



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911651

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80501 303-737-9915			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80501 303-737-9915		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
51-6 1813512	8/14/2018	Crude / Petroleum Hydrocarbon Impacted Soil Non-hazardous		18.91	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tara Smith		q. Signature Tara Smith		r. Date 8/24/18	

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

a. Transporter's Name and Address: Flaig-Williams & Co.		
b. Phone: 303-737-1100		
c. Driver Name (Print) Tara Smith	d. Signature Tara Smith	e. Date 8/24/18

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

a. Disposal Facility and Site Address: Toledo Corridor Juth & Jones Rd Commerce City, CO (Account # 000210) TOP Operating		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) Amy	f. Signature Amy	g. Date 8-24-18	

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

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





**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911653

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80504 303-727-0015			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80504 303-727-0015			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
5125 1813512	6/14/2018	Crude / Petroleum / Hydrocarbon Impacted Soil / Non-Hazardous			10.50	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date		

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

a. Transporter's Name and Address: JC TRUCKING #20		
b. Phone: (720) 600-8784		
c. Driver Name (Print)	d. Signature	e. Date
JANNO	[Signature]	8-27-18

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

a. Disposal Facility and Site Address: Waste Management Quinn & Tower RD Commerce City, CO Account #1501218 (TOP Operating)		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date
[Signature]		[Signature]	8-27-18

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

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





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911654

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

24

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80504 303-727-8916			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80504 303-727-8916			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	Type	n. Total Quantity	o. Unit Wt/Vol
R128 1812512	8/14/2021	Crude / Petroleum Hydrocarbon Impacted Soil / No Hazardous			11.07	Ton
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date		

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

a. Transporter's Name and Address: C/O 251058		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

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

a. Disposal Facility and Site Address: C/O 251058 Commerce City, CO 80022 TCF Operating	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

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

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





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911655

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80504 303-727-2915			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80504 303-727-2915			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	Type	n. Total Quantity	o. Unit Wt/Vol
6128 1813512	8/14/2018	Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous			1156	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date		

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

a. Transporter's Name and Address: JL TRUCKING 820		
b. Phone: (720) 600-8754		
c. Driver Name (Print) JASPERO	d. Signature [Signature]	e. Date 8-28-18

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

a. Disposal Facility and Site Address: Burr & Fowler Rd Commerce City, CO (Adjacent to IGA/210 IGA Leasing)		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date 8/28/18

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

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





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911656

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80504 303-727-8916			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80504 303-727-8916			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	Type	n. Total Quantity	o. Unit Wt/Vol
8106 1813512	07/14/2018	Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous			1215	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print)		q. Signature	r. Date			

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

a. Transporter's Name and Address: JL Truck		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date
Josiah Sanchez	J Sanchez	8-28-18

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

a. Disposal Facility and Site Address: Earth & Tower Rd Commerce City, CO (Account # 98/216 TOP Operating)	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date
		7/28/18

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

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





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SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911657

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80501 303-727-8915			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80501 303-727-8915			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	Type	n. Total Quantity	o. Unit Wt/Vol
5126 1015512	8/14/2021	Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous			16 C3	Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print) Trevor Smith		q. Signature Trevor Smith	r. Date 8/18/21
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## II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Flores Trucking #22		
b. Phone: magdalena Flores		
c. Driver Name (Print) magdalena Flores	d. Signature magdalena Flores	e. Date 8/28/21

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

a. Disposal Facility and Site Address: Waste Control 2015 S. 104th St Commerce City, CO 80022-1114 (City of Aurora)		b. US EPA Number	c. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) JX		f. Signature JX	g. Date 8/28/21

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

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





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911658

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80504 303-727-8915			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80504 303-727-8915		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity
6120 1013512	01/14/2021	Crude Petroleum Hydrocarbon Impacted Soil Non Hazardous			FIG 1
					Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print) Tanner Spacke		q. Signature Tanner Spacke	r. Date 3/22/15
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## II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: ACME COASTAL CORP		
b. Phone:		
c. Driver Name (Print) John D. Laro	d. Signature [Signature]	e. Date 3-25-15

