

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

Form Approved. OMB No. 2050-0039

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number	2. Page 1 of 1	3. Emergency Response Phone 708-534-9300	4. Manifest Tracking Number <b>008132894 JJK</b>	
5. Generator's Name and Mailing Address City of South Bend 1100 Prairie Ave South Bend, Ind. 46601				Generator's Site Address (if different than mailing address)		
Generator's Phone: 673-230-7044						
6. Transporter 1 Company Name RS Road CR Services, Inc.				U.S. EPA ID Number 11R000103164		
7. Transporter 2 Company Name				U.S. EPA ID Number		
8. Designated Facility Name and Site Address CLEAN WATERS INC 1408 GAYLUN DRIVE GRIFFITH, IN 46319				U.S. EPA ID Number 01R00000435		
Facility's Phone: 219 922-4545						
9a. HM.	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
1.	200 L Hazardous Containers Liquid	001	TT	5500	G	
2.			TT		G	
3.			TT		G	
4.			TT		G	
14. Special Handling Instructions and Additional Information  TICKET W# 55872 TRANSPORTER# UPW078810S-IL IL ID# 197885029						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name <i>[Signature]</i>				Signature <i>[Signature]</i>		Month Day Year 05 18 11
16. International Shipments: <input checked="" type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Dave Leggett				Signature <i>[Signature]</i>		Month Day Year 05 18 11
Transporter 2 Printed/Typed Name				Signature		Month Day Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input checked="" type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
18b. Alternate Facility (or Generator)				Manifest Reference Number:		U.S. EPA ID Number
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)				Signature		Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name Vicente Garcia				Signature <i>[Signature]</i>		Month Day Year 05 18 11

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number		2. Page 1 of 1		3. Emergency Response Phone 708-534-9300		4. Manifest Tracking Number <b>008132910 JJK</b>				
		5. Generator's Name and Mailing Address City of South Bend 1100 Prairie Ave South Bend Ind. 46601 Generator's Site Address (if different than mailing address)								Generator's Phone: 765-330-7040		
6. Transporter 1 Company Name RS Head Oil Services Inc.								U.S. EPA ID Number ILR000103184				
7. Transporter 2 Company Name								U.S. EPA ID Number				
8. Designated Facility Name and Site Address KLEAN WATERS INC 1403 GATLIN DRIVE GRIFFITH, IN 46319 Facility's Phone: 219 922-4545								U.S. EPA ID Number 0160000403				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
		1. Non-hazardous Contaminated Liquids				No.	Type					
		2.						5500	G			
		3.							G			
		4.							G			
14. Special Handling Instructions and Additional Information TICKET WOV 35871 TRANSPORTER# UPW0156155-IL U. 174 1970655023												
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.												
Generator's/Offeror's Printed/Typed Name <i>Robert C. Teague</i>								Signature <i>[Signature]</i>		Month Day Year 05 18 11		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:												
17. Transporter Acknowledgment of Receipt of Materials												
Transporter 1 Printed/Typed Name <i>David Leggett</i>								Signature <i>[Signature]</i>		Month Day Year 05 18 11		
Transporter 2 Printed/Typed Name								Signature		Month Day Year		
18. Discrepancy												
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection												
18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number:												
Facility's Phone:												
18c. Signature of Alternate Facility (or Generator) Month Day Year												
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)												
1.			2.			3.			4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a												
Printed/Typed Name <i>Vicente Garcia</i>								Signature <i>[Signature]</i>		Month Day Year 05/18/11		

