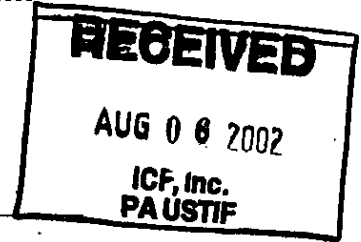


COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

COPY

UNDERGROUND STORAGE TANK SYSTEM
CLOSURE REPORT FORM



03 - 07315
Facility I.D.

Kittanning Borough Armstrong
Municipality County

07/09/02
Date Prepared

Kevin D. Dyson
Name of Person Submitting Report
(Please Print)

Insite Group, Inc.
Company Name
(If Applicable)

Project Manager
Title

Closure Method (Check all that apply):

- ☒ Removal
☐ Closure-In-Place
☐ Change-In-Service

Site Assessment Results (Check all that apply):

- ☐ No Obvious Contamination - Sample Results Meet Standards/Levels
☐ No Obvious Contamination - Sample Results Do Not Meet Standards/Levels
☐ Obvious, Localized Contamination - Sample Results Meet Standards/Levels
☐ Obvious, Localized Contamination - Sample Results Do Not Meet Standards/Levels
☒ Obvious, Extensive Contamination

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

DATE RECEIVED: _____

UNDERGROUND STORAGE TANK SYSTEM CLOSURE REPORT FORM

Owners who are permanently closing underground storage tanks may use this form to demonstrate that an underground storage tank closure was performed in accordance with the "Closure Requirements for Underground Storage Tank Systems" document. PLEASE PRINT OR TYPE. COMPLETE ALL QUESTIONS.

SECTION I. Owner/Facility/Tank/Waste Management and Disposal Information

1. Facility ID Number 03 - 07315
2. Facility Name Honey Bear Mini Mart
3. Facility County Armstrong
4. Facility Municipality Kittanning
5. Facility Address 200 McKean Street & Arch Street, Kittanning, PA 16201
6. Facility Contact Person Mr. Edward T. Franks
7. Facility Telephone Number (724) 628 - 9580
8. Owner Name OCI, Inc. d/b/a Graft Oil Company
9. Owner Mailing Address P.O. Box 899, 2561 Memorial Blvd., Connellsville, PA 15425
10. Description of Underground Storage Tanks (Complete for each tank closed)

DATE OF TANK CLOSURE (Month/Day/Year)		6- 20 -2002	6- 19 -2002	6- 19 -2002	6- 20 -2002
Tank Registration Number		1	2	3	4
Estimated Total Capacity (Gallons)		4,000	4,000	4,000	4,000
Substance(s) Stored Throughout Operating Life of Tank (Check All That Apply)	a. Petroleum				
	Unleaded Gasoline	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	Leaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Aviation Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Kerosene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Jet Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Diesel Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	New Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Used Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other, Please Specify	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NOTE: If Hazardous Substance Block is Checked, Attach Material Safety Data Sheets (MSDS)	b. Hazardous Substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Name of Principal CERCLA Substance <u>AND</u> Chemical Abstract Service (CAS) No.				
	c. Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Closure Method (Check Only One)	a. Removal	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	b. Closure-in-Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Change-In-Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partial System Closure (Yes or No)		No	No	No	No

DATE OF TANK CLOSURE (Month/Day/Year)		- -	- -	- -	- -
Tank Registration Number					
Estimated Total Capacity (Gallons)					
Substance(s) Stored Throughout Operating Life of Tank (Check All That Apply)	a. Petroleum				
	Unleaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Leaded Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Aviation Gasoline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Kerosene	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Jet Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Diesel Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Fuel Oil No. 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	New Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Used Motor Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other, Please Specify				
NOTE: If Hazardous Substance Block is Checked, Attach Material Safety Data Sheets (MSDS)	b. Hazardous Substance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Name of Principal CERCLA Substance				
	AND Chemical Abstract Service (CAS) No.				
	c. Unknown	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Closure Method (Check Only One)	a. Removal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Closure-in-Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Change-In-Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partial System Closure (Yes or No)					

Yes N/A

11. Briefly describe the storage tank facility and the nature of the operations which were conducted at the facility (both historical and present) including use of tanks: _____

Tanks stored gasoline at convenience store.

- ☒ 12. A site location and sampling map of the site, drawn to scale, is attached. See page 11 of 11.
- ☒ 13. Original, color photographs of the closure process are attached (i.e., inside of excavation/piping runs, pit water, tanks showing condition).
- ☒ 14. An amended "Registration of Storage Tanks" form was submitted to the DEP, Bureau of Watershed Conservation, Division of Storage Tanks, P.O. Box 8762, Harrisburg, PA 17105-8762.

Date: 7-17-2002

- ☒ ☐ 15. If a reportable release was confirmed, the appropriate regional office of DEP was notified by the owner or operator.

Date: 4 - 19 - 2002

Office: Southwest Region

Yes N/A

- ☒ ☐ 16. If tanks were cleaned on-site:
- a. Briefly describe the disposition of usable product: None
- b. Briefly describe the disposal of unusable product, sludges, sediments, and wastewater generated during cleaning. Provide the name and permit number of the processing, treatment, storage or disposal facility. (Attach documentation of proper disposal):
Tanks were pumped dry and product was put into open-top drums and left on site for owners disposal
(See Attachment A: Product Disposal Record)
- c. If tank contents were determined/deemed to be hazardous waste, provide:
- (1) Generator ID Number: PADEP 0009742
- (2) Licensed Hazardous Waste Transporter Name and ID Number: McCutcheon Enterprises, Inc. #PAD 013826347
- ☐ ☒ 17. If tanks were removed from the site for cleaning:
- a. Provide the name and permit number of the processing, treatment, storage or disposal facility performing the tank cleaning: _____
- b. If tank contents were determined/deemed to be hazardous waste, provide:
- (1) Generator ID Number: _____
- (2) Licensed Hazardous Waste Transporter Name and ID Number: _____
18. Briefly describe the disposition of tanks/piping (Attach documentation of proper disposal):
Disposed off-site (See Attachment B: Tank Disposal Records)
- ☒ ☐ 19. If contaminated soil is excavated:
- a. Briefly describe the disposition and amount 473 (tons) of contaminated soil. Provide the name and permit number of the processing, treatment, storage or disposal facility. (Attach documentation of proper disposal):
SRI, Division of Gennaro Pavers, Inc.; Ohio State ID # 025 0050885P902 Disposed of through Thermal Incineration. (See Attachment C: Soil Disposal Records)
- b. If contaminated soil is determined/deemed to be hazardous waste, provide:
- (1) Generator ID Number: N/A
- (2) Licensed Hazardous Waste Transporter Name and ID Number: N/A