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

a. Disposal Facility and Site Address: Earth & Tower Rd Commerce City, CO (Account # 000219) TOP Operating		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge, the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) Michael Long		f. Signature [Signature]	g. Date 3/26/15

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

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



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SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4911659

If waste is asbestos waste, complete Sections I, II, III and IV  
If waste is **NOT** asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TUP Operating County Line Road Longmont, CO 80504 303-727-8816			e. Generator's Mailing Address: TUP Operating County Line Road Longmont, CO 80504 303-727-8816		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
428 1813512	8/14/21	Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous		10.50	Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print) Trevor Smith		q. Signature <i>Trevor Smith</i>	r. Date 8/22/18
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**II. TRANSPORTER** (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: JC TRUCKING #20		
b. Phone: (720) 600-8784		
c. Driver Name (Print) Jesse	d. Signature <i>Jesse</i>	e. Date 8-28-18

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

a. Disposal Facility and Site Address: TUP Operating County Line Road Commerce City, CO (Account # 190219 TUP Operating)		b. US EPA Number	c. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) <i>Trevor Smith</i>		f. Signature <i>Trevor Smith</i>	g. Date 8-28-18

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

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



**REPUBLIC**  
SERVICES**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4911666

If waste is asbestos waste, complete Sections I, II, III and IV  
If waste is **NOT** asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: County Line Plaza Longmont, CO 80501 303-737-8915			e. Generator's Mailing Address: County Line Plaza Longmont, CO 80501 303-737-8915		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity
3129 1013512	04-1-2018	Crude / Petroleum Hydrocarbon Impacted Soil Non-Hazardous			12 111
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date	

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

a. Transporter's Name and Address: JL Trucking		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date
Josiah Sanchez	J Sanchez	8-28-18

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

a. Disposal Facility and Site Address: South & Tower Rd Commerce City, CO - Account # 000218 JCP Generating	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date
		8-28-18

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

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





**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911667

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80504 303-727-6915			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80504 303-727-6915		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
1138 1513612	8/14/18	Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous		1650	Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print) Tina Spurr		q. Signature Tina Spurr	r. Date 8/28/18
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## II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: North County Services		
b. Phone:		
c. Driver Name (Print) Abraham Luna	d. Signature	e. Date 8/28-18

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

a. Disposal Facility and Site Address: Burr & Tower Inc Commerce City, CO (Account # 00215 TOP Operating)	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) C. M.	f. Signature	g. Date 8/28/18

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

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



**REPUBLIC**  
SERVICES**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4911668

If waste is asbestos waste, complete Sections I, II, III and IV  
If waste is **NOT** asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: County Line Road Longmont, CO 80504 303-737-5615			e. Generator's Mailing Address: County Line Road Longmont, CO 80504 303-737-5615		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity
208 1812912	8/14/2018	Sludge / Petroleum Hydrocarbon Impacted Soil Non Hazardous			16 11
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tanner Spooner		q. Signature Tanner Spooner		r. Date 8/28/18	

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

a. Transporter's Name and Address: Flores Trucking #22		
b. Phone: Magdalena Flores		
c. Driver Name (Print) Magdalena Flores	d. Signature [Signature]	e. Date 8/28/18

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

a. Disposal Facility and Site Address: East 4 Tower Hill Summersville, WV 26041 (OP Operating)		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) [Signature]		f. Signature [Signature]	g. Date 8/28/18

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

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



**REPUBLIC  
SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4911669

If waste is asbestos waste, complete Sections I, II, III and IV  
If waste is **NOT** asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes la-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: County Line Road Longmont, CO 80501 303-727-4615			e. Generator's Mailing Address: County Line Road Longmont, CO 80501 303-727-4615			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
5128 1813512	8/14/2021	Crude / Petroleum Hydrocarbon Impacted Soil Non-Hazardous			11 75	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print) Teresa Sanchez		q. Signature Teresa Sanchez		r. Date 8/28/18		

