:

8. Designated Facility Name and Site Address: CAMNW, INC, 17629 CEDAR SPRINGS LANE, ARLINGTON OR 97812-9709  
 Facility's Phone: (503) 464-2812  
 U.S. EPA ID Number: OR 00000452353

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.	1143077, HAZARDOUS WASTE, SOLID N.O.S., 9, PGIII (F027) (PCP, DIOXINS)	1	DT		P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information: PROFILE OR302670 PCP DIOXINS, E/R/P = CHEMTREC (1-800-421-9300), CHEMTRECA:AM#CCN24117

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: Mark J. Chandler  
 Signature: [Signature]  
 Month: 9, Day: 21, Year: 12

16. International Shipments:  Import to U.S.,  Export from U.S.  
 Transporter signature (for exports only):  
 Port of entry/exit:  
 Date leaving U.S.:

17. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: [Name]  
 Signature: [Signature]  
 Month: 8, Day: 2, Year: 12  
 Transporter 2 Printed/Typed Name:  
 Signature:  
 Month: , Day: , Year:

18. Discrepancy  
 18a. Discrepancy Indication Space:  Quantity,  Type,  Residue,  Partial Rejection,  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. , 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:

GENERATOR

INTL

TRANSPORTER

DESIGNATED FACILITY

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

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number W A D 0 0 9 5 0 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number 009475952 JJK
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5. Generator's Name and Mailing Address: TOC HOLDINGS CO.  
2737 W COMMODORE WAY  
SEATTLE WA 98109-1233  
Generator's Phone: (206) 286-4495

Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number W A D 0 0 0 0 0 1 2 0 3
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address: CYMMW, INC  
17529 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709  
Facility's Phone: (503) 454-2612

U.S. EPA ID Number: GRD089152353

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9 PGIII (F027)(PCP, DIOXINS)	1	DT	66,000	P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information: PROFILE GR302670 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MW #00124117

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: *Mark G. Forler* Signature: *Mark G. Forler* Month: 8 Day: 30 Year: 12

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 1 Printed/Typed Name: *Dick W. Taylor* Signature: *Dick W. Taylor* Month: 8 Day: 30 Year: 12

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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.	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: \_\_\_\_\_

GENERATOR

INT'L

TRANSPORTER

SIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D 0 0 8 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>009475951 JJK</b>
---	--	----------------	---	---

5. Generator's Name and Mailing Address  
 TOC HOLDINGS CO  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233  
 Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 259-4495

6. Transporter 1 Company Name  
 STEVE FORLER TRUCKING  
 U.S. EPA ID Number  
 WA R 0 0 0 0 0 1 2 8 3

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

8. Designated Facility Name and Site Address  
 CWMNW, INC.  
 17829 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 U.S. EPA ID Number  
 O R D 0 8 9 4 5 2 3 6 3

Facility's Phone: (541) 454-2843

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					
1.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)				P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670-PCP DIOXINS  
 B/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/M/M #CCN24117

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: *Mark A. Chandler* Signature: *Mark A. Chandler* Month: 8 Day: 30 Year: 12

INT'L

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

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

SIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

18b. Alternate Facility (or Generator) Manifest Reference Number: \_\_\_\_\_ U.S. EPA ID Number: \_\_\_\_\_

Facility's Phone: \_\_\_\_\_

18c. Signature of Alternate Facility (or Generator) \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WA 0009591207	2. Page 1 of 1	3. Emergency Response Phone 800-421-0200	4. Manifest Tracking Number <b>002038581 JJK</b>		
5. Generator's Name and Mailing Address TOC HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98199-1233				Generator's Site Address (if different than mailing address)			
Generator's Phone: (206) 286-1105							
6. Transporter 1 Company Name STEVE FORLER TRUCKING				U.S. EPA ID Number WA 000001261			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address CWMNV, INC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-9708				U.S. EPA ID Number OR 0000452353			
Facility's Phone: (541) 451-2643							
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	1. 11A3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, POIS (P027) (PCP, DIOXINS)	1	27	6000	P	P027	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AMA #DCN24117							
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>Mark C. Chandler</i>				Signature <i>Mark C. Chandler</i>		Month Day Year 8 30 12	
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>Nath. S...</i>				Signature <i>Nath. S...</i>		Month Day Year 8 30 12	
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.		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	

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
WAD009591207

2. Page 1 of 1

3. Emergency Response Phone  
(800) 424-9300

4. Manifest Tracking Number  
002038580 JJK

5. Generator's Name and Mailing Address  
TOC HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 290-1495

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
WAD000001263

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CWMNW, INC.  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-8709

U.S. EPA ID Number  
ORD089452389

Facility's Phone: (541) 454-2643

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	1. NA3077, HAZARDOUS WASTE, SOLID, N O S, 9, PGIII (F027)(PCP, DIOXINS)	1	DRUM	1	DRUM	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information

PROFILE OR302870 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MN #CCN24117

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: *Mark A. Charles* Signature: *Mark A. Charles* Month: 8 Day: 30 Year: 12

INTL

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

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: *Bob Green* Signature: *Bob Green* Month: 8 Day: 30 Year: 12  
Transporter 2 Printed/Typed Name: Signature: Month: Day: Year:

IGNATED FACILITY

18. Discrepancy  
18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection  
18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number:  
Facility's Phone:  
18c. Signature of Alternate Facility (or Generator) Month: Day: Year:

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)  
1. 2. 3. 4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a  
Printed/Typed Name: Signature: Month: Day: Year:

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <b>WAD009591207</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(800) 424-9300</b>	4. Manifest Tracking Number <b>002038579 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO.  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233**

Generator's Site Address (if different than mailing address)

Generator's Phone: **(206) 286-4895**

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING**

U.S. EPA ID Number  
**WAD000001263**

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
**CYMNW, INC.  
17620 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709**

U.S. EPA ID Number  
**ORD089452353**

Facility's Phone: **(541) 454-2643**

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	1. <b>HAZARDOUS WASTE, SOLID, N.O.S., 9, POIS (F027)(PCP, DIOXINS)</b>	1	✓		P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
**PROFILE OR302670 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC #M #CCN24117**

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  
*Mark A. Chandler*

Signature  
*Mark A. Chandler*

Month Day Year  
**8 2010**

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
*Steve Forler*

Signature  
*Steve Forler*

Month Day Year  
**8 2010**

Transporter 2 Printed/Typed Name

Signature

Month Day Year

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

18b. Alternate Facility (or Generator)

Manifest Reference Number: \_\_\_\_\_ U.S. EPA ID Number

Facility's Phone: \_\_\_\_\_

18c. Signature of Alternate Facility (or Generator)

Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month Day Year

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number W A D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 900 ) 424-9300	4. Manifest Tracking Number <b>002038578 JJK</b>
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5. Generator's Name and Mailing Address PJC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98109-1233	Generator's Site Address (if different than mailing address)
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Generator's Phone: ( 208 ) 286-4495

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number W A R 0 0 0 0 0 1 2 6 3
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7. Transporter 2 Company Name	U.S. EPA ID Number
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8. Designated Facility Name and Site Address CVMINW, INC. 17629 CEDAR SPRINGS LANE ARLINGTON OR 97912-9709	U.S. EPA ID Number O R D 0 8 9 4 5 2 3 5 3
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Facility's Phone: ( 541 ) 454-2643

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	OT	1	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
PROFILE OR302670 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/M/M #00CN24117

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>David A. Chandler</i>	Signature <i>David A. Chandler</i>	Month 9	Day 20	Year 12
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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 1 Printed/Typed Name <i>Steve Forler</i>	Signature <i>Steve Forler</i>	Month 8	Day 27	Year 12
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

18b. Alternate Facility (or Generator) Manifest Reference Number: \_\_\_\_\_ U.S. EPA ID Number: \_\_\_\_\_

Facility's Phone: \_\_\_\_\_

18c. Signature of Alternate Facility (or Generator) \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
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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
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GENERATOR  
TRANSPORTER  
IGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number W A D 0 0 0 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 800 ) 424-9300	4. Manifest Tracking Number <b>002038577 JJK</b>
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Generator's Name and Mailing Address TOO HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233	Generator's Site Address (if different than mailing address)
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Generator's Phone: ( 206 ) 286-4405	
-------------------------------------	--

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number W A R 0 0 0 0 0 1 2 6 3
--	---

7. Transporter 2 Company Name	U.S. EPA ID Number
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8. Designated Facility Name and Site Address CWMINW, INC. 17628 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709	U.S. EPA ID Number O R D 0 5 9 4 5 2 3 5 3
---	---

Facility's Phone: ( 541 ) 454-2840	
------------------------------------	--

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (FG27)(PCP, DIOXINS)	1	DT	1	P	F027			
	2.								
	3.								
	4.								