Yes **N/A**

☐ ☒ 20. Briefly describe the disposition of and amount 0 (tons) of uncontaminated soil (attach analyses):

I, _____, hereby certify, under penalty of law as provided in 18 Pa. C.S. §4904
(Print Name)
(relating to unsworn falsification to authorities) that I am the owner of the above referenced storage tank(s) and that the
information provided by me in this closure report (Section I) is true, accurate and complete to the best of my knowledge
and belief.

Signature of Tank Owner

Date

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENTUNDERGROUND STORAGE TANK SYSTEM
CLOSURE REPORT FORM

SECTION II. Tank Handling Information

Facility ID Number 03 - 07315


Yes N/A

1. Briefly describe the excavation and initial on-site staging of uncontaminated/contaminated soil:
Excavated 30' x 30' x 10' , approx. 2' beneath tank. Soil immediately loaded and hauled off site.
2. Briefly describe the method of piping system closure and the closure of the piping systems including the quantity and condition of the piping:
All fiberglass piping drained and removed from tanks and dispenser island. Approximately 100-feet of piping removed. Grossly contaminated soils observed beneath the piping under the dispenser island
3. Briefly describe the condition of the tanks and any problems encountered during tank removal:
Tanks in good condition, no problems encountered
4. Briefly describe the method used to purge the tanks of and monitor for explosive vapors:
- ☒ ☐ 5. If tanks were cleaned on-site:
a. Briefly describe the tank cleaning process: vapor freed and air dried with air horn
b. If subcontracted, name and address of company that performed the tank cleaning:
- ☐ ☒ 6. If tanks were closed-in-place, briefly describe the tank fill material:
- ☒ ☐ 7. If contamination was suspected or observed, the "Notification of Contamination" form was submitted.

SECTION II. (continued)

I, George E. Shockey, hereby certify, under penalty of law as provided in 18 Pa. C.S. §4904
(Print Name)

(relating to unsworn falsification to authorities) that I am the certified installer who performed the tank handling activities associated with the closure of the above referenced storage tank(s) and that the information provided by me in this closure report (Section I) is true, accurate and complete to the best of my knowledge and belief.



Signature of Certified Installer

7/22/02

Date

348

Installer Certification Number

685

Company Certification Number

Shockey Excavating, Inc.

Company Name

250 South Duffy Road

Street

Butler, PA 16001

City/Town, State, Zip

724 - 282 - 3669

Phone

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

UNDERGROUND STORAGE TANK CLOSURE REPORT FORM

SECTION III. Site Assessment Information

Tank Registration # 001 (complete one sheet for EACH tank system and attach ALL laboratory sheets pertaining to that system)

Facility ID Number 03 - 07315

- A. Provide depth of *BEDROCK* and *WATER* IF encountered during excavation or soil boring (write "N/A: if NOT encountered).

Bedrock N/A feet below land surface

Water N/A feet below land surface

- B. Provide Length of *PIPING* IF piping was closed-in-place (write "N/A" if NOT closed-in-place).

Length of piping N/A feet

C. **TANK SYSTEM REMOVED FROM THE GROUND**

- 1). Was obvious contamination observed while excavating?

☐ NO -----> Conduct confirmatory sampling -----> See end of this section for options on submission and maintenance of closure records -----> Do not complete item C.2. below.

☒ YES-----> Report release to DEP within 2 hours -----> Describe contamination observed and likely source(s) tank, piping, dispenser, spills, overfills):

Grossly contaminated soils observed beneath the piping under the dispenser island. Contamination on east and west half of 30' x 30' excavation appeared to emanate from the dispenser island.

-----> Complete item C.2. below.

- 2). Was contamination localized (within three feet of the tank system in every direction with no obvious water contamination)?

☐ YES -----> Remove or remediate contaminated soil -----> Conduct confirmatory sampling-----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

☒ NO-----> Continue interim remedial actions -----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

D. **TANK SYSTEM CLOSED-IN-PLACE OR CHANGED-IN-SERVICE**

Was obvious contamination observed during sampling, boring or assessing water depths?

☐ NO -----> Conduct confirmatory sampling -----> See end of this section for options on submission and maintenance of closure records.

☐ YES-----> Report release to DEP within 2 hours -----> Describe contamination observed and likely source(s) tank, piping, dispenser, spills, overfills):

-----> Continue with corrective action -----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

- E. If the answer to C.1. is "no", the answer to C.2. if "yes" or the answer to D. is "no", confirmatory samples are required. Use the sample/analysis information sheet on page 10 of 11 to provide the information on confirmatory sampling and complete the diagram on Page 11 of 11.

Options for Submission and Maintenance of Closure Site Assessment Records

Records of the site assessment must be maintained for at least three years after completion of permanent closure or change-in-service in one of the following ways:

- (a) By the owners and operators who took the UST system out of service;
- (b) By the current owners and operators of the UST system site; or
- (c) By mailing these records to the implementing agency if they cannot be maintained at the closed facility.

At least one option must be chosen. If option (c) is chosen, the closure report form should be sent to the DEP regional office responsible for the county in which the tank is located.

Where the results of the site assessment indicate that obvious, localized soil contamination was encountered and the analytical results of the confirmatory sampling show levels below the statewide standard/action levels, this closure report form (Sections I, II, and III) or some other acceptable site characterization report must be received by the Department within 180 days of verbally reporting the release.

