



**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

6310412

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 6310412		c. Page 1 of 1		
d. Generator's Name and Location: PACCO LLC 34 866245 - 103 313670 Akron, CO 80729			e. Generator's Mailing Address: PACCO LLC 800 W 5th St #1010 Los Angeles, CA 90017			
f. Phone: 918-630-6912			g. Phone: 918-630-9612			
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.	m. Containers Type	n. Total Quantity	o. Unit Wt/Vol
6126 2121705	6/12/2022	Hydrocarbon Contaminated Soil	1	510X DUMP	30	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) Ty Smith		q. Signature Ty Smith		r. Date 02/10/2021		

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

a. Transporter's Name and Address: JONES TRUCKING LLC 333 PARK AVE MERINGO, CO 80741		
b. Phone: 970.571.3652		
c. Driver Name (Print) LEONARD JONES	d. Signature [Signature]	e. Date 2-14-21

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

a. Disposal Facility and Site Address: Tower Landfill 18280 E. 60th Ave Commerce City, CO 80007 - DO Dozer		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) PC		f. Signature [Signature]	g. Date 2-15-21

## 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			



**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

6310412

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 6310412		c. Page 1 of 1	
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
				1 SIDE DUMP	30

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) T. Smith	q. Signature T. Smith	r. Date 02/10/2021
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## II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: JENSEN TRUCKING LLC 333 PARK AVE MORRIS, CO 80741		
b. Phone: 970.571.3652		
c. Driver Name (Print) LEONARD JONES	d. Signature	e. Date 2-10-21

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

a. Disposal Facility and Site Address:	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)	f. Signature	g. Date 2/10/21

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

a. Operator's Name and Address:	b. 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

**GENERATOR RETAIN**



**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

6313070

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 6313070		c. Page 1 of 1		
d. Generator's Name and Location: PACCO LLC 39 865249 - 100 513670 Arlon, CO 80720			e. Generator's Mailing Address: PACCO LLC 600 W 9th St #1010 Los Angeles, CA 90017			
f. Phone: 916-630-9812			g. Phone: 916-630-9812			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers		n. Total Quantity	o. Unit Wt/Vol
			No.	Type		
5125 2121703	1/12/2022	Hydrocarbon Contaminated Soil	1	500 GALS DUMP	30	lbs
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) TY SMITH		q. Signature <i>Ty Smith</i>		r. Date 2-19-21		

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

a. Transporter's Name and Address: JONES TRUCKING LLC 333 PARK AVE MERINO, CO 80741		
b. Phone: 970.571.3652		
c. Driver Name (Print) LEONARD JONES	d. Signature <i>Leonard Jones</i>	e. Date 2-19-21

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

a. Disposal Facility and Site Address: Tower Landfill 15291 E 80th Ave Commerce City, CO 80017 - DC Dozer		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) Ryan	f. Signature <i>Ryan</i>	g. Date 2-19-21	

## 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)		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

6313070

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 6313070		c. Page 1 of 1		
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		n. Total Quantity	o. Unit Wt/Vol
			No.	Type		
			1	55 GALS DUMP	30	

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) S. Smith		q. Signature <i>[Signature]</i>		r. Date 11/21/01	
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## II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: JONES TRUCKING INC 333 HARKAY MORRIS, CO. 95741			
b. Phone: 970.371.3652			
c. Driver Name (Print) Leonard Jones		d. Signature <i>[Signature]</i>	e. Date

## III. DESTINATION (Generator complete IIIa-c and Destination Site completes III d-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) S. Smith		f. Signature <i>[Signature]</i>	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			

**GENERATOR RETAIN**



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

## 6313072

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 <b>6313072</b>		c. Page 1 of <b>1</b>	
d. Generator's Name and Location: <b>PADCO LLC</b> <b>39 06524th - 103 313570</b> <b>Akron, CO 86320 918-030-0912</b>			e. Generator's Mailing Address: <b>PADCO LLC</b> <b>800 W 6th St #1010</b> <b>Los Angeles, CA 90017 918-030-0912</b>		
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
				Type	o. Unit Wt/Vol
<b>5120 212103</b>	<b>1/12/2022</b>	<b>Hydrocarbon Contaminated Soil</b>		<b>1</b>	<b>30</b>
				<b>SIDE PUMP</b>	<b>Tons</b>