14. Special Handling Instructions and Additional Information PROFILE OR302670: PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MW #00124117
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15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.				
Generator's/Offor's Printed/Typed Name <i>Mark D. Spindle</i>	Signature <i>Mark D. Spindle</i>	Month 8	Day 30	Year 12

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.: _____
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17. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name <i>Steve Forler</i>	Signature <i>Steve Forler</i>	Month 8	Day 30	Year 12
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) _____ 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 _____

GENERATOR  
TRANSPORTER  
DESIGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number W A D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 800 ) 4 2 4 - 6 3 0 0	4. Manifest Tracking Number <b>002038576 JJK</b>	
5. Generator's Name and Mailing Address TCC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233				Generator's Site Address (if different than mailing address)		
Generator's Phone: ( 206 ) 286 4485						
6. Transporter 1 Company Name STEVE FORLER TRUCKING				U.S. EPA ID Number W A R 0 0 0 0 0 1 2 6 3		
7. Transporter 2 Company Name				U.S. EPA ID Number		
8. Designated Facility Name and Site Address CYMNW, INC. 17829 CEDAR SPRINGS LANE ARLINGTON OR 97912-9709				U.S. EPA ID Number O R D 0 8 9 4 5 7 3 5 3		
Facility's Phone: ( 503 ) 354-2643						
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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9 PG/II (F027 & PCP, DIOXINS)	1	DT	63.93	P	F027
	2.					
	3.					
	4.					
14. Special Handling Instructions and Additional Information PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-6300) CHEMTREC/M #00ND4117						
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>Mark A. Chandler</i>				Signature <i>Mark A. Chandler</i>		Month Day Year 5 29 12
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>Steve Forler</i>				Signature <i>Steve Forler</i>		Month Day Year 5 29 12
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.		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

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>WA D 0 0 9 5 9 1 2 0 7</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(800) 424-9300</b>	4. Manifest Tracking Number <b>002038575 JJK</b>		
		5. Generator's Name and Mailing Address <b>TOC HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98109-1233</b>		Generator's Site Address (if different than mailing address)			
Generator's Phone: <b>(206) 286-4305</b>		6. Transporter 1 Company Name <b>STEVE FORLER TRUCKING</b>		U.S. EPA ID Number <b>WA R 0 0 0 0 0 1 2 6 3</b>			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>CWMNW, INC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97912-9709</b>				U.S. EPA ID Number <b>O R D 0 8 9 4 5 2 3 6 3</b>			
Facility's Phone: <b>(503) 454-2613</b>							
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	1. <b>HA3077, HAZARDOUS WASTE SOLID, N.O.S., 9 POUL (F027) (PCP, DIOXINS)</b>				P	F027	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information <b>PROFILE OR302670. PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AM #001/23117</b>							
15. <b>GENERATOR'S/OFFEROR'S CERTIFICATION:</b> 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>Mark D. Spangler</i>				Signature <i>Mark D. Spangler</i>		Month Day Year <b>8 29 12</b>	
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>Steve Forler Trucking</i>				Signature <i>Steve Forler</i>		Month Day Year <b>8 29 12</b>	
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.		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	

GENERATOR

INT'L

TRANSPORTER

IGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WA0009591207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>002038574 JJK</b>		
5. Generator's Name and Mailing Address TCL HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233				Generator's Site Address (if different than mailing address)			
Generator's Phone: (206) 286-4495							
6. Transporter 1 Company Name STEVE FORLER TRUCKING			U.S. EPA ID Number WA R00001263				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address CWMINW, INC. 17629 CEDAR SPRINGS LANE ARLINGTON OR 97912-9709			U.S. EPA ID Number OR D000451353				
Facility's Phone: (541) 454-2643							
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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	D		P	F027	
2.							
3.							
4.							
14. Special Handling Instructions and Additional Information PROFILE OR302870: PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AAA #00021117							
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>Wesley D. Chandler</i>				Signature <i>Wesley D. Chandler</i>		Month Day Year 8 29 02	
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>Steve Forler</i>				Signature <i>Steve Forler</i>		Month Day Year 8 29 02	
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.		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	

GENERATOR

INT'L

TRANSPORTER

GNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number W A D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>002038573 JJK</b>
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5. Generator's Name and Mailing Address TOO HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233	Generator's Site Address (if different than mailing address)
Generator's Phone: (206) 286-4495	

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number W A R 0 0 0 0 0 1 2 6 3
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address COMMUNIC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97212-9709	U.S. EPA ID Number O R D 0 9 9 3 5 2 3 5 3
Facility's Phone: (541) 454-2643	

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	1. NA3077, HAZARDOUS WASTE, SOLID, H.O.S., 9 PGIII (F027)(PCP, DIOXINS)	1	DT	6400	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information PROFILE OR302670: PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTRECAWM #DCN24117
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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>Mark A. ...</i>	Signature <i>Mark A. ...</i>	Month 9	Day 21	Year 12
--	---------------------------------	------------	-----------	------------

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.:
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17. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name <i>...</i>	Signature <i>...</i>	Month 9	Day 21	Year 12
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.	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

GENERATOR  
INTL  
TRANSPORTER  
ALTERNATE FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WA 0009591207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>002038572 JJK</b>		
5. Generator's Name and Mailing Address TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233				Generator's Site Address (if different than mailing address)			
Generator's Phone: (206) 286-4105							
6. Transporter 1 Company Name STEVE FORLER TRUCKING			U.S. EPA ID Number WA 000001263				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address CWMN, INC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-9703			U.S. EPA ID Number OR 0089452353				
Facility's Phone: (541) 451-2613							
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.	HA3077. HAZARDOUS WASTE, SOLID, N.O.S. (9 PGH) (F027)(PCP, DIOXINS)				P	F027	
2.							
3.							
4.							
14. Special Handling Instructions and Additional Information PROFILE OR 302670. PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#M #0CN24117							
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>Mark D. ...</i>				Signature <i>Mark D. ...</i>		Month Day Year 9 20 02	
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				Signature		Month Day Year	
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)							
		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	

GENERATOR

INT'L

TRANSPORTER

IGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0009581207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>002038571 JJK</b>
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5. Generator's Name and Mailing Address  
TOC HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98109-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 286-4495

6. Transporter 1 Company Name: STEVE FORLER TRUCKING  
U.S. EPA ID Number: WA R 0 0 0 0 1 2 0 3

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

8. Designated Facility Name and Site Address  
CWMANW, INC  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709

Facility's Phone: (503) 454-2643

U.S. EPA ID Number: OR D 0 8 9 4 5 2 3 5 3

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					
1. X	HA3077 HAZARDOUS WASTE SOLID, ALC S, 9, PGIII (F027)(PCP, DIOXINS)	1	D-0028	P	F027			
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
PROFILE OR302670 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9308) CHEMTREC/M #00N24117

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: *Will Handle* Signature: *Will Handle* Month: 8 Day: 29 Year: 12

INT'L

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

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 8 Day: 29 Year: 12

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

SIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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)

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: \_\_\_\_\_

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D 0 0 9 8 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 800 ) 424-9300	4. Manifest Tracking Number 002038570 JJK
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5. Generator's Name and Mailing Address  
TOC HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: ( 200 ) 288-4195

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
WA R 0 0 0 0 0 1 2 6 3

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CYAMNW, INC.  
17028 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709

U.S. EPA ID Number  
OR D 0 8 0 4 5 2 5 5 3

Facility's Phone: ( 541 ) 454-2013

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	1. HAZARDOUS WASTE, SOLID, N.O.S., 9 PGIII (F027)(PCP, DIOXINS)			250	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
PROFILE OR302670, PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#00CN24117

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: *Michael Chandler* Signature: *[Signature]* Month: 8 Day: 27 Year: 12

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 1 Printed/Typed Name: *[Name]* Signature: *[Signature]* Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

18b. Alternate Facility (or Generator) Manifest Reference Number: \_\_\_\_\_ U.S. EPA ID Number: \_\_\_\_\_

Facility's Phone: \_\_\_\_\_

18c. Signature of Alternate Facility (or Generator) \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
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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  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number W A D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 800 ) 4 2 4 - 9 3 0 0	4. Manifest Tracking Number <b>002038569 JJK</b>		
5. Generator's Name and Mailing Address TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233				Generator's Site Address (if different than mailing address)			
Generator's Phone: ( 206 ) 286-4495							
6. Transporter 1 Company Name STEVE FORLER TRUCKING			U.S. EPA ID Number W A R 0 0 0 0 0 1 2 6 3				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address CWMNV, INC. 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709				U.S. EPA ID Number O R D 0 8 9 4 5 2 3 5 3			
Facility's Phone: ( 541 ) 454-2622							
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	1. HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027); POP, DIOXINS	1	DT	3000	P	F027	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information PROFILE OR302670. POP DIOXINS E/R/P = CHEMTREC (1 800-424-9300) CHEMTREC/AM #CCN28117							
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>Wendy Crute</i>				Signature <i>Wendy Crute</i>		Month Day Year 9 30 12	
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>Steve Forler</i>				Signature <i>Steve Forler</i>		Month Day Year 3 31 12	
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.		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	

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

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

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number W A D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 800 ) 424-9300	4. Manifest Tracking Number <b>002038568 JJK</b>
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5. Generator's Name and Mailing Address  
TDC HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: ( 206 ) 266-4495