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number <b>008132941 JJK</b>		
5. Generator's Name and Mailing Address <b>City of South Bend 1100 Prairie Ave. South Bend, IN 46601</b>				Generator's Site Address (if different than mailing address)			
Generator's Phone: <b>(613)220-7044</b>							
6. Transporter 1 Company Name <b>RS Used Oil Services, Inc.</b>				U.S. EPA ID Number <b>ILR003403184</b>			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>CLEAN WATERS INC 1408 GATLIN DRIVE GRIFFITH, IN 46319</b>				U.S. EPA ID Number <b>460880425</b>			
Facility's Phone: <b>219 622-4545</b>							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
1.	<b>Non-Hazardous Contaminated Solids</b>	<b>001</b>	<b>TT</b>	<b>5000</b>	<b>e</b>		
2.			<b>TT</b>		<b>e</b>		
3.			<b>SINK</b>	<b>205</b>	<b>G</b>		
4.			<b>TT</b>				
14. Special Handling Instructions and Additional Information <b>TICKET # 55873</b> <b>TRANSPORTER # UPW07581854L</b> <b>IL ID# 1970665039</b>							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offoror's Printed/Typed Name <b>Jeffrey C. Teague</b>				Signature <i>[Signature]</i>		Month Day Year <b>05/18/11</b>	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.      Port of entry/exit: _____ Transporter signature (for exports only): _____      Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name <b>Zach Petty</b>				Signature <i>[Signature]</i>		Month Day Year <b>05/18/11</b>	
Transporter 2 Printed/Typed Name				Signature		Month Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
18b. Alternate Facility (or Generator)      Manifest Reference Number: _____      U.S. EPA ID Number _____							
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator)      Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. _____		2. _____		3. _____		4. _____	
20. Designated Facility Owner or Operator, Certification of receipt of materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <b>Vicente Garcia</b>				Signature <i>[Signature]</i>		Month Day Year <b>05/18/11</b>	

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number <b>008132919 JJK</b>	
5. Generator's Name and Mailing Address <b>CITY of South Bend 1100 Prairie Ave South Bend IN 46601</b>			Generator's Site Address (if different than mailing address)			
Generator's Phone: <b>(613) 220-7044</b>						
6. Transporter 1 Company Name <b>ES Used Oil Services, Inc.</b>			U.S. EPA ID Number <b>ILR000109104</b>			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>CLEAN WATERS INC 1400 CATLIN DRIVE GRIFFITH, IN 46319</b>			U.S. EPA ID Number <b>918000436 2774</b>			
Facility's Phone: <b>219-822-4545</b>						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
	1. <b>Non-Hazardous Contaminated Liquids</b>	<b>001</b>	<b>TT</b>	<b>5,000</b>	<b>G</b>	
	2.		<b>TT</b>		<b>G</b>	
	3.		<b>TT</b>		<b>G</b>	
	4.					
14. Special Handling Instructions and Additional Information <b>TICKET WOH 55906 TRANSPORTER# UPW0758189-IL ILID# 1970665323</b>						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offoror's Printed/Typed Name <b>Scott Teegarden</b>			Signature <i>[Signature]</i>		Month Day Year <b>05 19 11</b>	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name <b>Zach Peaty</b>			Signature <i>[Signature]</i>		Month Day Year <b>05 19 11</b>	
Transporter 2 Printed/Typed Name			Signature		Month Day Year	
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
18b. Alternate Facility (or Generator)			Manifest Reference Number: U.S. EPA ID Number			
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)					Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name <b>Vicente Garza</b>			Signature <i>[Signature]</i>		Month Day Year <b>05 19 11</b>	

