

APPENDIX E IDW MANIFEST

APPENDIX E-1 INITIAL INVESTIGATION

GENERATOR	FORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number NJD986596609	2. Page 1 of 1	3. Emergency Response Phone 1-877-597-0911	4. Manifest Tracking Number 008390015 JJK	
	Generator's Name and Mailing Address PG INDUSTRIES, INC. - SITE 016 325, Rosanna Drive Allentown Park, Pennsylvania 15101		Generator's Site Address (if different than mailing address) 45, Linden Ave East Jersey City, New Jersey 07306			
Generator's Phone: (412) 492-5512 ATTN: B.J. Kennedy						
6. Transporter 1 Company Name TRANSPORT ROLLEX LTD.		(480) 652-4282		U.S. EPA ID Number NYFD006000053		
7. Transporter 2 Company Name		U.S. EPA ID Number				
8. Designated Facility Name and Site Address STADLER CANADA INC. 760, boul. Industriel Bizardville, Quebec J7C 3V4		TR : 00015864		U.S. EPA ID Number NYD980756415		
Facility's Phone: (450) 970-1343						
TRANSPORTER INT'L	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) 1HQ Waste environmentally hazardous substances, solid, n.o.s. (Chrome) # UN3077 III	10. Containers No. 13	11. Total Quantity DM 5,000	12. Unit Wt./Vol. P	13. Waste Codes D007
	X	2. HQ Waste environmentally hazardous substances, liquid, n.o.s. (Chrome) # UN3082 III	DM 10	4,000	P	D007
	X	3.				
	X	4.				
	X					
14. Special Handling Instructions and Additional Information Gulfstream TLC Inc. acting as an intermediary arranging for export. 1) Chrome contaminated solid 2) Chrome contaminated water						
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 Christine Basinski on behalf of PPG		Signature <i>Christine Basinski on behalf of PPG</i>		Month 9	Day 20	Year 2011
16. International Shipments <input type="checkbox"/> Import to U.S.		<input checked="" type="checkbox"/> Export from U.S.		Port of entry/exit: _____		
Transporter signature (for exports only): <i>AB</i>						Date leaving U.S.: _____
17. Transporter Acknowledgment of Receipt of Materials <i>AB</i>						
Transporter 1 Printed/Typed Name Stephanie Ruthie		Signature <i>AB</i>		Month 9	Day 20	Year 2011
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity		<input type="checkbox"/> Type		<input type="checkbox"/> Residue		
<input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator)		U.S. EPA ID Number				
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator)						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
14 - 132		24 - 132		3. _____		
4. _____						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month	Day	Year



CONNAISSEMENT / BILL OF LADING

(450) 652-4282 NIR: R508875-3
1-888-976-5539POUR EXPÉDITIONS LOCALES
FOR LOCAL SHIPMENTS
SORTIE DU DÉPÔT
OUT OF TERMINALDÉPÔT
TERMINALN° DU CONNAISSEMENT
BILL OF LADING NO.RETOUR AU DÉPÔT
BACK TO TERMINALTRANSPORT ROLLEX
910 BOUL LIONEL-BOULET
VARENNES PQ J3X 1P7