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

a. Transporter's Name and Address: JL		
b. Phone:		
c. Driver Name (Print) Josiah Sanchez	d. Signature J Sanchez	e. Date 8-28-18

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

a. Disposal Facility and Site Address: Bain & Tower Inc Commerce City, CO (Account # 990219 TCF Landfilling)		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) [Signature]		f. Signature [Signature]	g. Date 8-28-18

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

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





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911670

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: TUP Operating County Line Road Longmont, CO 80504 303-727-9915			e. Generator's Mailing Address: TUP Operating County Line Road Longmont, CO 80504 303-727-9915			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
5136 1013512	8/14/2018	Gravel / Petroleum Hydrocarbon Impacted Soil Non Hazardous			11.56	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print) Tina Spaulding		q. Signature Tina Spaulding		r. Date 8/28/18		

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

a. Transporter's Name and Address: JC Trucking #20		
b. Phone: (720) 600 8784		
c. Driver Name (Print) J. #20	d. Signature J. #20	e. Date 8/28/18

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

a. Disposal Facility and Site Address: 88th & Tower Rd Commerce City, CO (Account # 000216 TUP Operating)	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) Tina Spaulding	f. Signature Tina Spaulding	g. Date 8/28/18

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

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



**REPUBLIC  
SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4911671

If waste is asbestos waste, complete Sections I, II, III and IV  
If waste is **NOT** asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TFC Operating County Line Road Longmont, CO 80501 303-727-9810			e. Generator's Mailing Address: TFC Operating County Line Road Longmont, CO 80501 303-727-9810		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
		Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous		20.80	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date	

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

a. Transporter's Name and Address: North County, V		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

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

a. Disposal Facility and Site Address: Auto A Tower Inc Monticello City, CO Account # 000210 TFC Operating	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

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

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





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911672

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: County Line Road Lynchburg, CO 80604 303-727-0010			e. Generator's Mailing Address: County Line Road Lynchburg, CO 80604 303-727-0010		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity
5128161357	2/14/18	Crude / Petroleum Hydrocarbon Impacted Soil Type I Hazardous			1503
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date	

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

a. Transporter's Name and Address: Flores Trucking #22		
b. Phone: 303-610-1100 Flores		
c. Driver Name (Print)	d. Signature	e. Date
		2/28/18

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

a. Disposal Facility and Site Address: Sun & Water Inc Commerce City, CO 80040-4670 (303) 281-1000		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date
			2/28/18

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

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





**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911674

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: TCL Operating County Line Road Longmont, CO 80504 303-727-0916			e. Generator's Mailing Address: TCL Operating County Line Road Longmont, CO 80504 303-727-0916			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	Type	n. Total Quantity	o. Unit Wt/Vol
5126 1813512	8/14/2018	Crude / Petroleum / Hydrocarbon Impacted Soil Non Hazardous			10.71	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.						
p. Generator Authorized Agent Name (Print) Trevor Spack		q. Signature Trevor Spack	r. Date 8/29/18			

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

a. Transporter's Name and Address: 56 TRUCKING #20		
b. Phone: (720) 600-8784		
c. Driver Name (Print) JP100	d. Signature JP100	e. Date 8-29-18

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

a. Disposal Facility and Site Address: TCL Landfill Both & Tower Rd Commerce City, CO (Account # 140219 TCL Operating)		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) JA		f. Signature JA	g. Date 8/29/18

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

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



**REPUBLIC  
SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4911673

If waste is asbestos waste, complete Sections I, II, III and IV  
If waste is **NOT** asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TIC Operating County Line Road Longmont, CO 80501 303-727-9910			e. Generator's Mailing Address: TIC Operating County Line Road Longmont, CO 80501 303-727-9910		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity
5125 1013512	6/14/2018	Crude / Petroleum / Hydrocarbon Impacted Soil Non Hazardous			12.63
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Teresa Smith		q. Signature Teresa Smith		r. Date 8/29/18	