Where the results of the site assessment indicate that no obvious contamination or obvious, localized contamination was encountered, but the analytical results of the confirmatory sampling show levels above the statewide standard/action levels, or where there is obvious, extensive contamination, Section 245.310(a)(8) of the CAP regulation requires that details of removal from service be included in the site characterization report. A copy of the completed closure report form should be submitted as part of the site characterization report to satisfy the requirements of Section 245.310(a)(8) of the CAP regulations.

I, Kevin D. Dyson, hereby certify, under penalty of law as provided in 18 Pa. C.S. §4904 (relating
(Print Name)
to unsworn falsification to authorities) that I am the person who performed the site assessment activities associated with the closure of the above referenced storage tank(s) and that the information provided by me in this closure report (Section III) is true, accurate and complete to the best of my knowledge and belief.

Kevin D. Dyson
Signature of Person Performing Site Assessment

07 / 09 / 2002
Date

Project Manager
Title of Person Performing Site Assessment

Insite Group, Inc.
Name of Company Performing Site Assessment

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

UNDERGROUND STORAGE TANK CLOSURE REPORT FORM

SECTION III. Site Assessment Information

Tank Registration # 002 (complete one sheet for EACH tank system and attach ALL laboratory sheets pertaining to that system)

Facility ID Number 03 - 07315

- A. Provide depth of *BEDROCK* and *WATER* IF encountered during excavation or soil boring (write "N/A: if NOT encountered).

Bedrock N/A feet below land surface

Water N/A feet below land surface

- B. Provide Length of *PIPING* IF piping was closed-in-place (write "N/A" if NOT closed-in-place).

Length of piping N/A feet

C. TANK SYSTEM REMOVED FROM THE GROUND

- 1). Was obvious contamination observed while excavating?

☐ NO -----> Conduct confirmatory sampling -----> See end of this section for options on submission and maintenance of closure records -----> Do not complete item C.2. below.

☒ YES-----> Report release to DEP within 2 hours -----> Describe contamination observed and likely source(s) tank, piping, dispenser, spills, overfills):

Grossly contaminated soils observed beneath the piping under the dispenser island. Contamination on east and west half of 30' x 30' excavation appeared to emanate from the dispenser island.

-----> Complete item C.2. below.

- 2). Was contamination localized (within three feet of the tank system in every direction with no obvious water contamination)?

☐ YES -----> Remove or remediate contaminated soil -----> Conduct confirmatory sampling-----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

☒ NO-----> Continue interim remedial actions -----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

D. TANK SYSTEM CLOSED-IN-PLACE OR CHANGED-IN-SERVICE

Was obvious contamination observed during sampling, boring or assessing water depths?

☐ NO -----> Conduct confirmatory sampling -----> See end of this section for options on submission and maintenance of closure records.

☐ YES-----> Report release to DEP within 2 hours -----> Describe contamination observed and likely source(s) tank, piping, dispenser, spills, overfills):

-----> Continue with corrective action -----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

- E. If the answer to C.1. is "no", the answer to C.2. if "yes" or the answer to D. is "no", confirmatory samples are required. Use the sample/analysis information sheet on page 10 of 11 to provide the information on confirmatory sampling and complete the diagram on Page 11 of 11.

Options for Submission and Maintenance of Closure Site Assessment Records

Records of the site assessment must be maintained for at least three years after completion of permanent closure or change-in-service in one of the following ways:

- (a) By the owners and operators who took the UST system out of service;
- (b) By the current owners and operators of the UST system site; or
- (c) By mailing these records to the implementing agency if they cannot be maintained at the closed facility.

At least one option must be chosen. If option (c) is chosen, the closure report form should be sent to the DEP regional office responsible for the county in which the tank is located.

Where the results of the site assessment indicate that obvious, localized soil contamination was encountered and the analytical results of the confirmatory sampling show levels below the statewide standard/action levels, this closure report form (Sections I, II, and III) or some other acceptable site characterization report must be received by the Department within 180 days of verbally reporting the release.

Where the results of the site assessment indicate that no obvious contamination or obvious, localized contamination was encountered, but the analytical results of the confirmatory sampling show levels above the statewide standard/action levels, or where there is obvious, extensive contamination, Section 245.310(a)(8) of the CAP regulation requires that details of removal from service be included in the site characterization report. A copy of the completed closure report form should be submitted as part of the site characterization report to satisfy the requirements of Section 245.310(a)(8) of the CAP regulations.

I, Kevin D. Dyson, hereby certify, under penalty of law as provided in 18 Pa. C.S. §4904 (relating to unsworn falsification to authorities) that I am the person who performed the site assessment activities associated with the closure of the above referenced storage tank(s) and that the information provided by me in this closure report (Section III) is true, accurate and complete to the best of my knowledge and belief.

Kevin D. Dyson
Signature of Person Performing Site Assessment

07 / 09 / 2002
Date

Project Manager
Title of Person Performing Site Assessment

Insite Group, Inc.
Name of Company Performing Site Assessment

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

UNDERGROUND STORAGE TANK CLOSURE REPORT FORM

SECTION III. Site Assessment Information

Tank Registration # 003 (complete one sheet for EACH tank system and attach ALL laboratory sheets pertaining to that system)

Facility ID Number 03 - 07315

- A. Provide depth of *BEDROCK* and *WATER* IF encountered during excavation or soil boring (write "N/A" if NOT encountered).

Bedrock N/A feet below land surface

Water N/A feet below land surface

- B. Provide Length of *PIPING* IF piping was closed-in-place (write "N/A" if NOT closed-in-place).

Length of piping N/A feet

C. TANK SYSTEM REMOVED FROM THE GROUND

- 1). Was obvious contamination observed while excavating?

☐ NO -----> Conduct confirmatory sampling -----> See end of this section for options on submission and maintenance of closure records -----> Do not complete item C.2. below.

☒ YES-----> Report release to DEP within 2 hours -----> Describe contamination observed and likely source(s) tank, piping, dispenser, spills, overfills):

Grossly contaminated soils observed beneath the piping under the dispenser island. Contamination on east and west half of 30' x 30' excavation appeared to emanate from the dispenser island.

-----> Complete item C.2. below.