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number <b>008132920 JJK</b>	
5. Generator's Name and Mailing Address <b>City of South Bend 100 Prairie Ave South Bend IN 46601</b>			Generator's Site Address (if different than mailing address)			
Generator's Phone: <b>(317) 220-7044</b>						
6. Transporter 1 Company Name <b>RS Used Oil Services, Inc.</b>			U.S. EPA ID Number		<b>ILR000103104</b>	
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>CLEAN WATERS INC 1409 GATLIN DRIVE GRIFFIN, IN 46345</b>			U.S. EPA ID Number		<b>123795</b>	
Facility's Phone: <b>317 822-4545</b>						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
1.	<b>Ign. Hazardous Organic Liquid</b>	<b>001</b>	<b>TT</b>	<b>5.00</b>	<b>G</b>	
2.			<b>TT</b>		<b>G</b>	
3.			<b>TT</b>		<b>G</b>	
4.			<b>TT</b>		<b>G</b>	
14. Special Handling Instructions and Additional Information <b>TICKET W# 55905 TRANSPORTER# UPW0765159-IL ILIC# 1970655029</b>						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name <b>William G. D... [Signature]</b>			Signature		Month Day Year <b>05 19 11</b>	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name <b>Zach Potry</b>			Signature <b>Zachary A. Potry</b>		Month Day Year <b>05 19 11</b>	
Transporter 2 Printed/Typed Name			Signature		Month Day Year	
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
18b. Alternate Facility (or Generator)			Manifest Reference Number:		U.S. EPA ID Number	
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)					Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a.						
Printed/Typed Name <b>Vicente Garcia</b>			Signature <b>[Signature]</b>		Month Day Year <b>05 19 11</b>	

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number	2. Page 1 of 1	3. Emergency Response Phone 708-534-9300	4. Manifest Tracking Number <b>008132921 JJK</b>						
5. Generator's Name and Mailing Address City of South Bend 1100 Prairie Ave. South Bend, Ind. 46601							Generator's Site Address (if different than mailing address)				
Generator's Phone: 613-220-7044											
6. Transporter 1 Company Name RS Used Oil Services, Inc.					U.S. EPA ID Number ILR000103184						
7. Transporter 2 Company Name							U.S. EPA ID Number				
8. Designated Facility Name and Site Address KLEAN WATERS INC 1407 GATLIN DRIVE GRIFFITH, IN 46319						U.S. EPA ID Number 418020013					
Facility's Phone: 219-822-4545											
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No.	Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
	1.	Non-Hazardous Contaminated Liquids			001	TT	5500	G.			
	2.					TT		G			
	3.					TT		G			
	4.										
14. Special Handling Instructions and Additional Information  TICKET WOV# 55903 TRANSPORTERS UPWATERS 188-IL IL ID# 1970556029											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offeror's Printed/Typed Name William O Fitz					Signature <i>William O Fitz</i>		Month Day Year 05 19 11				
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____										
	17. Transporter Acknowledgment of Receipt of Materials										
TRANSPORTER	Transporter 1 Printed/Typed Name Dave Leggett					Signature <i>Dave Leggett</i>		Month Day Year 05 19 11			
	Transporter 2 Printed/Typed Name					Signature		Month Day Year			
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
	18b. Alternate Facility (or Generator)					Manifest Reference Number:		U.S. EPA ID Number			
	Facility's Phone:										
18c. Signature of Alternate Facility (or Generator)							Month Day Year				
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1.			2.			3.			4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
Printed/Typed Name Vicente Garcia					Signature <i>Vicente Garcia</i>		Month Day Year 05 19 11				

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

Form Approved. OMB No. 2050-003

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number	2. Page 1 of	3. Emergency Response Phone 708-534-9300	4. Manifest Tracking Number <b>008132922 JJK</b>	
5. Generator's Name and Mailing Address City of South Bend 1100 Prairie Ave. South Bend Ind. 46102				Generator's Site Address (if different than mailing address)		
Generator's Phone: 613-230-7044						
6. Transporter 1 Company Name PSC Hand Oil Services, Inc.				U.S. EPA ID Number ILR000103187		
7. Transporter 2 Company Name				U.S. EPA ID Number		
8. Designated Facility Name and Site Address CLEAN WATERS INC 1400 GATLIN DRIVE GRIFFITH, IN 46319				U.S. EPA ID Number 51R000425		
Facility's Phone: 219-922-4545						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity
				No.	Type	12. Unit Wt./Vol.
	1. Non-Hazardous Contaminated Liquids			1	TI	5500
	2.				TI	6
	3.				TI	6
4.						
13. Waste Codes						
14. Special Handling Instructions and Additional Information TICKET WOV# 55904 TRANSPORTER# UPIA0760185-IL IL ID# 1970665029						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name <i>Robert Bergman</i>				Signature <i>Robert Bergman</i>		Month Day Year 05 19 11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name <i>Dave Leggett</i>				Signature <i>Dave Leggett</i>		Month Day Year 05 19 11
Transporter 2 Printed/Typed Name				Signature		Month Day Year
18. Discrepancy						
18a. Discrepancy indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
18b. Alternate Facility (or Generator)				Manifest Reference Number: U.S. EPA ID Number		
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)				Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name <i>Waste Service</i>				Signature <i>Waste Service</i>		Month Day Year 05 19 11