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

a. Transporter's Name and Address: C/S		
b. Phone:		
c. Driver Name (Print) Joan Sanchez	d. Signature Joan Sanchez	e. Date 8/29/18

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

a. Disposal Facility and Site Address: C/S County Line Rd Longmont, CO 80501 (Asphalt # 100210 T/C 100210)	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) Joan Sanchez	f. Signature Joan Sanchez	g. Date 8/29/18

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

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



**REPUBLIC  
SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4911675

If waste is asbestos waste, complete Sections I, II, III and IV  
If waste is NOT asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location:			e. Generator's Mailing Address:		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity
		Crude - Petroleum Hydrocarbon Impacted Soil Non-Hazardous			19.68
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature	r. Date		

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

a. Transporter's Name and Address:		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

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

a. Disposal Facility and Site Address:	c. US EPA Number	d. Discrepancy Indication Space:
b.		
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

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

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





**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911676

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of		
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80504 303 727-4615			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80504 303 727-4615			
f. Phone:			g. Phone:			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	Type	n. Total Quantity	o. Unit Wt/Vol
4128 1513512	8/15/2018	Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous			17.6E	Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print) Trevor Smith		q. Signature <i>Trevor Smith</i>	r. Date 8/29/18
------------------------------------------------------------	--	-------------------------------------	--------------------

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

a. Transporter's Name and Address: North Central Services		
b. Phone: Archon LAro		
c. Driver Name (Print) Archon LAro	d. Signature <i>Archon LAro</i>	e. Date 8-29-18

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

a. Disposal Facility and Site Address: Barn & Tower Rd Commerce City, CO Account # 140219 TOP Operating		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature <i>[Signature]</i>	g. Date 8/29/18

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

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





**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911677

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TOP Operating County Line Road Langmont, CO 80428 303-727-9910			e. Generator's Mailing Address: TOP Operating County Line Road Langmont, CO 80428 303-727-9910		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity
4928 1813612	8/14/18	Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous			20.91
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature	r. Date		

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

a. Transporter's Name and Address: Waste Services 5761 Birch Road W11 524		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

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

a. Disposal Facility and Site Address: Waste Services County Line Road Langmont, CO 80428 303-727-9910	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

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

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





**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911678

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location:			e. Generator's Mailing Address:		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
				11.36	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date	

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

a. Transporter's Name and Address:		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

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

a. Disposal Facility and Site Address:		c. US EPA Number	d. Discrepancy Indication Space:
b.			
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)	f. Signature	g. Date	

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

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





**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911679

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: County Line Road Longmont, CO 80504 303-737-5915			e. Generator's Mailing Address: County Line Road Longmont, CO 80504 303-737-5915		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:			i. Owner's Phone No.:		
h. Owner's Name:		i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
8126 1813512	8/1/2018	Crude / Petroleum Hydrocarbon Impacted Soil Non-Hazardous		1289	Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date	

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

a. Transporter's Name and Address: 7L trucking		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date
Joan Sanchez	J Sanchez	8/29/18

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

a. Disposal Facility and Site Address: 2000 Tower Rd Commerce City, CO Account # 00019 IOP Leasing		c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date
J Sanchez		J Sanchez	8/29/18

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

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



**REPUBLIC  
SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4911680

If waste is asbestos waste, complete Sections I, II, III and IV  
If waste is **NOT** asbestos waste, complete Sections I, II and III**I. GENERATOR** (Generator completes Ia-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: RCP Coating County Line Road Longmont, CO 80501 303-777-8816			e. Generator's Mailing Address: RCP Coating County Line Road Longmont, CO 80501 303-777-8816		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity
017 10/26/17	10/26/21	Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous			18.47
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Tina Smith "Marketing"		q. Signature Tina Smith "Marketing"		r. Date 8/29/18	