- 2). Was contamination localized (within three feet of the tank system in every direction with no obvious water contamination)?

☐ YES -----> Remove or remediate contaminated soil -----> Conduct confirmatory sampling-----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

☒ NO-----> Continue interim remedial actions -----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

D. TANK SYSTEM CLOSED-IN-PLACE OR CHANGED-IN-SERVICE

Was obvious contamination observed during sampling, boring or assessing water depths?

☐ NO -----> Conduct confirmatory sampling -----> See end of this section for options on submission and maintenance of closure records.

☐ YES-----> Report release to DEP within 2 hours -----> Describe contamination observed and likely source(s) tank, piping, dispenser, spills, overfills):

-----> Continue with corrective action -----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

- E. If the answer to C.1. is "no", the answer to C.2. is "yes" or the answer to D. is "no", confirmatory samples are required. Use the sample/analysis information sheet on page 10 of 11 to provide the information on confirmatory sampling and complete the diagram on Page 11 of 11.

Options for Submission and Maintenance of Closure Site Assessment Records

Records of the site assessment must be maintained for at least three years after completion of permanent closure or change-in-service in one of the following ways:

- (a) By the owners and operators who took the UST system out of service;
- (b) By the current owners and operators of the UST system site; or
- (c) By mailing these records to the implementing agency if they cannot be maintained at the closed facility.

At least one option must be chosen. If option (c) is chosen, the closure report form should be sent to the DEP regional office responsible for the county in which the tank is located.

Where the results of the site assessment indicate that obvious, localized soil contamination was encountered and the analytical results of the confirmatory sampling show levels below the statewide standard/action levels, this closure report form (Sections I, II, and III) or some other acceptable site characterization report must be received by the Department within 180 days of verbally reporting the release.

Where the results of the site assessment indicate that no obvious contamination or obvious, localized contamination was encountered, but the analytical results of the confirmatory sampling show levels above the statewide standard/action levels, or where there is obvious, extensive contamination, Section 245.310(a)(8) of the CAP regulation requires that details of removal from service be included in the site characterization report. A copy of the completed closure report form should be submitted as part of the site characterization report to satisfy the requirements of Section 245.310(a)(8) of the CAP regulations.

I, Kevin D. Dyson, hereby certify, under penalty of law as provided in 18 Pa. C.S. §4904 (relating
(Print Name)
to unsworn falsification to authorities) that I am the person who performed the site assessment activities associated with the closure of the above referenced storage tank(s) and that the information provided by me in this closure report (Section III) is true, accurate and complete to the best of my knowledge and belief.

Kevin D. Dyson
Signature of Person Performing Site Assessment

07 / 09 / 2002
Date

Project Manager
Title of Person Performing Site Assessment

Insite Group, Inc.
Name of Company Performing Site Assessment

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

UNDERGROUND STORAGE TANK CLOSURE REPORT FORM

SECTION III. Site Assessment Information

Tank Registration # 004 (complete one sheet for EACH tank system and attach ALL laboratory sheets pertaining to that system)

Facility ID Number 03 - 07315

- A. Provide depth of *BEDROCK* and *WATER* IF encountered during excavation or soil boring (write "N/A: if NOT encountered).

Bedrock N/A feet below land surface

Water N/A feet below land surface

- B. Provide Length of *PIPING* IF piping was closed-in-place (write "N/A" if NOT closed-in-place).

Length of piping N/A feet

C. TANK SYSTEM REMOVED FROM THE GROUND

- 1). Was obvious contamination observed while excavating?

- ☐ NO -----> Conduct confirmatory sampling -----> See end of this section for options on submission and maintenance of closure records -----> Do not complete item C.2. below.
- ☒ YES-----> Report release to DEP within 2 hours -----> Describe contamination observed and likely source(s) tank, piping, dispenser, spills, overfills):
Grossly contaminated soils observed beneath the piping under the dispenser island. Contamination on east and west half of 30' x 30' excavation appeared to emanate from the dispenser island.
-----> Complete item C.2. below.

- 2). Was contamination localized (within three feet of the tank system in every direction with no obvious water contamination)?

- ☐ YES -----> Remove or remediate contaminated soil -----> Conduct confirmatory sampling-----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).
- ☒ NO-----> Continue interim remedial actions -----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

D. TANK SYSTEM CLOSED-IN-PLACE OR CHANGED-IN-SERVICE

Was obvious contamination observed during sampling, boring or assessing water depths?

- ☐ NO -----> Conduct confirmatory sampling -----> See end of this section for options on submission and maintenance of closure records.
- ☐ YES-----> Report release to DEP within 2 hours -----> Describe contamination observed and likely source(s) tank, piping, dispenser, spills, overfills):

Continue with corrective action -----> See end of this section for options on submission and maintenance of closure records -----> Call Indemnification Fund (717-787-0763).

- E. If the answer to C.1. is "no", the answer to C.2. if "yes" or the answer to D. is "no", confirmatory samples are required. Use the sample/analysis information sheet on page 10 of 11 to provide the information on confirmatory sampling and complete the diagram on Page 11 of 11.

Options for Submission and Maintenance of Closure Site Assessment Records

Records of the site assessment must be maintained for at least three years after completion of permanent closure or change-in-service in one of the following ways:

- (a) By the owners and operators who took the UST system out of service;
- (b) By the current owners and operators of the UST system site; or
- (c) By mailing these records to the implementing agency if they cannot be maintained at the closed facility.

At least one option must be chosen. If option (c) is chosen, the closure report form should be sent to the DEP regional office responsible for the county in which the tank is located.

Where the results of the site assessment indicate that obvious, localized soil contamination was encountered and the analytical results of the confirmatory sampling show levels below the statewide standard/action levels, this closure report form (Sections I, II, and III) or some other acceptable site characterization report must be received by the Department within 180 days of verbally reporting the release.

Where the results of the site assessment indicate that no obvious contamination or obvious, localized contamination was encountered, but the analytical results of the confirmatory sampling show levels above the statewide standard/action levels, or where there is obvious, extensive contamination, Section 245.310(a)(8) of the CAP regulation requires that details of removal from service be included in the site characterization report. A copy of the completed closure report form should be submitted as part of the site characterization report to satisfy the requirements of Section 245.310(a)(8) of the CAP regulations.