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

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number <b>008132917 JJK</b>	
5. Generator's Name and Mailing Address <b>City of South Bend 1100 Prairie Ave. South Bend, IN 46601</b>			Generator's Site Address (if different than mailing address)			
Generator's Phone: <b>(613) 230-7044</b>			6. Transporter 1 Company Name <b>PS Used Oil Services, Inc</b>		U.S. EPA ID Number <b>ILR000163184</b>	
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>CLEAN WATERS INC 1408 GATLIN DRIVE GRIFITH, IN 46319</b>			U.S. EPA ID Number <b>91R00004735</b>			
Facility's Phone: <b>219-822-4545</b>						
GENERATOR	9a. HM	9b. U.S. DOT Description (Including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol
			No.	Type		
	1.	Non-Hazardous Contaminated Liquids	001	TT	5,000	G.
	2.			TT		G.
	3.			TT		G.
4.						
14. Special Handling Instructions and Additional Information  <b>TICKET NO# 55969</b> <b>TRANSPORTER# UPV0758189-IL</b> <b>IL ID# 1970655029</b>						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name <b>Jeffrey C. Tengler</b>			Signature 		Month Day Year <b>05 23 11</b>	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____					
	17. Transporter Acknowledgment of Receipt of Materials					
TRANSPORTER	Transporter 1 Printed/Typed Name <b>Zach Petry</b>			Signature 		Month Day Year <b>05 23 11</b>
	Transporter 2 Printed/Typed Name			Signature		Month Day Year
DESIGNATED FACILITY	18. Discrepancy					
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
	18b. Alternate Facility (or Generator)			Manifest Reference Number: _____ U.S. EPA ID Number: _____		
	Facility's Phone: _____			18c. Signature of Alternate Facility (or Generator)		
19. Hazardous Waste Report Management Method Codes (i.e., codes for treatment, disposal, and recycling systems)						
1. _____		2. _____		3. _____		4. _____
20. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name <b>Vicente Garcia</b>			Signature 		Month Day Year <b>05 23 11</b>	



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

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number	2. Page 1 of 1	3. Emergency Response Phone	4. Manifest Tracking Number <b>008132918 JJK</b>	
5. Generator's Name and Mailing Address <b>City of South Bend 100 Prairie Ave. South Bend, IN 46601</b>			Generator's Site Address (if different than mailing address)			
Generator's Phone: <b>(617) 220-7044</b>			6. Transporter 1 Company Name <b>ES Hazard Oil Service Inc.</b>		U.S. EPA ID Number <b>ILR000103184</b>	
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address <b>KLEAN WATERS INC 1003 GATLIN DRIVE GRIFFITH, IN 46319</b>			U.S. EPA ID Number <b>51R00024275</b>			
Facility's Phone: <b>219 822-4545</b>						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
1.	<b>Non-Hazardous Containers and 1 mobile</b>	<b>001</b>	<b>TT</b>	<b>350</b>	<b>G</b>	
2.			<b>TT</b>		<b>G</b>	
3.			<b>TT</b>		<b>G</b>	
4.			<b>TT</b>		<b>G</b>	
14. Special Handling Instructions and Additional Information <b>TICKET NO# 53970 TRANSPORTER# UPW0768185-IL IL DME 1970855022</b>						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name <b>William Cleaver</b>			Signature <i>[Signature]</i>		Month Day Year <b>05 23 11</b>	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name <b>Zach Petry</b>			Signature <i>[Signature]</i>		Month Day Year <b>05 23 11</b>	
Transporter 2 Printed/Typed Name			Signature		Month Day Year	
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input checked="" type="checkbox"/> Full Rejection <b>1:40 PM</b>						
18b. Alternate Facility (or Generator)			Manifest Reference Number: _____ U.S. EPA ID Number _____			
Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator)					Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a						
Printed/Typed Name <b>Wendy Grace</b>			Signature <i>[Signature]</i>		Month Day Year <b>05 26 11</b>	