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
W A R 0 0 0 0 0 1 2 6 3

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CWMNWINC  
17529 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709

U.S. EPA ID Number  
O R D 0 8 9 4 5 2 3 5 3

Facility's Phone: ( 541 ) 454-2643

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					
1.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027) (PCP, DIOXINS)		3	24.000	P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
PROFILE OR302670: PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MMA #CCN24117

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  
*Mark J. Chandler*

Signature  
*Mark J. Chandler*

Month Day Year  
9 29 02

INT'L

16. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit: \_\_\_\_\_  
Date leaving U.S.: \_\_\_\_\_

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
*Mark J. Chandler*

Signature  
*Mark J. Chandler*

Month Day Year  
9 29 02

Transporter 2 Printed/Typed Name  
*Mark J. Chandler*

Signature  
*Mark J. Chandler*

Month Day Year  
9 29 02

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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)

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  
*Mark J. Chandler*

Signature  
*Mark J. Chandler*

Month Day Year  
9 29 02

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WAD0009591207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>002038567 JJK</b>			
5. Generator's Name and Mailing Address TDC HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98199-1233				Generator's Site Address (if different than mailing address)				
Generator's Phone: (206) 256-4495								
6. Transporter 1 Company Name STEVE FORLER TRUCKING			U.S. EPA ID Number WAR000001203					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address CYMNW, INC 17620 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709				U.S. EPA ID Number ORD099452353				
Facility's Phone: (541) 454-2643								
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 WL/Vol.	13. Waste Codes		
		No.	Type					
X	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 3, PA01 (F027)(PCP, DIOXINS)				P	F027		
	2.							
	3.							
	4.							
14. Special Handling Instructions and Additional Information PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300); CHEMTREC#M#00121117								
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>Mark A. Spiller</i>				Signature <i>Mark A. Spiller</i>		Month 9	Day 20	Year 12
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>Steve Forler</i>				Signature <i>Steve Forler</i>		Month	Day	Year
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)								
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



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number W A D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 800 ) 424 - 9300	4. Manifest Tracking Number <b>002038566 JJK</b>
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5. Generator's Name and Mailing Address TDC HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98198-1233	Generator's Site Address (if different than mailing address)
Generator's Phone: ( 206 ) 286 - 4495	

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number W A R 0 0 0 0 0 1 2 8 3
--	---

7. Transporter 2 Company Name	U.S. EPA ID Number
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8. Designated Facility Name and Site Address CWMW, INC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97912-9700	U.S. EPA ID Number O R D 0 8 9 4 5 2 3 5 3
Facility's Phone: ( 541 ) 454 - 2813	

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	1. HAZARDOUS WASTE, SOLID, N.O.S., 9, POOL (F027)(PCP, DIOXINS)	1	DT	49	P	F027			
	2.								
	3.								
	4.								

14. Special Handling Instructions and Additional Information PROFILE OR 302670; PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300); CHEMTREC/MAN #CCN24117
---

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>Steve Forler</i>	Signature <i>Steve Forler</i>	Month 8	Day 29	Year 02

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>Steve Forler</i>	Signature <i>Steve Forler</i>	Month 8	Day 29	Year 02
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
Facility's Phone:	

18c. Signature of Alternate Facility (or Generator)	Month	Day	Year
---	-------	-----	------

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)			
1.	2.	3.	4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a				
Printed/Typed Name	Signature	Month	Day	Year

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

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

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
WAD009591207

2. Page 1 of 1

3. Emergency Response Phone  
(800) 424-9300

4. Manifest Tracking Number  
002038565 JJK

5. Generator's Name and Mailing Address  
TOC HOLDINGS CO.  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 286-4195

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
WAD000001293

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CWMNW, INC.  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709

U.S. EPA ID Number  
ORD089452353

Facility's Phone: (541) 454-2643

9a. HM  
9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))  
HAZARDOUS WASTE, SOLID, N.O.S., 9, PCB

10. Containers  
No. Type  
11. Total Quantity  
12. Unit Wt./Vol.  
13. Waste Codes

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.	HAZARDOUS WASTE, SOLID, N.O.S., 9, PCB	1	D		P			
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
PROFILE OR302670: PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#MM #CCN24117

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  
Signature  
Month Day Year  
0 26 02

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 1 Printed/Typed Name Signature Month Day Year  
Transporter 2 Printed/Typed Name Signature Month Day Year

18. Discrepancy  
18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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)  
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

GENERATOR

TRANSPORTER INT'L

SIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number  
W A D 0 0 9 5 9 1 2 0 7

2. Page 1 of 1

3. Emergency Response Phone  
( 600 ) 4 2 4 - 9 3 0 0

4. Manifest Tracking Number  
002038564 JJK

5. Generator's Name and Mailing Address  
TUC HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98109-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: ( 206 ) 286-4495

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
W A R 0 0 0 0 0 1 2 6 3

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CWMN/INC  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709

U.S. EPA ID Number  
O R D 0 8 0 4 5 2 3 5 3

Facility's Phone: ( 541 ) 454-2013

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 2, P011 (F027)(PCP, DIOXINS)	1	D	0020	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information

PROFILE OR302670: PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MN #CCN26137

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: *Mark A. Mueller* Signature: *Mark A. Mueller* Month: 9 Day: 21 Year: 12

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 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 9 Day: 21 Year: 12  
Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 9 Day: 21 Year: 12

18. Discrepancy  
18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

18b. Alternate Facility (or Generator) Manifest Reference Number: \_\_\_\_\_ U.S. EPA ID Number: \_\_\_\_\_  
Facility's Phone: \_\_\_\_\_

18c. Signature of Alternate Facility (or Generator) \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)  
1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a  
Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GENERATOR

TRANSPORTER

SIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>WA D 0 0 9 5 9 1 2 0 7</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>(800) 424-9300</b>	4. Manifest Tracking Number <b>002038563 JJK</b>		
5. Generator's Name and Mailing Address <b>TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233</b>				Generator's Site Address (if different than mailing address)			
Generator's Phone: <b>(206) 286-4405</b>							
6. Transporter 1 Company Name <b>STEVE FORLER TRUCKING</b>				U.S. EPA ID Number <b>WA R 0 0 0 0 0 1 2 6 3</b>			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>CWMNWINC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-9708</b>				U.S. EPA ID Number <b>OR D 0 8 8 4 5 2 3 5 3</b>			
Facility's Phone: <b>(541) 454-2643</b>							
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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 3 PGIII (F027 (PCP, DIOXINS))				P	F027	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information <b>PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/M #CCN24117</b>							
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>Steve Forler</i>				Signature <i>Steve Forler</i>		Month Day Year <b>8 29 12</b>	
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>Steve Forler</i>				Signature <i>Steve Forler</i>		Month Day Year <b>8 29 12</b>	
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.		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	

GENERATOR

INT'L

TRANSPORTER

SIGNATED FACILITY

GENERATOR'S INITIAL COPY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0009591207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>002038562 JJK</b>
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5. Generator's Name and Mailing Address  
TDC HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98109-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 286-3495

6. Transporter 1 Company Name: STEVE FORLER TRUCKING  
U.S. EPA ID Number: WA 000001263

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

8. Designated Facility Name and Site Address  
CWMNW, INC  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97912-9709

U.S. EPA ID Number: OR 0089452353

Facility's Phone: (541) 454-2843

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, POUL (F027)(PCP, DIOXINS)	1	DT	6400	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
PROFILE OR302670 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#00021117

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: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 8 Day: 15 Year: 95

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 5 Day: 27 Year: 95

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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)

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: \_\_\_\_\_

GENERATOR

TRANSPORTER INTL

SIGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number W A D 0 0 9 5 0 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (800)424-9300	4. Manifest Tracking Number <b>002038561 JJK</b>		
		5. Generator's Name and Mailing Address TOC HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98199-1333				Generator's Site Address (if different than mailing address)	
Generator's Phone: (206) 286-4195							
6. Transporter 1 Company Name STEVE FORLER TRUCKING				U.S. EPA ID Number WA R 0 0 0 0 0 1 2 0 3			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address CWMW, INC 17820 CEDAR SPRINGS LANE ARLINGTON OR 97912-9709				U.S. EPA ID Number OR D 0 5 0 3 5 2 3 5 3			
Facility's Phone: (541) 454-2613							
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.	HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (PCP, DIOXINS)	1	D				
2.							
3.							
4.							
14. Special Handling Instructions and Additional Information PROFILE OR302670. PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTRECAWM #CCN24117							
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>[Signature]</i>				Signature <i>[Signature]</i>		Month Day Year 10 23 12	
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 10 23 12	
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)							
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	

GENERATOR

TRANSPORTER INT'L

SIGNATED FACILITY

GENERATOR'S INITIAL COPY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WA 0009591207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>002038560 JJK</b>		
5. Generator's Name and Mailing Address TUC HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98199-1233				Generator's Site Address (if different than mailing address)			
Generator's Phone: (206) 286-4496							
6. Transporter 1 Company Name STEVE FORLER TRUCKING				U.S. EPA ID Number WA R 000001263			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address CWMN, INC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97912-9709				U.S. EPA ID Number OR 0089452353			
Facility's Phone: (541) 451-2613							
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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)				P	F027	
2.							
3.							
4.							
14. Special Handling Instructions and Additional Information PROFILE OR302670: PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC WA 117							
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>Michael Chandler</i>				Signature <i>Michael Chandler</i>		Month Day Year 8 27 12	
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				Signature		Month Day Year	
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.		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	