I, Kevin D. Dyson, hereby certify, under penalty of law as provided in 18 Pa. C.S. §4904 (relating
(Print Name)
to unsworn falsification to authorities) that I am the person who performed the site assessment activities associated with the closure of the above referenced storage tank(s) and that the information provided by me in this closure report (Section III) is true, accurate and complete to the best of my knowledge and belief.

Kevin D. Dyson
Signature of Person Performing Site Assessment

07 / 09 / 2002
Date

Project Manager
Title of Person Performing Site Assessment

Insite Group, Inc.
Name of Company Performing Site Assessment

Facility ID Number _____ - _____

[illegible]

¹ Where EPA Method 5035 is required, indicate sample collection option in the right hand box of this column using the following codes:

P - Samples placed in a soil sample vial with a preservative present.

E - Samples collected and stored in a soil collection device which is airtight and affords little to no headspace.

N - Samples placed in soil sample vial without a preservative present.

Site Location and Sampling Map - Use this page or suitable facsimile to provide a large scale map of the site where tanks were closed. Scales between 1" = 10 and 1" = 100 feet frequently work out well. Include the following information as each applies to the site: facility name and I.D., county, township or borough, property boundaries or area of interest, buildings, roads and streets with names or route numbers, utilities, location and ID number of storage tanks removed including piping and dispensers, soil stockpile locations, excavations or other locations of product recovery, north arrow, approximate map scale and legend. Also show depth and location of samples with sample ID numbers cross-referenced to the same ID numbers shown on Page 10 of 11.

Facility Name and ID: 03 - 07315

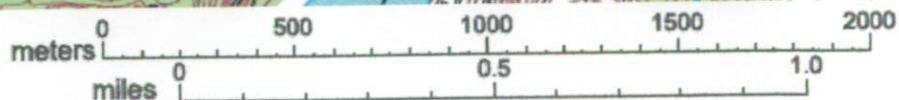
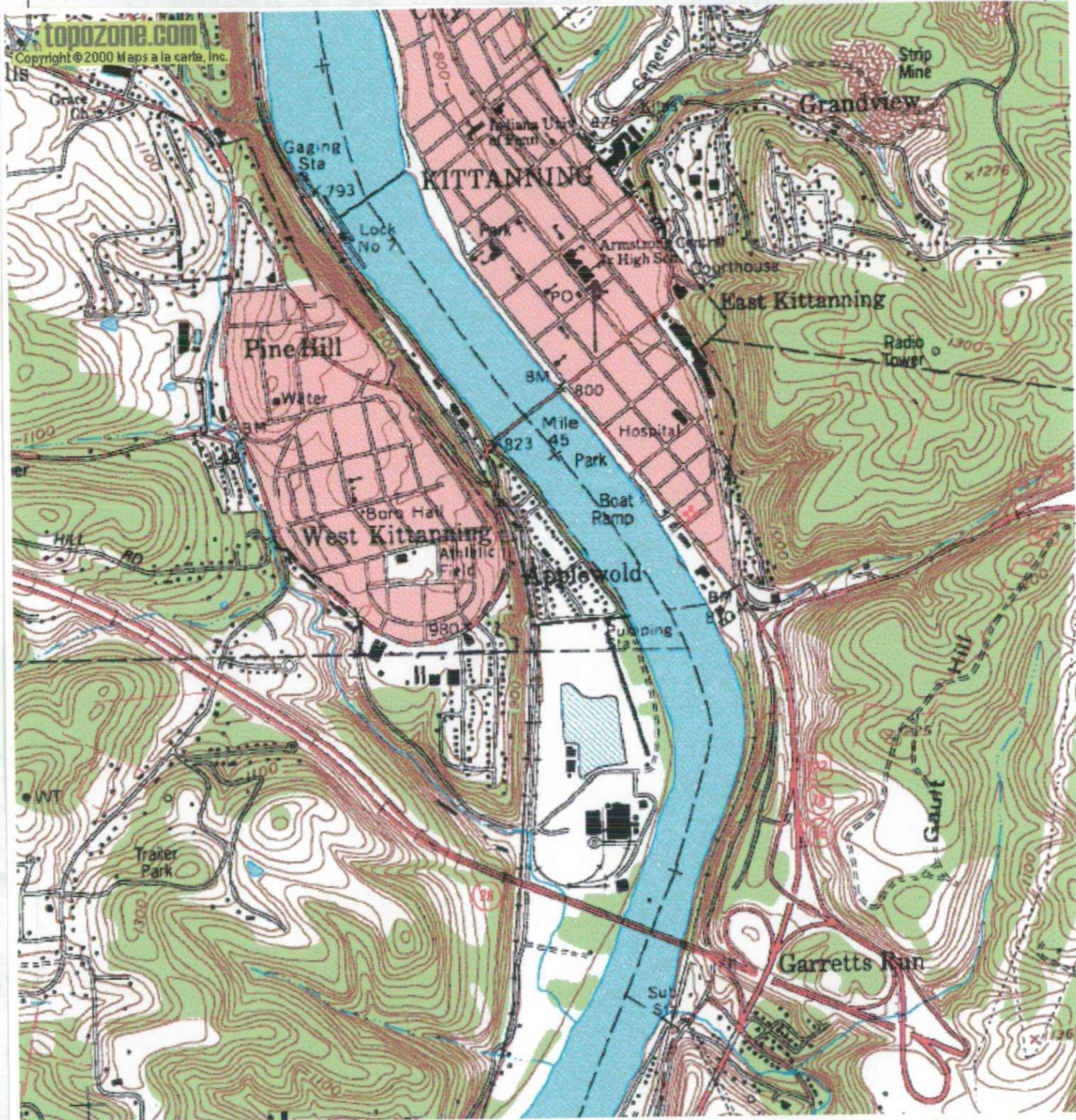
County: Armstrong