2783416

CLIENT PAYEUR / PAYING CUSTOMER DE / FROM	LOCALITÉ / LOCALITY 760 BOUL INDUSTRIEL BLAINVILLE (TERREBONNE) PQ J7C 3V4	REFERENCE DE LA COMMANDE ORDER REFERENCE 127720	PORT PAYÉ PREPAID	PORT DÉ COLLECT	DATE DE COMMANDE ORDER DATE JR./DY. 13 AN./YR. 09 11
EXPÉDITEUR / CONSIGNOR STABLEX CANADA INC.	ADRESSE / ADDRESS 45 LINDEN AVE E JERSEY CITY NJ 07305	MOUVEMENT / MOVEMENT REMORQUE / TRAILER			
CHARGÉ CHEZ / LOADED AT (POINT D'ORIGINE / POINT OF ORIGIN)	ADRESSE / ADDRESS	EXPÉDITION REQUISE / SHIPPING REQUESTED			
		JR./DY.	MO.	AN./YR.	HRE - HRS
CONSIGNATAIRE / CONSIGNEE (DESTINATION) STABLEX CANADA INC.	ADRESSE / ADDRESS 760 BOUL INDUSTRIEL BLAINVILLE (TERREBONNE) PQ J7C 3V4	LIVRAISON REQUISE / DELIVERY REQUESTED			
		JR./DY.	MO.	AN./YR.	HRE - HRS
COMP.	PRODUIT / PRODUCT <i>see Manifest</i> US = 0083900157JK	CLASSIFICATION	N° IDENT. NO.	GE. / PG.	R.Q.
					QTÉ COMM. / QTY ORD.
					UNITE UNIT
					QTÉ CHARGÉE / QTY. LOADE
PLAQUES / PLACARDS			R.P.U. / E.R.P.	N° TÉLÉPHONE / PHONE NO.	
PESAGE WEIGHING	BRUT / GROSS	TARE	NET	UNITÉ / UNIT KG LBS	D C O U S S A T N O E M S S
VALEUR DÉCLARÉE	ARRIVÉE - IN : DÉPART - OUT :				
DECLARED VALUATION	RESPONSABILITÉ MAXIMUM DE 4.41\$ LE KG À MOINS D'INDICATION CONTRAIRE PAR LA VALEUR DECLARÉE (CONDITIONS 9 ET 10 AU VERSO) MAXIMUM LIABILITY OF \$4.41 PER KG UNLESS DECLARED VALUATION STATES OTHERWISE (CONDITIONS 9 AND 10 ON BACK)				

SHIPPER IN :

CONSIGNEE IN :

SHIPPER OUT :

CONSIGNEE OUT :

CONTENEUR :

SPECIAL COMMENTS: *Re manifest*

BOOKING #:

Col Fstheau Plattsburg NY

VESSEL #:

REMANIFESTE ADRESSE IN :

OUT :

C H A R G E M E N T	ARRIVÉE À LA BALANCE ARRIVAL AT SCALE	<i>900</i>	DÉPART DE LA BALANCE LEAVE SCALE		EXPLICATION REQUISE SUR LE TRAVAIL EXCEDANT 1 HEURE		BALANCE PUBLIQUE / PUBLIC SCALE
	ARRIVÉE AU CHARGEMENT ARRIVAL AT LOADING	<i>900</i>					ENDROIT LOCATION
	DÉBUT DU CHARGEMENT START LOADING	<i>0900</i>					COÛT \$ COST
	FIN DU CHARGEMENT FINISH LOADING	<i>102500</i>					POMPE/ PUMP COMPRESSEUR/ COMPRESSOR BOYAUX / HOSES ►
	ARRIVÉE À LA BALANCE ARRIVAL AT SCALE		DÉPART DE LA BALANCE LEAVE SCALE				CITERNE LAISSE EN PLACE / TANK SPOTTED
	TOTAL						DATE DE / FROM A / TO DATE

REQU AU POINT D'ORIGINE À LA DATE SPÉCIFIÉE ET DE L'EXPÉDITEUR MENTIONNÉ AUX PRÉSENTES LES MARCHANDISES CI-DESSUS DÉCRITES EN BON ETAT APPARENT (LE CONTENU DES COLIS ET SA CONDITION ÉTANT INCONNUS) MARQUÉES, CONTRÉSIGNÉES ET DESTINÉES TEL QUE CI-DESSUS MENTIONNÉ, QUE LE TRANSPORTEUR CONSENTE À TRANSPORTER ET À LIVRER À LEUR CONSIGNATAIRE AU POINT DE DESTINATION SI CE POINT SE TROUVE SUR LA ROUTE QUI EST AUTORISÉ À DESSERVIR, SINON À FAIRE TRANSPORTER ET À LIVRER PAR AUTRE TRANSPORTEUR AUTORISÉ À CE FAIRE ET CE, AUX TAUX ET À SA CLASSIFICATION EN VIGUEUR À LA DATE DE L'EXPÉDITION.

IL EST MUTUELLEMENT CONVENU QUE CHAQUE TRANSPORTEUR TRANSPORTANT LESDITES MARCHANDISES EN TOUT OU EN PARTIE, SUR LE PARCOURS ENTIER OU UNE PORTION QUELCONQUE DE CELUI-CI JUSQU'A DESTINATION ET QUE TOUT INTÉRÊT À LADITE EXPÉDITION POUR TOUT SERVICE À EFFECTUER EN VERTU DES PRÉSENTES EST SUJET À TOUTES LES CONDITIONS IMPRIMÉES OU DÉCRITES NON PROHIBÉES PAR LA LOI INCLUANT LES CONDITIONS CONTENUES AU VERSO DES PRÉSENTES QUI SONT ACCEPTÉES PAR L'EXPÉDITEUR POUR LUI-MÊME ET SES AVANTS DROITS.