GENERATOR

INT'L

TRANSPORTER

IGNATED FACILITY

GENERATOR'S INITIAL COPY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number W A D 0 0 0 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 800 ) 424-9300	4. Manifest Tracking Number <b>002038559 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98109-1233  
 Generator's Site Address (if different than mailing address)

Generator's Phone: ( 206 ) 286-4125

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING**  
 U.S. EPA ID Number  
 W A R 0 0 0 0 0 1 2 6 3

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

8. Designated Facility Name and Site Address  
**CWMW, INC.**  
 17829 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 U.S. EPA ID Number  
 O R D 0 8 9 4 5 2 3 5 3

Facility's Phone: ( 541 ) 454 2843

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	1. NA3077, HAZARDOUS WASTE SOLID N.O.S., 9, P300 (F027)(PCP, DIOXINS)	1	D	69000	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670 PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTRECAAM #CCN29117

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  
*Mark A. Mueller*  
 Signature  
*Mark A. Mueller*  
 Month Day Year  
 8 27 12

INT'L

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

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
*ROD CRIVIN*  
 Signature  
*Rod Crivin*  
 Month Day Year  
 8 27 12

Transporter 2 Printed/Typed Name  
 Signature  
 Month Day Year

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

18b. Alternate Facility (or Generator) Manifest Reference Number: \_\_\_\_\_ U.S. EPA ID Number \_\_\_\_\_

Facility's Phone: \_\_\_\_\_

18c. Signature of Alternate Facility (or Generator) \_\_\_\_\_ Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month Day Year

8/103H2  
4220-422801

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D 0 0 0 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (500) 424-9300	4. Manifest Tracking Number <b>002038607 JJK</b>
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5. Generator's Name and Mailing Address  
700 - OLDINGS CO.  
2737 W/ COMPOSITE WAY  
SEATTLE WA 98188-1233  
Generator's Phone: (206) 286-4406

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
~~WARRUDD TRUCKING~~ **R TRANSPORT cl 23**  
U.S. EPA ID Number **WAH000028338**

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

8. Designated Facility Name and Site Address  
CAMANN, INC.  
17929 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709  
Facility's Phone: (541) 454-2849  
U.S. EPA ID Number **ORD089452353**

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 WL/Vol.	13. Waste Codes		
		No.	Type					
X	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DT	64500	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
FRC FILE OR602870: PCP DIOXINS  
S/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MW #CCN24117  
65700P

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: *Mark A. Chandler* Signature: *Mark A. Chandler* Month: 10 Day: 31 Year: 12

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 1 Printed/Typed Name: *John Stewart* Signature: *John Stewart* Month: 10 Day: 31 Year: 12  
Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy  
18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. **H132** 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: *Amy Jewett* Signature: *Amy Jewett* Month: 10 Day: 31 Year: 12

12

ams



**Chemical Waste Management  
Of The Northwest**

17629 Cedar Springs Lane  
Arlington, Oregon 97812  
541-454-2643  
EPA I.D.# ORDO89452353

LOAD NO. \_\_\_\_\_

MANIFEST DOC. NO. \_\_\_\_\_

INBOUND  
T/D: 14:36:48 2012-10-31  
ID: 422801 TRK ID: 23  
105320 lb G

OUTBOUND  
T/D: 14:58:05 2012-10-31  
ID: 422801 TRK ID: 23  
105320 lb G  
39620 lb PT  
65700 lb N

NET 32.85 TONS

GENERATOR \_\_\_\_\_



423623

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D 0 0 9 5 9 1 2 0 7	2. Page 1 of 21	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>002038916 JJK</b>
---	--	--------------------	---	---

5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO.**  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233  
(206) 288-4495

Generator's Site Address (if different than mailing address)  
**6M S 1 8 1 3**

6. Transporter 1 Company Name  
**R TRANSPORT INC.**

U.S. EPA ID Number  
WA H 0 0 0 0 2 8 3 3 8

7. Transporter 2 Company Name  
**UNION PACIFIC RAILROAD**

U.S. EPA ID Number  
N E D 0 0 1 7 9 2 9 1 0

8. Designated Facility Name and Site Address  
**CWMI INC.**  
17629 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709  
(541) 454-2643

U.S. EPA ID Number  
O R D 0 8 9 4 5 2 3 5 3

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 WL/Vol.	13. Waste Codes		
		No.	Type					
X	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)	001	CM	17800 <del>30,000</del> 8m 14-13	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information

1. PROFILE OR302870: PCP DIOXINS      ERG# 171      Container # WMHU 910213 17,800P  
E/R/P = CHEMTREC (1-800-424-9300)      CHEMTREC/M/M #CCN24117

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: **MARK CHANDLER**      Signature: **ION BEHALF OF MARK CHANDLER**      Month Day Year: **12/21/12**

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 1 Printed/Typed Name: **Jesse BURT**      Signature: **[Signature]**      Month Day Year: **12/21/12**

Transporter 2 Printed/Typed Name: **Cindi Cresp**      Signature: **[Signature]**      Month Day Year: **12/21/12**

18a. Discrepancy Indication Space:  Quantity       Type       Residue       Partial Rejection       Full Rejection  
**Quantity changed per Jessica Brown/Sound Earth 8m 14-13**

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. <b>H132</b>	2.	3.	4.
----------------	----	----	----

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Printed/Typed Name: **Amy Jewett**      Signature: **[Signature]**      Month Day Year: **1/3/13**

AMS





**Chemical Waste Management  
Of The Northwest**

17629 Cedar Springs Lane  
Arlington, Oregon 97812  
541-454-2643  
EPA I.D.# ORDO89452353

LOAD NO. \_\_\_\_\_

MANIFEST DOC. NO. \_\_\_\_\_

INBOUND  
T/D: 11:17:26 2013-01-03  
ID: 423623 TRK ID: 910213  
68280 lb G

OUTBOUND  
T/D: 13:47:42 2013-01-03  
ID: 423623 TRK ID: 910213  
68280 lb G  
50480 lb PT  
17800 lb N

NET 8.90 TONS

GENERATOR \_\_\_\_\_

423024

CWMI

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WA 0000501207	2. Page 1 of 2	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>002038917 JJK</b>		
5. Generator's Name and Mailing Address TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233 Generator's Phone: (206) 286-4495				Generator's Site Address (if different than mailing address)			
6. Transporter 1 Company Name R TRANSPORT INC.				U.S. EPA ID Number WAH000028338			
7. Transporter 2 Company Name UNION PACIFIC RAILROAD				U.S. EPA ID Number NED001782910			
8. Designated Facility Name and Site Address CWMNW, INC. 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709 Facility's Phone: (541) 454-2643				U.S. EPA ID Number ORD089452353			
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
	X	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)	001	CM	23680	P	F027
		2.			2m-1-4-13		
		3.					
		4.					
14. Special Handling Instructions and Additional Information 1. PROFILE OR302670: PCP DIOXINS ERG# 171 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/CWM #CCN24117 Container # WMH0910209 WMH0910204 23,680P							
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 ON BEHALF OF Mark Chandler		Signature ON BEHALF OF MARK CHANDLER		Month	Day	Year	
16. International Shipments Transporter signature (for exports only):		<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 Seth		Signature Seth		Month	Day	Year	
Transporter 2 Printed/Typed Name Jesse BURT		Signature Jesse		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space Quantity added per Jessica Brown/Sound Earth 2m-1-4-13 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.				
1.	H132						
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 Amy Jewett		Signature Amy Jewett		Month	Day	Year	
				11	13	13	

BMS







**Chemical Waste Management  
Of The Northwest**

17629 Cedar Springs Lane  
Arlington, Oregon 97812  
541-454-2643  
EPA I.D.# ORDO89452353

LOAD NO. \_\_\_\_\_

MANIFEST DOC. NO. \_\_\_\_\_

INBOUND  
T/D: 14:19:43 2013-01-03  
ID: 423624 TRK ID: 910204  
73740 lb G

OUTBOUND  
T/D: 15:16:55 2013-01-03  
ID: 423624 TRK ID: 910204  
73740 lb G  
50060 lb PT  
23680 lb N

NET 11.84 TONS

GENERATOR \_\_\_\_\_

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number W A D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 800 ) 424-9300	4. Manifest Tracking Number <b>002038606 JJK</b>
---	---	-------------------	---	---

5. Generator's Name and Mailing Address TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98109-1233	Generator's Site Address (if different than mailing address)
Generator's Phone: ( 206 ) 280-4495	

6. Transporter 1 Company Name <del>STEVE FORLER TRUCKING</del> R TRANSPORT	U.S. EPA ID Number WAH000029 538 <del>WA R 0 0 0 0 1 2 0 0</del>
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address CWMINWINC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97912-9709	U.S. EPA ID Number O R D 0 8 9 4 5 2 3 5 3
Facility's Phone: ( 541 ) 454-2643	

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	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, P03II (F027)(PCP, DIOXINS)			281		F027		
2								
3								
4								

14. Special Handling Instructions and Additional Information  PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/CWM #00N24117
--

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>Markus Mueller</i>	Signature <i>Markus Mueller</i>	Month Day Year 10   29   12
---	------------------------------------	--------------------------------

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): _____			

17. Transporter Acknowledgment of Receipt of Materials			
Transporter 1 Printed/Typed Name <i>David Thomas</i>	Signature <i>David Thomas</i>	Month Day Year 11   2   12	
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.