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

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number	2. Page 1 of 1	3. Emergency Response Phone 708-534-9300	4. Manifest Tracking Number 008132930 JJK	
5. Generator's Name and Mailing Address City of South Bend 100 Pacific Ave South Bend Ind. 46601				Generator's Site Address (if different than mailing address)		
Generator's Phone: 313-220-7044				U.S. EPA ID Number		
6. Transporter 1 Company Name EPC Used Oil Services Inc				U.S. EPA ID Number IL102197036079		
7. Transporter 2 Company Name				U.S. EPA ID Number		
8. Designated Facility Name and Site Address KLEAN WATERS INC 1408 GATLIN DRIVE GRIFFITH, IN 46319				U.S. EPA ID Number 912030425		
Facility's Phone: 219-522-4545						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
1.	Highly Hazardous Contaminated Liquids	001	TT	5500	G	
2.			TT		G	
3.			TT		G	
4.			TT		G	
14. Special Handling Instructions and Additional Information TICKET W0555967 TRANSPORTER# UPW0753189-IL IL ID# 197036079						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offeror's Printed/Typed Name Jeffrey Tenagordan				Signature <i>[Signature]</i>		Month Day Year 05 23 11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Dave Leggett				Signature <i>[Signature]</i>		Month Day Year 05 23 11
Transporter 2 Printed/Typed Name				Signature		Month Day Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1.		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 19a						
Printed/Typed Name Vicente Garcia				Signature <i>[Signature]</i>		Month Day Year 05 23 11

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

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<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number	2. Page 1 of 1	3. Emergency Response Phone 708-534-9300	4. Manifest Tracking Number 008132931 JJK	
5. Generator's Name and Mailing Address City of South Bend 1100 Prairie Ave South Bend Ind 46601 Generator's Site Address (if different than mailing address) Generator's Phone: 613-220-7044						
6. Transporter 1 Company Name RS Used Oil Services, Inc.				U.S. EPA ID Number ILR00103181		
7. Transporter 2 Company Name				U.S. EPA ID Number		
8. Designated Facility Name and Site Address KLEAN WATERS INC 1409 GATLIN DRIVE GRIFFITH, IN 46319 Facility's Phone: 317 822-4545				U.S. EPA ID Number 9180000435		
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity
				No.	Type	
		1. Non-Hazardous Containers/Liquids		001	TT	3900
		2.				6
		3.			TT	6
	4.			TT	6	
14. Special Handling Instructions and Additional Information TICKET W01 55968 TRANSPORTER'S UPIW0768168-IL IL ID# 1970856029						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offero's Printed/Typed Name Jett V. Tascaporta				Signature <i>[Signature]</i>		Month Day Year 05 23 11
TRANSPORTER INTL	16. International Shipments <input checked="" type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Transporter signature (for exports only): Date leaving U.S.:					
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Dave Leggett Signature <i>[Signature]</i> Month Day Year 05 23 11 Transporter 2 Printed/Typed Name Signature Month Day Year					
DESIGNATED FACILITY	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number:					
	18b. Alternate Facility (or Generator)				U.S. EPA ID Number	
	Facility's Phone:					
	18c. Signature of Alternate Facility (or Generator)					Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Vicente Garcia Signature <i>[Signature]</i> Month Day Year 05 26 11						