RÉFÉRENCE EXPÉDITION
SHIPPING REFERENCE

SIGNATURE DE L'EXPÉDITEUR / CONSIGNOR'S SIGNATURE
X C Basilean behalf of PPS

RECEIVED AT THE POINT OF ORIGIN ON THE DATE SPECIFIED, FROM THE CONSIGNOR MENTIONED HEREIN, THE PROPERTY HEREIN DESCRIBED, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITION OF CONTENTS OF PACKAGE UNKNOWN), MARKED, CONSIGNÉ AND DESTINED, AS INDICATED ABOVE WHICH THE CARRIER AGREES TO CARRY AND TO DELIVER TO THE CONSIGNEE AT THE SAID DESTINATION, IF ON ITS OWN AUTHORIZED ROUTE OR OTHERWISE TO CAUSE TO BE CARRIED BY ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION, SUBJECT TO THE RATES AND CLASSIFICATION EFFECT ON THE DATE OF SHIPMENT.

IT IS MUTUALLY AGREED, AS TO EACH CARRIER OF ALL OR ANY OF THE GOODS OVER ALL OR ANY PORTION OF THE ROUTE TO DESTINATION, AND AS TO EACH PARTY AT ANY TIME INTERESTED IN ALL OR ANY OF THE GOODS, THAT EVERY SERVICE TO BE PERFORMED, HEREIN SHALL BE SUBJECT TO ALL CONDITIONS NOT PROHIBITED BY LAW, WHETHER PRINTED OR WRITTEN, INCLUDING CONDITIONS ON BACK HEREOF, WHICH ARE HEREBY AGREED BY THE CONSIGNOR AND ACCEPTED FOR HIMSELF AND ASSIGNS.

J'AUTORISE LE DÉCHARGEMENT
I AUTHORIZE UNLOADING

D É U CH A L	TOUS LES DOCUMENTS ONT ÉTÉ EXAMINÉS. LA CONNECTION DE LA SORTIE DE LA CITERNE AU RÉSERVOIR D'ENTREPÔSAGE A ÉTÉ VÉRIFIÉE. LE RÉSERVOIR D'ENTREPÔSAGE EST EN BON ÉTAT ET OFFRE SUFFISAMMENT D'ESPACE POUR RECEVOIR LA QUANTITÉ COMMANDEE.	ALL DOCUMENTS HAVE BEEN EXAMINED. THE CONNECTION FROM THE TANKER OUTLET TO THE PROPER STORAGE FACILITY HAS BEEN VERIFIED. THIS FACILITY IS IN GOOD CONDITION AND PROVIDES ENOUGH SPACE TO RECEIVE ORDERED QUANTITY.	BALANCE PUBLIQUE / PUBLIC SCALE
	ARRIVÉE À LA BALANCE ARRIVAL AT SCALE	DÉPART DE LA BALANCE LEAVE SCALE	ENDROIT LOCATION
	ARRIVÉE AU DÉCHARGEMENT ARRIVAL AT UNLOADING		COÛT \$ COST

APPENDIX E-2 DELINEATION INVESTIGATION

MOVEMENT DOCUMENT / MANIFEST

DOCUMENT DE MOUVEMENT / MANIFESTE

This Movement document/manifest conforms to all federal and provincial transport and environmental legislation.
Ce document de mouvement/manifeste est conforme aux législations fédérale et provinciale sur l'environnement et le transport.

GB0164

9469925-3

Transaction: 00017513

Order: 139793

Movement Document / Manifest Reference No.
N° de référence du document de mouvement/manifeste