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.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WA0009501207	2. Page 1 of 1	3. Emergency Response Phone (800)424-9300	4. Manifest Tracking Number <b>002038605 JJK</b>		
5. Generator's Name and Mailing Address TOC HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98199-1233 Generator's Phone: (206)288-1105				Generator's Site Address (if different than mailing address)			
6. Transporter 1 Company Name <del>STEVE FORLER TRUCKING R</del> WA000028338				U.S. EPA ID Number			
7. Transporter 2 Company Name				U.S. EPA ID Number WA000001203			
8. Designated Facility Name and Site Address CVMN/INC. 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-8709 Facility's Phone: (541)454-2833				U.S. EPA ID Number ORD088452353			
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			
		1. HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (PCP, DIOXINS)	1	DT	6400	P	FD27
		2.					
		3.					
	4.						
14. Special Handling Instructions and Additional Information PROFILE OR302670. PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AM #CCN21117							
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/Offorer's Printed/Typed Name <i>Mark A. Chumble</i>				Signature <i>Mark A. Chumble</i>		Month Day Year 10 29 12	
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>Brian Monasmith</i>				Signature <i>Brian Monasmith</i>		Month Day Year 10 29 12	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____						
	Facility's Phone: _____				18c. Signature of Alternate Facility (or Generator)		Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name				Signature		Month Day Year	

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WA0008691207	2. Page 1 of 1	3. Emergency Response Phone 1-800-424-9300	4. Manifest Tracking Number <b>002038603 JJK</b>		
5. Generator's Name and Mailing Address TOO HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98109-1233				Generator's Site Address (if different than mailing address) WAH00002833			
Generator's Phone: (206) 296-4396		6. Transporter 1 Company Name STEVE FORLER TRUCKING R Transport		U.S. EPA ID Number WAH00002833			
		7. Transporter 2 Company Name		U.S. EPA ID Number			
8. Designated Facility Name and Site Address COMMUNITY LLC 17620 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709				U.S. EPA ID Number ORD099452353			
Facility's Phone: (541) 454-2643							
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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	D	15000	P	F027	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/M/M #CCN24117							
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>Mark Chandler</i>				Signature <i>Mark Chandler</i>		Month Day Year 10 29 12	
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>Lee</i>				Signature <i>[Signature]</i>		Month Day Year 10 29 12	
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 _____							
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator) _____						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. _____		2. _____		3. _____		4. _____	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name _____				Signature _____		Month Day Year	

GENERATOR  
INTL  
TRANSPORTER  
DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number W A D 0 0 9 5 9 1 2 0 7	2. Page 1 of	3. Emergency Response Phone 1 800 424 9300	4. Manifest Tracking Number <b>002038601 JJK</b>
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5. Generator's Name and Mailing Address  
TOO HOLDINGS CO.  
2737 WOODMODORE WAY  
SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 286-4495

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
W A R 0 0 0 0 0 1 2 8 3

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CYMMAV INC.  
17829 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709

U.S. EPA ID Number  
O R D 0 2 9 1 5 2 3 5 3

Facility's Phone: (541) 454-2833

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	1. NA3077, HAZARDOUS WASTE, SOLID, N O S, 9, PGIII (F027)(PCP, DIOXINS)	1	-		P	5027			
	2.								
	3.								
	4.								

14. Special Handling Instructions and Additional Information  
PROFILE OR302670 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#MM#DON24117

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: *David Clarke* Signature: *[Signature]* Month: *8* Day: *21* Year: *17*

INT'L

16. International Shipments  Import to U.S.  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: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

SIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0009591207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>002038600 JJK</b>
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5. Generator's Name and Mailing Address TOC HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98199-1233		Generator's Site Address (if different than mailing address)	
Generator's Phone: (206) 286-4495			

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number WA R 000001203
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7. Transporter 2 Company Name	U.S. EPA ID Number
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8. Designated Facility Name and Site Address CWMIW, INC 17029 CEDAR SPRINGS LANE ARLINGTON OR 97912-9700	U.S. EPA ID Number OR D 089452353
Facility's Phone: (503) 454-2643	

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DT	0.200	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTRECAWM #CCN24117	
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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>Mark Heath</i>	Signature <i>Mark Heath</i>	Month 9	Day 21	Year 12
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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>Steve Forler</i>	Signature <i>Steve Forler</i>	Month 7	Day 11	Year 12
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
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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

GENERATOR

INTL

TRANSPORTER

ALTERNATE FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0000501207	2. Page 1 of 1	3. Emergency Response Phone (900) 471-9300	4. Manifest Tracking Number <b>002038599 JJK</b>
	5. Generator's Name and Mailing Address TOO HOLDINGS CO. 3737 W COMMODORE WAY SEATTLE WA 98198-1233			

Generator's Site Address (if different than mailing address)  
Generator's Phone: (206) 298-4195

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number WA R 000001263
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address CWMN, INC. 17829 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709	U.S. EPA ID Number OR D 0 8 9 4 5 2 3 5 3
Facility's Phone: (541) 454-2843	

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DT	64/100	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
PROFILE OR302870 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-8300) CHEMTREC/CWM #CCN24117

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: *Mark A. Hunter* Signature: *Mark A. Hunter* Month: 9 Day: 21 Year: 12

GENERATOR

INT'L

16. International Shipments  Import to U.S.  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: *EARLY 1 PLYMOUTH* Signature: *EARLY 1 PLYMOUTH* Month: 9 Day: 21 Year: 12

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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.
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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.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0009681207	2. Page 1 of 1	3. Emergency Response Phone (800)424-9300	4. Manifest Tracking Number <b>002038598 JJK</b>
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Generator's Name and Mailing Address: TOC HOLDINGS CO  
3737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address):

Generator's Phone: (206) 286-4495

6. Transporter 1 Company Name: STEVE FORLER TRUCKING  
U.S. EPA ID Number: WA R 0 0 0 0 0 1 2 6 3

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

8. Designated Facility Name and Site Address: CWMIW, INC  
17628 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9709  
U.S. EPA ID Number: O R D 0 8 9 4 5 2 3 5 3

Facility's Phone: (541) 454-2643

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)				P	5027		
	2.							
	3.							
	4.							

4. Special Handling Instructions and Additional Information: PROFILE OR302670 POP DIOXINS  
E/R/P - CHEMTREC (1-800-424-9300) CHEMTREC#WM#CCN24117

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: \_\_\_\_\_ Signature: \_\_\_\_\_  
Month: 9 Day: 20 Year: 2

INT'L

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

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Month: 9 Day: 20 Year: 2

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

ALTERNATE FACILITY

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA00000501203	2. Page 1 of 1	3. Emergency Response Phone (206) 290-4126	4. Manifest Tracking Number <b>002038597 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO.**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233  
 Generator's Phone: (206) 290-4126

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING**

U.S. EPA ID Number  
WA00000001203

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
**CWMN, INC**  
 17620 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 Facility's Phone: (541) 454-2643

U.S. EPA ID Number  
ORD020452353

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, P301 (F027)(PCP, DIOXINS)				P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
**PROFILE OR302870: PCP DIOXINS**  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#MM #CCN21117

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/Offeor's Printed/Typed Name: *Mark A. Chandler* Signature: *Mark A. Chandler* Month: 9 Day: 20 Year: 2012

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 9 Day: 20 Year: 2012

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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 INTL

DESIGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number W A D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 800 ) 424-9300	4. Manifest Tracking Number <b>002038596 JJK</b>
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5. Generator's Name and Mailing Address TOL HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98199-1233	Generator's Site Address (if different than mailing address)
Generator's Phone: ( 206 ) 286-4496	

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number W A R 0 0 0 0 0 1 2 0 3
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7. Transporter 2 Company Name	U.S. EPA ID Number
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8. Designated Facility Name and Site Address CWMNW, INC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709	U.S. EPA ID Number O R D 0 9 9 4 5 2 3 5 3
Facility's Phone: ( 541 ) 454-2643	

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DT	1400	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#MM #00N24117
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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>Mark S. Chandler</i>	Signature <i>Mark S. Chandler</i>	Month 9	Day 20	Year 12
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INT'L