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

a. Transporter's Name and Address: Flores Trucking LLC 1031 Lakewood Blvd Boulder, CO 80501		
b. Phone:		
c. Driver Name (Print) J. V.	d. Signature J. V.	e. Date 8/29/18

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

a. Disposal Facility and Site Address: J.V. 5170 Lakewood Blvd Boulder, CO 80501	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) J.V.	f. Signature J.V.	g. Date 8-9-18

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

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





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911681

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80501 303-727-8016			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80501 303-727-8016		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type		n. Total Quantity
8126 1213512	8-1-2021	Crude / Petroleum / Hydrocarbon Impervious Soil Non Hazardous			1591 Tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Lynn Smith		q. Signature Lynn Smith	r. Date 8/29/18		

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

a. Transporter's Name and Address: Xcelty, LLC 1000 County Line Road Longmont, CO 80501		
b. Phone:		
c. Driver Name (Print) Michael L. H. H.	d. Signature Michael L. H. H.	e. Date 8-29-18

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

a. Disposal Facility and Site Address: Bath & Tower Rd Commerce City, CO (Account # 004219 TOP Operating)		c. US EPA Number	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) Lynn Smith	f. Signature Lynn Smith	g. Date 8-29-18	

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

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





# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911682

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: For Operating County Line Road Longmont, CO 80501 303-727-5416			e. Generator's Mailing Address: For Operating County Line Road Longmont, CO 80501 303-727-5416		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity
5176 1613612	3/14/2017	Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous			17.99

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print)		q. Signature	r. Date
Trace Smith, Operating		Trace Smith, Operating	3/29/18

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

a. Transporter's Name and Address:		
b. Phone:		
c. Driver Name (Print)	d. Signature	e. Date

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

a. Disposal Facility and Site Address:		c. US EPA Number	d. Discrepancy Indication Space:
b.			
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date

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

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





**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

4911683

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

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

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80504 303-727-8915			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80504 303-727-8915		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No. Type	n. Total Quantity	o. Unit Wt/Vol
6128 1013512	3/14/2021	Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous		10.12	Tons

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.

p. Generator Authorized Agent Name (Print) Teresa Sanchez	q. Signature Teresa Sanchez	r. Date 3/29/18
--------------------------------------------------------------	--------------------------------	--------------------

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

a. Transporter's Name and Address:		
b. Phone:		
c. Driver Name (Print) JOSAH SANCHEZ	d. Signature J Sanchez	e. Date 1/18/18 29-18

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

a. Disposal Facility and Site Address: TOP Operating both A Tower 101 Commerce City, CO (Account # 800210 TOP Operating)	c. US EPA Number	d. Discrepancy Indication Space:
b. I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print)	f. Signature	g. Date

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

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



**REPUBLIC  
SERVICES****NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

4911684

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

**I. GENERATOR** (Generator completes la-r)

a. Generator's US EPA ID Number		b. Manifest Document Number		c. Page 1 of	
d. Generator's Name and Location: TOP Operating County Line Road Longmont, CO 80504 303-727-8015			e. Generator's Mailing Address: TOP Operating County Line Road Longmont, CO 80504 303-727-8015		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity
61281813012	04/27/2021	Crude / Petroleum Hydrocarbon Impacted Soil Non Hazardous			10.45 tons
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print)		q. Signature		r. Date	
Tina Spoth, Operations		[Signature]		5/29/18	

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

a. Transporter's Name and Address: JC ROSEN #20		
b. Phone: (720) 600-8724		
c. Driver Name (Print) JASNO	d. Signature [Signature]	e. Date 5/29/18

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

a. Disposal Facility and Site Address: J&B Trench Rd Commerce City, CO 80020 TOP Operating		b. US EPA Number	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print)		f. Signature	g. Date
[Signature]		[Signature]	5/29/18

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

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