Township/Borough: Kittanning Borough

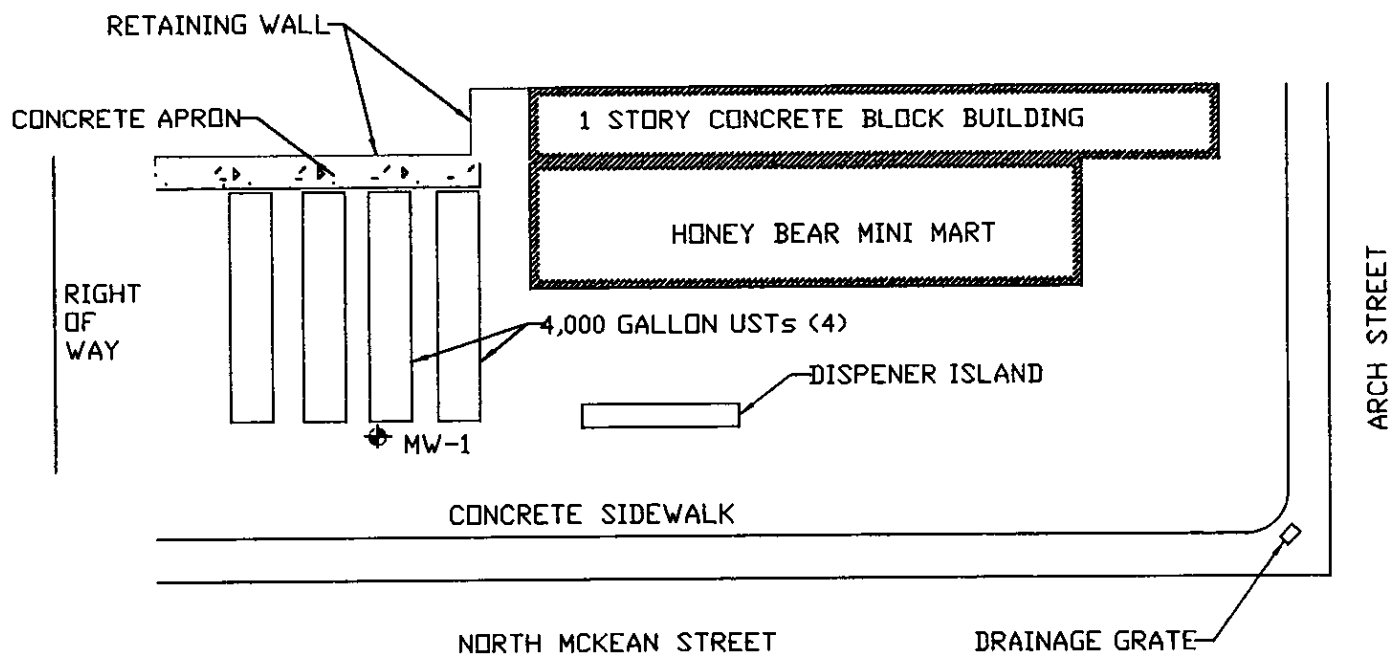
SITE MAP AND TOPOGRAPHIC MAP PROVIDED IN FIGURES SECTION

SITE PHOTOGRAPHS PROVIDED AS ATTACHMENT D

FIGURES



Honey Bear Mini Mart
200 McKean & Arch Streets
Kittanning, Pennsylvania
Topographic Map
Kittanning Quad



LEGEND

	PROPERTY BOUNDARY
	RETAINING WALL
	MONITORING WELL
	UNDERGROUND STORAGE TANK (UST)

GRAFT OIL COMPANY
HONEY BEAR MINI MART
200 MCKEAN STREET AND
ARCH STREET
KITTTANNING, PA

**IN
SITE**
GROUP

REV

FIGURE

BY
KDD

CHECKED

7/31/2008 6:30:45 PM

ATTACHMENT A

PRODUCT DISPOSAL RECORD

PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION
Bureau of Land Recycling and Waste Management
P.O. Box 8550

Harrisburg, PA 17105-8550

OFFICIAL PENNSYLVANIA MANIFEST FORM

Form approved.

OMB No. 2050-0039

UNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No.

PADEP0009742

Manifest
Document No.
084832. Page 1
of 1Information within the bold red border is
not required by Federal law but may be
required by State law.

A. State Manifest Document Number

PAG 155237

B. State Gen. ID

C. State Trans. ID

PA-AH 0130

D. Transporter's Phone (724-568-3623

E. State Trans. ID

PA-AH

F. Transporter's Phone ()

G. State Facility's ID

H. Facility's Phone (412-367-8265

3. Generator's Name and Mailing Address

Graft Oil Inc.
2561 Memorial Blvd.
Connellsville, PA 15426

4. Generator's Phone (

724-628-9580

5. Transporter 1 Company Name

McCutcheon Enterprises, Inc.

6. US EPA ID Number

PAD013826847

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

United Environmental Group
241 McAlister Road
Sewickley, PA 15143

10. US EPA ID Number

PAD987283140

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

HM

a. ☒ RQ, Waste Flammable, Liquids, n.e.s. (Gasoline & Water), 3, UN1993, PGII

12. Containers

No.

Type

13.
Total
Quantity14.
Unit
Wt/Vol15.
Waste No.

2

DM

G

D001 D010

J. Additional Descriptions for Materials Listed Above

GRAFT1UEG

K. Handling Codes for Wastes Listed Above

a.

c.

b.

d.

15. Special Handling Instructions and Additional Information

In Case of Emergency, Contact MEI @ 724-568-3623 Invoice disposal to MEI on PO# Honey Bear Mini Market - Arch
St. 200 McKean St. Kittanning, PA Facility ID# 03-07315 This material is destined for re-use, reclamation or recycling.

16. GENERATOR'S CERTIFICATION:

I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

KEVIN J. DIGNON

Signature

MONTH DAY YEAR
07 02 02

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Ray H. ...

Signature

MONTH DAY YEAR
07 02 02

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

MONTH DAY YEAR
07 02 02

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

MONTH DAY YEAR
07 02 02

ATTACHMENT B

TANK DISPOSAL RECORDS

BOB'S AUTO & SALVAGE

BUTLER, PA
(724) 285-1900

Customer Name

SHOCKEY

Date

6-20-02

☐ Check #

☐ Cash

State / Plate #

Price / 100 lb.