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.: _____
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TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name <i>CARY E BYRNE</i>	Signature <i>Cary E Byrne</i>	Month 9	Day 20	Year 12
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 Manifest Reference Number: _____
18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone:
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. _____ 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 _____
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Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 00000501207	2. Page 1 of	3. Emergency Response Phone 1-800-424-9300	4. Manifest Tracking Number <b>002038595 JJK</b>
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5. Generator's Name and Mailing Address  
**TCC HOLDINGS CO.**  
**2737 WOOMMOORE WAY**  
**SEATTLE WA 98199-1233**

Generator's Phone: (206) 296-1406

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING**

U.S. EPA ID Number  
WA R 000 001 2 6 3

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
**CAMINW INC**  
**17628 CEDAR SPRINGS LAKE**  
**ARLINGTON OR 97912-8709**

Facility's Phone: (503) 454-2643

U.S. EPA ID Number  
OR D 0 8 9 4 5 2 3 5 3

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)				F	E027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
**PROFILE OR302670: PCP DIOXINS**  
**E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AMM #DCN21117**

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/Offeor's Printed/Typed Name: *Steve Forler* Signature: *[Signature]* Month: 9 Day: 19 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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)

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: \_\_\_\_\_

GENERATOR

INTL

TRANSPORTER

IGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WA 0009581207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>002038594 JJK</b>		
		5. Generator's Name and Mailing Address TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98109-1233				Generator's Site Address (if different than mailing address)	
Generator's Phone: (206) 286-3185							
6. Transporter 1 Company Name STEVE FORLER TRUCKING				U.S. EPA ID Number WA R 0 0 0 0 0 1 2 0 3			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address CWMANV, INC 17529 CEDAR SPRINGS LANE ARLINGTON OR 97012-8700				U.S. EPA ID Number OR D 0 9 0 4 5 2 3 5 3			
Facility's Phone: (541) 454-7843							
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.	N=3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DR	600	P	F027	
2.							
3.							
4.							
14. Special Handling Instructions and Additional Information PROFILE OR302670: PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/M #CCN24117							
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>Mark A. Smith</i>				Signature <i>Mark A. Smith</i>		Month Day Year 9   19   12	
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>Steve Forler</i>				Signature <i>Steve Forler</i>		Month Day Year 9   19   12	
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.		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	

GENERATOR

INT'L

TRANSPORTER

ALTERNATE FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number W A D 0 0 0 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (500) 424-8300	4. Manifest Tracking Number <b>002038593 JJK</b>
	5. Generator's Name and Mailing Address TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98196-1233			

Generator's Site Address (if different than mailing address) TOC HOLDINGS CO. 2737 W COMMODORE WAY SEATTLE WA 98196-1233		Generator's Phone: (206) 296-4495
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6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number W A R 0 0 0 0 0 1 2 6 3
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7. Transporter 2 Company Name	U.S. EPA ID Number
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8. Designated Facility Name and Site Address CWMW, INC. 17029 CEDAR SPRINGS LANE ARLINGTON OR 97012-9709	U.S. EPA ID Number O R D 0 8 9 4 5 2 3 5 3
Facility's Phone: (541) 454-2043	

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	1. HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DT	64000	P	E027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#MM #CCN24117
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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>Mark J. ...</i>	Signature <i>Mark J. ...</i>	Month 9	Day 11	Year 12
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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.:
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17. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name GARY E ...	Signature <i>Gary E ...</i>	Month 9	Day 11	Year 12
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
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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

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA ID 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number <b>002038592 JJK</b>
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5. Generator's Name and Mailing Address TOC HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98108-1233	Generator's Site Address (if different than mailing address)
Generator's Phone: (206) 286-4486	

6. Transporter 1 Company Name STEVE FORLER TRUCKING	U.S. EPA ID Number WA R 0 0 0 0 0 1 2 6 3
--	--

7. Transporter 2 Company Name	U.S. EPA ID Number
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8. Designated Facility Name and Site Address CWMNW, INC 17829 CEDAR SPRINGS LANE ARLINGTON OR 97812-8709	U.S. EPA ID Number O R D 0 8 9 4 5 2 3 6 3
Facility's Phone: (541) 454-2612	

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					
1.	HAZARDOUS WASTE, SOLID, N.O.S., 9, FB11 (F027)(POP, DIOXINS)	1			P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information PROFILE OR302870 POP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/M #CCN24117
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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>Mark A. Smith</i>	Signature <i>Mark A. Smith</i>	Month 9	Day 15	Year 12

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.:
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TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name <i>David Moore</i>	Signature <i>David Moore</i>	Month 9	Day 15	Year 12
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

GENERATED FACILITY

18. Discrepancy
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection
Manifest Reference Number:
18b. Alternate Facility (or Generator) U.S. EPA ID Number
Facility's Phone:
18c. Signature of Alternate Facility (or Generator) Month Day Year

19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)			
1.	2.	3.	4.

20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a				
Printed/Typed Name	Signature	Month	Day	Year

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

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
WA0009591207

2. Page 1 of 7

3. Emergency Response Phone  
(800) 424-9300

4. Manifest Tracking Number  
002038528 JJK

5. Generator's Name and Mailing Address  
TOC HOLDINGS CO  
3737 W COMMODORE WAY  
SEATTLE WA 98198-1233  
Generator's Phone: (206) 280-1195

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
WA0000001263

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CAMMWINC  
17829 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9708  
Facility's Phone: (541) 450-2643

U.S. EPA ID Number  
OR0059452353

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

1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)

1

P

P

F027

2.

3.

4.

14. Special Handling Instructions and Additional Information  
PROFILE OR302670 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTRECCAMM #CCN24117

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  
*Michael J. Madala*

Signature  
*Michael J. Madala*

Month Day Year  
9 18 00

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 1 Printed/Typed Name Signature Month Day Year

Transporter 2 Printed/Typed Name Signature Month Day Year

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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)

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

INT'L

TRANSPORTER

DESIGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: 09591207

2. Page 1 of 1

3. Emergency Response Phone: (800) 424-9300

4. Manifest Tracking Number: 002038526 JJK

5. Generator's Name and Mailing Address: 2737 W COMMODORE WAY SEATTLE WA 98109-1233

Generator's Site Address (if different than mailing address):

Generator's Phone: (200) 266-4495

6. Transporter 1 Company Name: STEVE FORLER TRUCKING

U.S. EPA ID Number: 000001203

7. Transporter 2 Company Name:

U.S. EPA ID Number:

8. Designated Facility Name and Site Address: 17628 CEDAR SPRINGS LANE ARLINGTON OR 97112-0709

U.S. EPA ID Number: 00000452353

Facility's Phone: (541) 451-2643

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)				P	F027		
	2.							
	3.							
	4.							

4. Special Handling Instructions and Additional Information: PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AM #CCN24117

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/Offorer's Printed/Typed Name: Mark A. ...

Signature: [Signature]

Month Day Year: 12 15 11

International Shipments:  Import to U.S.  Export from U.S.

Port of entry/exit: \_\_\_\_\_

Date leaving U.S.: \_\_\_\_\_

Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Month Day Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Month Day Year: \_\_\_\_\_

Discrepancy

Discrepancy Indication Space:  Quantity  Type  Residue  Partial Rejection  Full Rejection

Alternate Facility (or Generator): \_\_\_\_\_

Manifest Reference Number: \_\_\_\_\_

U.S. EPA ID Number: \_\_\_\_\_

Signature of Alternate Facility (or Generator): \_\_\_\_\_

Month Day Year: \_\_\_\_\_

Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a

Signature: \_\_\_\_\_

Month Day Year: \_\_\_\_\_

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number W A D 0 0 8 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 800 ) 424-9300	4. Manifest Tracking Number <b>002038525 JJK</b>
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5. Generator's Name and Mailing Address  
TOC HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: ( 206 ) 286-4495

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
W A R 0 0 0 0 0 1 2 6 3

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
COMMUNIC  
17829 CEDAR SPRINGS LANE  
ARLINGTON OR 97912-9700

U.S. EPA ID Number  
O R D 0 8 9 1 5 2 3 5 3

Facility's Phone: ( 541 ) 454-2643

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	HA3077, HAZARDOUS WASTE, SOLID, N.O.S. (F027) (PCP, DIOXINS)			200	55	F027		
2								
3								
4								

14. Special Handling Instructions and Additional Information  
PROFILE OR302670 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/WM #OCN24117

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: *Walter M. ...* Signature: *[Signature]* Month: 9 Day: 17 Year: 11

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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

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

Form Approved. OMB No. 2050-0039

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: WA 0009591207  
 2. Page 1 of 1  
 3. Emergency Response Phone: (800) 424-9300  
 4. Manifest Tracking Number: 002038524 JJK

5. Generator's Name and Mailing Address: 755 HOLLINGS DR, 2797 W COMMODORE WAY, SEATTLE WA 98199-1233  
 Generator's Site Address (if different than mailing address):  
 Generator's Phone: (206) 286-4405

6. Transporter 1 Company Name: STEVE FORLER TRUCKING  
 U.S. EPA ID Number: WA R 000001203

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

8. Designated Facility Name and Site Address: CWMNW, INC., 17629 CEDAR SPRINGS LANE, ARLINGTON OR 97912-9709  
 U.S. EPA ID Number: OR D 089452353  
 Facility's Phone: (541) 454-2043