A Generator / consignor Producteur / expéditeur		Registration No. / Provincial ID No. N° d'immatriculation - d'id. provincial NYR000150530	B Carrier Transporteur	Registration No. / Provincial ID No. N° d'immatriculation - d'id. provincial 1145267438	23	Reference Nos. of other movement document(s)/manifest(s) used / N° de référence des autres documents de mouvement/manifestes utilisés 010731685K									
Company name / Nom de l'entreprise GULFSTREAM TLC INC.		Company name / Nom de l'entreprise TRANSPORT ROLLEX LTÉE													
Mailing address / Adresse postale City / Ville Province Postal code / Code postal 1080, Military Turnpike Unit # 4ft P) Pittsburgh, NY 12801		Mailing address / Adresse postale City / Ville Province Postal code / Code postal 910, boul. Lionel-Boulet Varennes, Québec J5X 1P7													
E-mail / Courrier électronique (517)299-0076		E-mail / Courrier électronique RECEIVED													
Shipping site address / Adresse du lieu de l'expédition 1080, Military Turnpike Unit # 4ft		Vehicle / Véhicule Trailer - Rail car No. 1 1 ^{re} remorque - wagon	Registration No. / N° d'immatriculation RP13489	Prov. / Prov. QL	24	Receiver / consignee Réceptionnaire / destinataire	Registration No. / Provincial ID No. N° d'immatriculation - d'id. provincial								
City / Ville Province Postal code / Code postal Pittsburgh New York 12801		Trailer - Rail car No. 2 2 ^{me} remorque - wagon			25	Receiver / consignee information same as in Part A Les renseignements du réceptionnaire / destinataire est la même qu'à la Partie A <input checked="" type="checkbox"/> Yes / Oui <input type="checkbox"/> No, complete the box below / Non, remplir la case ci-dessous									
Intended Receiver / consignee Réceptionnaire / destinataire prévu STABLEX CANADA INC.		Point of entry Point d'entrée	International use only SE-Bernard-de-Lacolle, QC	Port of exit Point de sortie	International use only	Company name / Nom de l'entreprise									
Mailing address / Adresse postale City / Ville Province Postal code / Code postal 780, boul. Industriel Blainville, Québec J7C 3V4		Carrier Certification : I certify that I have received waste or recyclable material from the generator / consignor for delivery to the receiver / consignee as set out in Part A and that the information contained in Part B is complete and correct. Attestation du transporteur : J'atteste avoir reçu les déchets ou matières recyclables du producteur / expéditeur en vue de leur livraison au réceptionnaire / destinataire, tels qu'ils figurent à la partie A et que les renseignements inscrits à la partie B sont exacts et complets.				Date received / Date de réception Year / Année Month / Mois Day / Jour 13 02 13	Time / Heure 29 12:54 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.								
E-mail / Courrier électronique E-mail: kaward@stablex.com		Name of authorized person (print) Nom de l'agent autorisé (caractère d'imprimé) DENIS SAVARD				Tel. No. / N° de tél. (450) 430-9230	Receiving site address / Adresse du lieu de destination								
Receiving site address / Adresse du lieu de l'expédition 780, boul. Industriel		Year / Année 13	Month / Mois 02	Day / Jour 11	Signature Denis Savard	3d Registration No./Provincial ID No. N° d'immatriculation/d'id provincial 916 16 09 X									
Prov. code Code prov.	3	Shipping name Appellation réglementaire	4 Class / Classe ⁵ Sub. class(es) Classe(s). sub.	6 Packing / risk gr. ⁷ Gr. d'emballage/ de risque	7 Quantity shipped Quantité expédiée	8 Units L or / ou Kg Unités	9 Packaging/Contenant Codes int-ext. Phys. state État phys.	10 Quantity received Quantité reçue	Units ¹¹ L or / ou Kg Unités	Comments Commentaires	32 Handling Code / Code de manutention	33 Shipment / Envoi Accepted / Accepté	34 Decont. ³⁵ Refused / Refusé	Veh. ³⁶ Cont. / Pack.	
(i) N/A		ENVIRONMENTALLY HAZARDOUS WASTE (chromium, arsenic, lithium)	N/A	N/A	1088	Kg	4	01	S41	916 16	09 X				
(ii) N/A		ENVIRONMENTALLY HAZARDOUS WASTE (chromium, arsenic, lithium)	N/A	N/A											
(iii) N/A		ENVIRONMENTALLY HAZARDOUS WASTE (chromium, arsenic, lithium)	N/A	N/A											
(iv) N/A		ENVIRONMENTALLY HAZARDOUS WASTE (chromium, arsenic, lithium)	N/A	N/A											
Notice No. N° de notification	11 Notice Line No. N° de ligne de la notification	12 Shipment Envoi	13 Of / De Code É ou R	14 C code Code C	15 Basel Annex VIII or OECD Code Annexe VIII de Bâle ou Code OCDE	16 H code Code H	17 Y code Code Y	18 National code in country of / Code du pays	19 Customs code(s) Code(s) de douanes	36 If handling code "Other" (specify) Si code de manutention « autre » (spécifier) CELLS					
(i) 528850	2	136	96000	D9	3	A1040	13	21	N/A	L10	2620.910000	RECEIVER / CONSIGNEE CERTIFICATION : I certify that the information contained in Part C is correct and complete. Attestation du réceptionnaire / destinataire : J'atteste que tous les renseignements à la partie C sont exacts et complets.	MARCEL DORALS		
(ii) N/A		136	96000	D9	3	A1040	13	21	N/A	L10	2620.910000				
(iii) N/A		136	96000	D9	3	A1040	13	21	N/A	L10	2620.910000				
(iv) N/A		136	96000	D9	3	A1040	13	21	N/A	L10	2620.910000				
General / consignor certification: I certify that the information contained in Part A is correct and complete. Attestation du producteur / expéditeur: J'atteste que tous les renseignements à la partie A sont exacts et complets.												Name of authorized person (print) Nom de l'agent autorisé (caractère d'imprimé) Mr. John Brubaker, Pres.	Signature John Brubaker, Pres.	Tel. No. / N° de tél. ()	20
Special handling / Manutention spéciale <input type="checkbox"/> Attached / Cjoint: <input checked="" type="checkbox"/> As follows / C-contre : 1-877-597-0911												22			
21 Date shipped / Date d'expédition Year / Année Month / Mois Day / Jour	22 Time / Heure A.M. <input type="checkbox"/> P.M. <input checked="" type="checkbox"/>	23 Scheduled arrival date / Date d'arrivée prévue Year / Année Month / Mois Day / Jour													