Price / Ton

Trucking Co.

Total Due \$

Truck #

☐ Prep #1

☐ Alum.

☐ Prep #2

☐ Stainless

☐ Unprep #1

☐ Brass

☒ Unprep #2

☐ Copper

☐ Mix Steel

☐ Mix Tin

☐ Autos

☐ Dirty Motors

☐ Cast.

☐ Auto Cast

Remarks

In

Out

Customer

Driver

4 OLD
TANKS

G Draft of KATI.

ATTACHMENT C

SOIL DISPOSAL RECORDS



Log Number

001

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name Graft Oil CompanyShipping Location Honey Bear MiniMartAddress PO Box 899 2561 Memorial BlvdAddress Arch&McKeanStreetsConnellsville, PA 15425Kittanning, PAPhone No. 724 628 9580Phone No. 724 548 2111

Codes

Approval
Number
InSite Group

Description of Material

NON HAZARDOUS PETROL
CONTAMINATED SOIL
DESTINED FOR RECYCLING

Gross Weight (Pounds)

74440

Tare Weight (Pounds)

31300

Net Weight (Pounds)

43140

Net Weight (Tons)

21.57

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORTON
Generator Authorized Agent NameRobert B. Norton
Signature6/20/2002
Shipment Date

TRANSPORTER

Transporter Name American Waste Mgt. SvcsDriver Name (Print) Aaron LockhartAddress One American WayVehicle License No./State PA 1201 011Warren, OH 44484Truck Number 3110State Permit # 255968 US DOT

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature [Signature]Shipment Date 6-20-02 Driver Signature [Signature]Delivery Date 6-20-02

DESTINATION

Site Name Soil Remediation Inc.Phone No. (330) 536-6825Address Loweilville, OhioState Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples

Name of Authorized Agent

Signature

6-20-02

Receipt Date

JUL 01 2002 09:42AM P2

FAX NO. :

FROM :



Log Number
002

**NON-HAZARDOUS MATERIAL MANIFEST
GENERATOR**

Generator Name Graft Oil Company Shipping Location Honey Bear MiniMart
Address PO Box 899 2561 Memorial Blvd Address Arch & McKean Streets
Connellsville, PA 15425 Kittanning, PA
Phone No. 724 628 9580 Phone No. 724 548 2111

Approval Number	Description of Material	Codes	Gross Weight (Pounds)	Tare Weight (Pounds)	Net Weight (Pounds)	Net Weight (Tons)
InSite Group	NON HAZARDOUS PETROL CONTAMINATED SOIL DESTINED FOR RECYCLING		76000	31660	44340	22.17

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

Robert B. Norton Robert B. Norton 6/20/2002
Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Transporter Name American Waste Mgt. Svcs. Driver Name (Print) Joseph J Markin
Address One AmericanWay Vehicle License No./State PUH 4317 OH
Warren OH 44484 Truck Number 2151

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Joe J Markin 6/20/02
Driver Signature Shipment Date Driver Signature Delivery Date

DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples
Name of Authorized Agent Signature 6-20-02 Receipt Date



Log Number
003

**NON-HAZARDOUS MATERIAL MANIFEST
GENERATOR**

Generator Name Graft Oil Company Shipping Location Honey Bear MiniMart
Address PO Box 899 2561 Memorial Blvd Address Arch & McKean Streets
Connellsville, PA 15425 Kittanning, PA
Phone No. 724 628 9580 Phone No. 724 548 2111

Approval Number	Description of Material	Codes	Gross Weight (Pounds)	Tare Weight (Pounds)	Net Weight (Pounds)	Net Weight (Tons)
InSite Group	NON HAZARDOUS PETROL CONTAMINATED SOIL DESTINED FOR RECYCLING		73820	31240	42580	21.29

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORTON Robert B Norton 6/20/2002
Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Transporter Name American Waste Mgt. Svcs Driver Name (Print) STEVE WAGNER
Address One American Way Vehicle License No./State PA 1H94 OH
Warren OH 44484 Truck Number 3109

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature _____ Shipment Date _____ Driver Signature [Signature] Delivery Date 6/20/02

DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Napies [Signature] 6-20-02
Name of Authorized Agent Signature Receipt Date
JUL 01 2002 08:43AM PA FAX NO. : FROM :



Log Number
004

**NON-HAZARDOUS MATERIAL MANIFEST
GENERATOR**

Generator Name Graft Oil Company Shipping Location Honey Bear MiniMart
Address PO Box 899 2561 Memorail Blvd Address Arch & McKean Streets
Connellsville, PA 15425 Kittanning, PA
Phone No. 724 628 9580 Phone No. 724 548 2111

Approval Number	Description of Material	Codes	Gross Weight (Pounds)	Net Weight (Tons)
InSite Group	NON HAZARDOUS PETROL CONTAMINATED SOIL DESTINED FOR RECYCLING		72260 Tare Weight (Pounds) 32400 Net Weight (Pounds) 44860	22.43

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORTON Robert B. Norton 6/20/2002
Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Transporter Name American Waste Mgt. Svcs Driver Name (Print) Charles Keyse
Address One American Way Vehicle License No./State TIR 5220 OH
Warren OH 44484 Truck Number 3566

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Charles Keyse 6/20 _____
Driver Signature Shipment Date Driver Signature Delivery Date

DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples 6-20-02
Name of Authorized Agent Signature Receipt Date



Log Number

005

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name Graft Oil CompanyShipping Location Honey Bear Mini MartAddress PO Box 899 2561 Mmemorial BlvdAddress Arch & McKean StreetsConnellsville, PA 15425Kittanning, PAPhone No. 724 628 9580Phone No. 724 548 2111

Codes

Description of Material

Gross Weight (Pounds)

71880

Tare Weight (Pounds)

27280

Net Weight (Pounds)

44600

Net Weight (Tons)