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					
1.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9 PGH (F027)(PCP, DIOXINS)	1	DT	64000	P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information: PROFILE OR302670 PCP DIOXINS, E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC #CCN24117

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: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 9 Day: 10 Year: 2

INT'L

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 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 7 Day: 17 Year: 19  
 Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

TRANSPORTER

18. Discrepancy: 18a. Discrepancy Indication Space:  Quantity  Type  Residue  Partial Rejection  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: \_\_\_\_\_

SIGNATED FACILITY

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: \_\_\_\_\_

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA D 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone ( 200 ) 4 2 4 - 9 3 0 0	4. Manifest Tracking Number <b>002038523 JJK</b>
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Generator's Name and Mailing Address  
**TOC HOLDINGS CO**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: ( 206 ) 296-4495

6. Transporter 1 Company Name <b>STEVE FORLER TRUCKING</b>	U.S. EPA ID Number WA R 0 0 0 0 0 1 2 0 3
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address <b>CWMINW, INC.</b> 17629 CEDAR SPRINGS LAKE ARLINGTON OR 97112-8709	U.S. EPA ID Number OR D 0 8 9 4 5 2 3 9 3
Facility's Phone: ( 541 ) 454-2033	

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, POIS (F027)(PCP, DIOXINS)				P	F027			
	2.								
	3.								
	4.								

14. Special Handling Instructions and Additional Information

PROFILE OR302670-PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AMM #CCN24117

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>Meredith ...</i>	Signature <i>[Signature]</i>	Month 9	Day 17	Year 00
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16. International Shipments  Import to U.S.  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>[Signature]</i>	Signature <i>[Signature]</i>	Month 9	Day 17	Year 00
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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 \_\_\_\_\_

9. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

1.	2.	3.	4.
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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
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GENERATOR

TRANSPORTER INT'L

VATED FACILITY

D

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA0009591207	2. Page 1 of 1	3. Emergency Response Phone (800)424-9300	4. Manifest Tracking Number <b>002038522 JJK</b>
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5. Generator's Name and Mailing Address THE HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98199-1293	Generator's Site Address (if different than mailing address)
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Generator's Phone: (206) 786-4495	6. Transporter 1 Company Name STEVE FORLER TRUCKING
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7. Transporter 2 Company Name	U.S. EPA ID Number WA0000001263
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8. Designated Facility Name and Site Address CWMN, INC 17828 CEDAR SPRINGS LANE ARLINGTON OR 97812-9709	U.S. EPA ID Number OR0000152351
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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	1. HA3077, HAZARDOUS WASTE, SOLID, N.O.S. (F027)(PCP, DIOXINS)	1	17	17	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information PROFILE OR302870 PCP DIOXINS E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/M/M #00N21117
--

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>Steve Forler</i>	Signature <i>Steve Forler</i>	Month 9	Day 14	Year 12
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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.: _____
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17. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name <i>Steve Forler</i>	Signature <i>Steve Forler</i>	Month 9	Day 14	Year 12
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
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18c. Signature of Alternate Facility (or Generator)	Month	Day	Year
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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

GENERATOR  
INTL  
TRANSPORTER  
DESIGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0000501207	2. Page 1 of 1	3. Emergency Response Phone (800)424-9300	4. Manifest Tracking Number <b>002038521 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98109-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 286-4485

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING**

U.S. EPA ID Number  
 WA R 0 0 0 0 0 1 2 8 3

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

8. Designated Facility Name and Site Address  
**CYMINW, INC**  
 17629 CEDAR SPRINGS LANE  
 ARLINGTON OR 97912-9709

U.S. EPA ID Number  
 OR 0 0 0 1 0 2 3 5 3

Facility's Phone: (541) 454-2613

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	1. NA3077, HAZARDOUS WASTE SOLID, H.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DOT	200	P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670: PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/WA #CCN/4117

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

Generator's/Offor's Printed/Typed Name: *Steve Forler* Signature: *[Signature]* Month: 9 Day: 14 Year: 12

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 1 Printed/Typed Name: *[Name]* Signature: *[Signature]* Month: 9 Day: 14 Year: 12

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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)

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: \_\_\_\_\_

GENERATOR

TRANSPORTER

DESIGNATED FACILITY

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone	4. Manifest Tracking Number <b>002038520 JJK</b>
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5. Generator's Name and Mailing Address <b>TOO HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98109-1233</b>	Generator's Site Address (if different than mailing address)
Generator's Phone:	

6. Transporter 1 Company Name <b>STEVE FORER TRUCKING</b>	U.S. EPA ID Number
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address <b>CWMNWINC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97912-9709</b>	U.S. EPA ID Number <b>OR D 0 3 9 1 5 2 3 5 3</b>
Facility's Phone:	

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.	HA3077, HAZARDOUS WASTE, SOLID H.G.S. 3 PGIII (F027)(PCP, DIOXINS)	1	DT	1000	F	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information <b>PROFILE OR302670 PCP DIOXINS E/R/P - CHEMTREC (1-800-424-9300) CHEMTREC/AM #CON21117</b>
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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	Signature	Month	Day	Year
--	-----------	-------	-----	------

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	Signature	Month	Day	Year
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.

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  
INTL  
TRANSPORTER  
DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0009591287	2. Page 1 of 1	3. Emergency Response Phone 1-800-431-9100	4. Manifest Tracking Number <b>009476000 JJK</b>
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5. Generator's Name and Mailing Address  
 TOC HOLDINGS CO  
 2737 W COMMODORE WAY  
 SEATTLE WA 98109-1233  
 Generator's Phone: (206) 286-1195

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name STEVE EGGLER TRUCKING	U.S. EPA ID Number WA 0000001283
7. Transporter 2 Company Name	U.S. EPA ID Number

8. Designated Facility Name and Site Address  
 CWMNW, INC.  
 17829 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 Facility's Phone: (511) 451-2812

U.S. EPA ID Number  
OR 00099452353

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.	NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PG(II) (F027)(PCP, DIOXINS)			1	P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670 PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/CWM #CCN24117

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: *Mark A. Smith* Signature: *Mark A. Smith* Month: 9 Day: 11 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: *Steve Eggler* Signature: *Steve Eggler* Month: 9 Day: 11 Year: 12

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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.)

Form Approved. OMB No. 2050-0039

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number WA 0000591207	2. Page 1 of 4	3. Emergency Response Phone (206) 421-9300	4. Manifest Tracking Number <b>009475999 JJK</b>
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5. Generator's Name and Mailing Address  
YOC HOLDINGS CO.  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 286-4105

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
WA 0000001262

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CYMANW, INC  
17029 CEDAR SPRINGS LANE  
ARLINGTON OR 97813-9709

U.S. EPA ID Number  
OR 0089452353

Facility's Phone: (503) 451-2813

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	1. NA3077, HAZARDOUS WASTE, SOLID, H.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1			P	F027		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information  
PROFILE OR302670 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC FAX #00N24117

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: *Steve Forler* Signature: *[Signature]* Month: *7* Day: *15* Year: *98*

GENERATOR

INT'L

16. International Shipments  Import to U.S.  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: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

DESIGNATED FACILITY

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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.)

Form Approved. OMB No. 2050-0039

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number

WA 0009591207

2. Page 1 of 1

3. Emergency Response Phone

(800) 424-9300

4. Manifest Tracking Number

009475998 JJK

5. Generator's Name and Mailing Address

Generator's Site Address (if different than mailing address)

TOO HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98109-1233

Generator's Phone:

(206) 298-1495

6. Transporter 1 Company Name

U.S. EPA ID Number

STEVE FORLER TRUCKING

WA E 000001163

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

U.S. EPA ID Number

CWMNWINC  
17829 CEDAR SPRINGS LANE  
ARLINGTON OR 97012-9709

OR D 0 8 9 4 9 2 3 5 3

Facility's Phone:

(503) 254-2033

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	1. HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (PC27)(PCP, DIOXINS)	1	DT	600X	P	PC27		
	2.							
	3.							
	4.							

14. Special Handling Instructions and Additional Information

PROFILE OR 302670 PCP DIOXINS  
E/R/P - CHEMTREC (1-800-424-9300) CHEMTREC/CWM #TCN21117

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: *Michael Smith* Signature: *Michael Smith* Month: 9 Day: 11 Year: 12

GENERATOR

INT'L

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

TRANSPORTER

17. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: *Bob Smith* Signature: *Bob Smith* Month: 7 Day: 13 Year: 12  
Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

GNATED FACILITY

18. Discrepancy  
18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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.)

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 000000001207	2. Page 1 of 1	3. Emergency Response Phone 206-424-8100	4. Manifest Tracking Number <b>009475997 JJK</b>
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5. Generator's Name and Mailing Address: **TDC HOLDINGS CO**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233  
 Generator's Phone: (206) 298-1105

Generator's Site Address (if different than mailing address):

6. Transporter 1 Company Name: **STEVE FORLER TRUCKING** U.S. EPA ID Number: WA 80000001203

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

8. Designated Facility Name and Site Address: **CWMINW, INC.**  
 17629 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 Facility's Phone: (503) 451-2812 U.S. EPA ID Number: OR 0000000152363

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)	1	DRUM	2200	P	F027	
	2.						
	3.						
	4.						