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) <b>Ty Smith</b>	q. Signature <i>Ty Smith</i>	r. Date <b>2-19-21</b>
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### II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: <b>JONES TRUCKING LLC</b> <b>333 PARK AVE</b> <b>MORRIS, CO 80741</b>		
b. Phone: <b>970.571.3652</b>		
c. Driver Name (Print) <b>LEONARD JONES</b>	d. Signature <i>Leonard Jones</i>	e. Date <b>2-19-21</b>

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

a. Disposal Facility and Site Address: <b>Local Landfill</b> <b>16250 E 68th Ave</b> <b>Commerce City, CO 80017 - DC Dozer</b>	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>De</i>	f. Signature <i>De</i>	g. Date <b>2-19-21</b>

### 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		

TRANSPORTER RETAIN



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

6313072

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 6313072		c. Page 1 of 1		
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.	m. Containers Type	n. Total Quantity	o. Unit Wt/Vol
			1	5105	30	
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) Ty Smith			q. Signature Ty Smith		r. Date 2-19-21	

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

a. Transporter's Name and Address: JUNIOR TRUCKING LLC 333 BAY AVE MORRIS, GA 30244		
b. Phone: 770-511-3652		
c. Driver Name (Print) LEONARD JONES	d. Signature	e. Date 2-19-21

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

a. Disposal Facility and Site Address:	b.	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) We	f. Signature D. L. L.	g. Date 2-19-21	

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

a. Operator's Name and Address:	b. Phone:	c. Responsible Agency Name and Address:	d. Phone:
e. Special Handling Instructions and Additional Information:			
f. <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

6310413

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 <i>6310413</i>		c. Page 1 of <i>1</i>		
d. Generator's Name and Location: <i>PADCO LLC 59 005249 - 103 313670 Akron, CO 80721</i>			e. Generator's Mailing Address: <i>PADCO LLC 000 W 6th St #1010 Logan, CO 80017</i>			
f. Phone: <i>918-830-5912</i>			g. Phone: <i>918-830-5912</i>			
If owner of the generating facility differs from the generator, provide:						
h. Owner's Name:			i. Owner's Phone No.:			
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers		n. Total Quantity	o. Unit Wt/Vol
			No.	Type		
<i>1212103</i>	<i>11/2/22</i>	<i>Hydrocarbon Contaminated Soil</i>	<i>1</i>	<i>5 IDE DUMP</i>	<i>30</i>	<i>lbs</i>

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

<i>TY Smith</i>	<i>TY Smith</i>	<i>02/10/2021</i>
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: <i>JONES TRUCKING LLC 333 PARK AVE MERINO, CO 80741</i>		
b. Phone: <i>970.571.3652</i>		
<i>LEONARD JONES</i>	<i>[Signature]</i>	<i>2-14-21</i>
c. Driver Name (Print)	d. Signature	e. Date

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

a. Disposal Facility and Site Address: <i>Power Landfill 15200 E 60th Ave Commerce City, CO 80087 - DC Dezer</i>		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.			
<i>[Signature]</i>	<i>[Signature]</i>	<i>2/6/21</i>	
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			



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# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

6310413

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 6310413		c. Page 1 of 1		
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		n. Total Quantity	o. Unit Wt/Vol
			No.	Type		
			1	500L DUMP	30	
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) T. Smith		q. Signature T. Smith		r. Date 02/10/2021		

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

a. Transporter's Name and Address: JONES TRUCKING LLC 333 PAIRL AVE MORINO, CO 80741		
b. Phone: 970.571.3652		
c. Driver Name (Print) LEONARD JONES	d. Signature	e. Date 2/19/21

## 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) DC	f. Signature	g. Date 2/16/21	

## 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			

**GENERATOR RETAIN**



**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

6313071

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 6313071		c. Page 1 of 1		
d. Generator's Name and Location: PADO LLC 105 913570 33 80720 916-830-8912			e. Generator's Mailing Address: PADO LLC 800 W 10th St #1010 Los Angeles, CA 90017 916-830-8912			
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.	m. Containers Type	n. Total Quantity	o. Unit Wt/Vol
	1/2/2022	Hydrocarbon Contaminated Sol	1	500 L DUMP	30	28.31
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) Ty Smith			q. Signature [Signature]		r. Date 2-14-21	

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

a. Transporter's Name and Address: JONES TRUCKING LLC 333 MARK AVE MARRIPO, CO 80741		
b. Phone: 970.571.3652		
c. Driver Name (Print) LEONARD JONES	d. Signature [Signature]	e. Date 2-14-21

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

a. Disposal Facility and Site Address: [Address]	b. [Address]	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) [Name]	f. Signature [Signature]	g. Date 2-18-21	

## 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)		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

6313071

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)

Form I: Generator information including US EPA ID Number, Manifest Document Number (6313071), Generator Name and Location, Mailing Address, Phone numbers, Owner Name, and Waste Profile table with columns for Exp. Date, Shipping Name, Containers, Total Quantity, and Unit Wt/Vol.