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NJD986596609	2. Page 1 of 1	3. Emergency Response Phone 1-877-597-0911	4. Manifest Tracking Number 010731668 JJK			
5. Generator's Name and Mailing Address PPG INDUSTRIES, INC. - SITE 016 4325, Rosanna Drive Allison Park, Pennsylvania 15101 Generator's Phone: (412) 492-5512		Generator's Site Address (if different than mailing address) 45, Linden Ave East (SITE 016) Jersey City, New Jersey 07305						
6. Transporter 1 Company Name TRANSPORT ROLLEX LTÉE		(450) 662-4282		U.S. EPA ID Number NYF006000053				
7. Transporter 2 Company Name		U.S. EPA ID Number						
8. Designated Facility Name and Site Address STABLEX CANADA INC. 760, boul. Industriel Blainville, Québec J7C 3V4 Facility's Phone: (450) 970-1343		TR : 00017513 U.S. EPA ID Number NYD980756415						
9a. HM		9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) X 1. RQ, UN3077, Waste environmentally hazardous substances, solid, n.o.s. (chromium, arsenic, thallium) 8 III		10. Containers No. 004	11. Total Quantity DM 2400	12. Unit Wt./Vol. P	13. Waste Codes D007	
		X 2. RQ, UN3082, Waste environmentally hazardous substances, liquid, n.o.s. (chromium, arsenic, thallium) 8 III (A)			-DM (A)		D007 (A)	
		3.						
		4.						
14. Special Handling Instructions and Additional Information GULFSTREAM TLC INC acting as an intermediary arranging for export.								
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.								
Generators/Offeror's Printed/Typed Name <i>On behalf of PPG Adam Thomas</i>		Signature <i>[Signature]</i>		Month 12	Day 11	Year 2013		
16. International Shipments Transporter signature (for exports only): <i>[Signature]</i>		Import to U.S. <input type="checkbox"/>	Export from U.S. <input checked="" type="checkbox"/>	Port of entry/exit: Champlain, NY	Date leaving U.S.: 2-11-13	Month 2	Day 11	Year 2013
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name <i>DENIS SAUARD</i>		Signature <i>[Signature]</i>		Month 12	Day 11	Year 2013		
Transporter 2 Printed/Typed Name		Signature		Month 12	Day 11	Year 2013		
18. Discrepancy								
18a. Discrepancy Indication Space		<input type="checkbox"/> Quantity	<input type="checkbox"/> Type	<input type="checkbox"/> Residue	<input type="checkbox"/> Partial Rejection	<input type="checkbox"/> Full Rejection		
Manifest Reference Number:								
18b. Alternate Facility (or Generator)		U.S. EPA ID Number						
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
H - 132		H - 132		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>MARCEL DORVAL</i>		Signature <i>[Signature]</i>		Month 10	Day 21	Year 2013		