14. Special Handling Instructions and Additional Information:  
 PROFILE OR302670: PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AMM #CCND0117

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: *David S. Miller* Signature: *David S. Miller* Month: 9 Day: 13 Year: 10

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 1 Printed/Typed Name: Signature: Month: Day: Year:

Transporter 2 Printed/Typed Name: Signature: Month: Day: Year:

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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.

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  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number WA 00000501207	2. Page 1 of 1	3. Emergency Response Phone (206) 421-9300		4. Manifest Tracking Number <b>009475996 JJK</b>	
		5. Generator's Name and Mailing Address TOC HOLDINGS CO 2737 W COMMODORE WAY SEATTLE WA 98198-1233 Generator's Phone: (206) 258-4405					
6. Transporter 1 Company Name STEVE SCHUBER TRUCKING						U.S. EPA ID Number WA 0000001252	
7. Transporter 2 Company Name						U.S. EPA ID Number	
8. Designated Facility Name and Site Address CWMW, INC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812-8709 Facility's Phone: (503) 371-2813						U.S. EPA ID Number OR 0080152353	
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.	NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (P027)(PCP, DIOXINS)	1	DT	64002	P	P027	
2.							
3.							
4.							
14. Special Handling Instructions and Additional Information PROFILE OR302670 PCP DIOXINS E/R/P = CHEMTREC (1-800-421-9300) CHEMTREC/AM #CCN2117							
15. <b>GENERATOR'S/OFFEROR'S CERTIFICATION:</b> 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>Michael J. Smith</i>				Signature <i>Michael J. Smith</i>		Month Day Year 9   13   12	
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): _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name CHRIS E PYLEKIAK				Signature <i>Chris E Pylekiak</i>		Month Day Year 9   13   12	
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.	
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

INT'L

TRANSPORTER

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 00000501203	2. Page 1 of 1	3. Emergency Response Phone (206) 424-8700	4. Manifest Tracking Number <b>009475995 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98109-1233  
 Generator's Phone: (206) 396-1425

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING**  
U.S. EPA ID Number: WA R 0 0 0 0 0 1 2 0 3

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

8. Designated Facility Name and Site Address  
**CWMNW, INC.**  
 17628 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 Facility's Phone: (541) 452-2613

U.S. EPA ID Number: OR D 0 8 9 4 5 2 3 5 3

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	1. NA3077, HAZARDOUS WASTE, SOLID, H O S, 9 PGIII (P027)(POP, DIOXINS)		1	1	P	P027			
	2.								
	3.								
	4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670, POP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AM #CCN24117

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: *Steve Forler* Signature: *[Signature]* Month: 9 Day: 12 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: *[Name]* Signature: *[Signature]* Month: 9 Day: 12 Year: 12

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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.)

Form Approved. OMB No. 2050-0039

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator ID Number WA 00000001207	2. Page 1 of 1	3. Emergency Response Phone (800) 424-9300	4. Manifest Tracking Number 009475994 JJK
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5. Generator's Name and Mailing Address  
TOO HOLDINGS CO  
2737 W COMMODORE WAY  
SEATTLE WA 98199-1233

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 286-1105

6. Transporter 1 Company Name  
STEVE FORLER TRUCKING

U.S. EPA ID Number  
WA 50000001263

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
CYMNW, INC  
17620 CEDAR SPRINGS LANE  
ARLINGTON OR 97812-9700

U.S. EPA ID Number  
OR 00000452353

Facility's Phone: (503) 251-2812

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	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9, PGIII (F027)(PCP, DIOXINS)				P	F027	
	2.						
	3.						
	4.						

14. Special Handling Instructions and Additional Information  
PROFILE OR302670 PCP DIOXINS  
E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MN #CCN21117

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: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 9 Day: 12 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: 1 Day: 12 Year: 12

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: Day: Year:

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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.
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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 INT'L

DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0 0 9 5 9 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (800) 121 0300	4. Manifest Tracking Number <b>009475993 JJK</b>
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5. Generator's Name and Mailing Address  
**TFC HOLDINGS CO**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233  
 Generator's Phone: (206) 258 1105

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING** U.S. EPA ID Number  
WA R 0 0 0 0 0 1 2 8 3

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

8. Designated Facility Name and Site Address  
**CWMN, INC.**  
 17629 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 Facility's Phone: (503) 451 2612

U.S. EPA ID Number  
O R D 0 8 9 4 5 2 3 5 3

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.	HA3077, HAZARDOUS WASTE SOLID, H.O.S., 9, PGIII (F027)(PCP, DIOXINS)				P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302670 PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-8300) CHEMTREC/AM #CCN24117

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 \_\_\_\_\_ Signature \_\_\_\_\_ Month Day Year 9 12 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month Day Year 7 12 12

Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month Day Year

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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

INT'L

TRANSPORTER

DESIGNATED FACILITY



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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0009591207	2. Page 1 of 1	3. Emergency Response Phone 1 800 424 9300	4. Manifest Tracking Number <b>009475992 JJK</b>
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5. Generator's Name and Mailing Address  
**TOO HOLDINGS CO.**  
**2737 W COMMODORE WAY**  
**SEATTLE WA 98199-1233**  
 Generator's Phone: (206) 286-4135

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
**STEVE COBLER TRUCKING** U.S. EPA ID Number  
WA 0009591207

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

8. Designated Facility Name and Site Address  
**CWMH, INC.**  
**17629 CEDAR SPRINGS LANE**  
**ARLINGTON OR 97912-9709**  
 Facility's Phone: (503) 451-2813

U.S. EPA ID Number  
OR 0089452353

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.	HA3077, HAZARDOUS WASTE SOLID, N.O.S., M, P3III (F027)(PCP, DIOXINS)	1	DRUM	3000	P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
**PROFILE OR302670 PCP DIOXINS**  
**E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/AMM #00N24117**

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

Generator's/Offor's Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Transporter 2 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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 INT'L

DESIGNATED FACILITY

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

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0000501202	2. Page 1 of 1	3. Emergency Response Phone (206) 298-1105	4. Manifest Tracking Number <b>009475991 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO.**  
 2737 W COMMODORE WAY  
 SEATTLE WA 98199-1233  
 Generator's Phone: (206) 298-1105

Generator's Site Address (if different than mailing address)

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING** U.S. EPA ID Number  
WA 0000001563

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

8. Designated Facility Name and Site Address  
**CYMNW, INC.**  
 17629 CEDAR SPRINGS LANE  
 ARLINGTON OR 97812-9709  
 Facility's Phone: (503) 454-2849

U.S. EPA ID Number  
OR 0000452353

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9. PGIII (F027)(PCP, DIOXINS)	1	DT	41000	P	F027		
2.								
3.								
4.								

14. Special Handling Instructions and Additional Information  
 PROFILE OR302678 PCP DIOXINS  
 E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC/MEM #00N24117

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: *Steve Forler* Signature: *[Signature]* Month: 9 Day: 17 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: *Steve Forler* Signature: *[Signature]* Month: 9 Day: 17 Year: 12

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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. \_\_\_\_\_

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  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number WA 0 0 0 8 5 6 1 2 0 7	2. Page 1 of 1	3. Emergency Response Phone (300) 424-9300	4. Manifest Tracking Number <b>009475990 JJK</b>
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5. Generator's Name and Mailing Address  
**TOC HOLDINGS CO**  
**2787 W COMMODORE WAY**  
**SEATTLE WA 98199-1233**

Generator's Site Address (if different than mailing address)

Generator's Phone: (206) 288-1495

6. Transporter 1 Company Name  
**STEVE FORLER TRUCKING** U.S. EPA ID Number

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

8. Designated Facility Name and Site Address  
**CWMN, INC**  
**17620 CEDAR SPRINGS LANE**  
**ARLINGTON OR 97812-9709**

U.S. EPA ID Number  
OR 0 0 8 9 4 5 2 5 3

Facility's Phone: (503) 254-2612

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.	HA3077, HAZARDOUS WASTE, SOLID, N.O.S., 9 PGIII (F027)(PCP, DIOXINS)					F027			
2.									
3.									
4.									

14. Special Handling Instructions and Additional Information  
**PROFILE OR302670: PCP DIOXINS**  
**E/R/P = CHEMTREC (1-800-424-9300) CHEMTREC#M #CCN24117**

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

Generator's/Offor's Printed/Typed Name: *Mark A. Chandler* Signature: *Mark A. Chandler* Month: 9 Day: 11 Year: 12

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

Transporter signature (for exports only): \_\_\_\_\_

17. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: *David M. ...* Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Transporter 2 Printed/Typed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Discrepancy

18a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  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)

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: \_\_\_\_\_

GENERATOR

TRANSPORTER INTL

DESIGNATED FACILITY