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.

Form I continued: Generator Authorized Agent Name (Print), Signature, and Date.

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

Form II: Transporter information including Name and Address, Phone (970.571.3152), Driver Name (Leonard Jones), Signature, and Date.

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

Form III: Destination information including Disposal Facility and Site Address, US EPA Number, Discrepancy Indication Space, Authorized Agent Name (Print), Signature, and Date.

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

Form IV: Asbestos information including Operator's Name and Address, Responsible Agency Name and Address, Special Handling Instructions, Friable/Non-Friable checkboxes, OPERATOR'S CERTIFICATION, and Operator Name and Title (Print), Signature, and Date.

GENERATOR RETAIN



**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

6313075

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 6313075		c. Page 1 of 1	
d. Generator's Name and Location: PADCO LLC 39 005240 - 103 313670 Akron, CO 80720 816-630-8912			e. Generator's Mailing Address: PADCO LLC 800 W 6th St #1010 Los Angeles CA 90017 916-630-8912		
f. Phone:			g. Phone:		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #		k. Exp. Date	l. Waste Shipping Name and Description		m. Containers
					n. Total Quantity
					o. Unit Wt/Vol
8126 2121700		1/12/2022	Hydrocarbon Contaminated Soil		1 SIDE DUMP
					30

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) T. Smith		q. Signature T. Smith		r. Date 2-19-21	
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## II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: JONES TRUCKING LLC 333 PARK AVE MORINO, CO 80741		
b. Phone: 970.571.3652		
c. Driver Name (Print) LEONARD JONES		d. Signature L. Jones
		e. Date 2-19-21

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

a. Disposal Facility and Site Address: Lower Larvill 19230 E 88th Ave Commerce City, CO 80007 DC Dazer		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) J. Jones		f. Signature J. Jones	g. Date 2/19/21

## 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			



**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

6313075

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 6313075		c. Page 1 of 1		
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		n. Total Quantity	o. Unit Wt/Vol
			No.	Type		
			1	SIDE DUMP	30	
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: JONES TRUCKING LLC 333 PARK AVE MORING, CO 80741		
b. Phone: 970.571.3652		
c. Driver Name (Print) LEONARD JONES	d. Signature	e. Date

## III. DESTINATION (Generator complete IIIa-c and Destination Site completes III d-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 2/19/21

## 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)		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

6313074

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 6313074		c. Page 1 of 1		
d. Generator's Name and Location: PADCO LLC 3805249 - 103 913670 Akron, CO 80720 918-630-9912			e. Generator's Mailing Address: PADCO LLC 800 W 6th St #1010 Los Angeles, CA 90017 918-630-9912			
f. Phone: Akron, CO 80720 918-630-9912			g. Phone: Los Angeles, CA 90017 918-630-9912			
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
112121203	1/12/2022	Hydrocarbon Contaminated Soil		1	30	26.06 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) T. SMITH		q. Signature T. J. Smith	r. Date 2-19-21
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## II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: JONES TRUCKING LLC 333 PARK AVE MERRINO, CO 80741		
b. Phone: 970.571.3652		
c. Driver Name (Print) LEONARD JONES	d. Signature	e. Date 2-19-21

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

a. Disposal Facility and Site Address: Tower Landfill 18230 E. 60th Ave Commerce City, CO 80007 - DC Dozer	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) D. Jones	f. Signature	g. Date 2-19-21

## 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)	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	

TRANSPORTER RETAIN



**REPUBLIC**  
SERVICES

# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

6313074

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 6313074		c. Page 1 of 1		
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		n. Total Quantity	o. Unit Wt/Vol
			No.	Type		
			1	5125 DUMP	20	26.06

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) Ty Smith		q. Signature Ty Smith		r. Date	
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## II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: JONES TRUCKING LLC 353 PARK AVE MORNING, CO 80741		
b. Phone: 770.571.3652		
c. Driver Name (Print) LEONARD JONES		e. Date
d. Signature		

## III. DESTINATION (Generator complete IIIa-c and Destination Site completes III d-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 2-14-21

## 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)		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			

**GENERATOR RETAIN**