22.3

Approval
Number

InSite Group

NON HAZARDOUS PETROL
CONTAMINATED SOIL
DESTINED FOR RECYCLING

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 280.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORRIS
Generator Authorized Agent NameRobert B. Norris
Signature6/20/2002
Shipment Date

TRANSPORTER

Transporter Name American Waste Man. Services

Driver Name (Print)

JAMES PENNINGTONAddress One American Way

Vehicle License No./State

PA/4630 OHWarren OH 44484

Truck Number

7005

State Permit #

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature

Shipment Date

DESTINATION

Driver Signature

Delivery Date

Site Name Soil Remediation Inc.Phone No. (330) 536-6825Address Lowellville, OhioState Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples

Name of Authorized Agent

Signature

Receipt Date

JUL 10 2002 08:44 AM

FAX NO. :

FROM :



Log Number
006

NON-HAZARDOUS MATERIAL MANIFEST GENERATOR

Generator Name GRAPT OIL COMPANY Shipping Location HUNLEY BROS. HOME MART
Address PO Box 899 2561 MEDICAL AVE Address ANULI MILLER ST
LOWELLVILLE, PA 15425 724-548-2111
Phone No. _____ Phone No. _____

Approval Number	Description of Material	Codes	Gross Weight (Pounds)	Tare Weight (Pounds)	Net Weight (Pounds)	Net Weight (Tons)
	NON HAZARDOUS PETROL CONTAMINATED SOIL DESTINED FOR RECYCLING		78060	33200	44860	22.43

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORTON Robert B Norton 6/20/2002
Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Transporter Name AMERICAN WASTE MGMT SVCS. Driver Name (Print) JOE PHIPPS #6
Address ONE AMERICAN WAY Vehicle License No./State AE 78866
WARREN, OH 44484 Truck Number 78 RAM

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Joe Phipps Joe Phipps 6/21/02
Driver Signature Shipment Date Driver Signature Delivery Date

DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples 6-21-02
Name of Authorized Agent Signature Receipt Date



Log Number

007

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name Graft Oil CompanyShipping Location Honey Bear MiniMartAddress PO Box 899 2561 Memorial BlvdAddress Arch & McKean StreetsConnellsville, PA 15425Kittanning, PA

Phone No. _____

Phone No. 724 548 2111

Codes

Gross Weight (Pounds)

77000

Tare Weight (Pounds)

33300

Net Weight (Pounds)

43700

Net Weight (Tons)

21.85Approval
Number
InSite Group

Description of Material

NON HAZARDOUS PETROL
CONTAMINATED SOIL
DESTINED FOR RECYCLING

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORTON
Generator Authorized Agent NameRobert B. Norton
Signature6/21/2002
Shipment Date

TRANSPORTER

Transporter Name American Waste Mgt. ServicesDriver Name (Print) William WALKERAddress One American WayVehicle License No./State PUR 8116Warren, OH 44484Truck Number 7511

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature

Shipment Date

Driver Signature

Delivery Date

DESTINATION

Site Name Soil Remediation Inc.Phone No. (330) 536-6825Address Lowellville, OhioState Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples

Name of Authorized Agent

Signature

6-21-02

Receipt Date

JUL 01 2002 09:45AM PB

FAX NO. :

FROM :



Log Number

008

**NON-HAZARDOUS MATERIAL MANIFEST
GENERATOR**

Generator Name Graft Oil Company Shipping Location Honey Bear MiniMart
Address PO Box 899 2561 Memorial Blvd Address Arch & McKean Streets
Connellsville, PA 15425 724 548 2111
Phone No. _____ Phone No. _____

Approval Number In Site Group	Description of Material	Codes	Gross Weight (Pounds) <u>79100</u>	Tare Weight (Pounds) <u>31200</u>	Net Weight (Pounds) <u>47900</u>	Net Weight (Tons) <u>23.95</u>
	NON HAZARDOUS PETROL CONTAMINATED SOIL DESTINED FOR RECYCLING					

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

Robert B. Norton Robert B. Norton 2/21/2002
Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Transporter Name American Waste Mgt. Svcs Driver Name (Print) John Anderson
Address One American Way Vehicle License No./State AE B7663 AZ
Warren, OH 44484 Truck Number 1606

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature _____ Shipment Date _____ Driver Signature John S. Anderson Delivery Date 6-21-02
DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples 6-21-02
Name of Authorized Agent Signature Receipt Date



Log Number
009

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name GILBERT & Co. Inc. Shipping Location Honey Creek Mini Mart
Address P.O. Box 149 251 MEMORIAL AVE. Address PAUL J. MILLER STREETS
Cornellville, PA 15425 LEITANNING, PA
Phone No. _____ Phone No. 724-546-2111

Approval Number	Description of Material	Codes	Gross Weight (Pounds)	Tare Weight (Pounds)	Net Weight (Pounds)	Net Weight (Tons)
	NON HAZARDOUS PETROL CONTAMINATED SOIL DESTINED FOR RECYCLING		80960	32900	48060	24.03

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORTON Robert B. Norton 6/21/2002
Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Transporter Name Valley Lines Driver Name (Print) Brian S. Adamson
Address 1395 GARVER RD Vehicle License No./State AE-81879-PA
Piquette, PA 16229 Truck Number UH-25

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Brian S. Adamson 6-21-02 Brian S. Adamson 6-21-02
Driver Signature Shipment Date Driver Signature Delivery Date

DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples
Name of Authorized Agent Signature 6-21-02
Date



Log Number

810

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name Genart Oil Company Shipping Location Honey Beez Millersburg
Address PO Box 899 2561 Memorial Ave. Address Arthur McKim Streets
Lucerneville, Pa 15425 Kennett, Pa
Phone No. _____ Phone No. 724-548-2111

Codes

Approval
Number

Description of Material

NON HAZARDOUS PETROL
CONTAMINATED SOIL
DESTINED FOR RECYCLING

Gross Weight (Pounds)

80960

Tare Weight (Pounds)

32800

Net Weight (Pounds)

48160

Net Weight (Tons)

24.08

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

Kevin D. Dylon
Generator Authorized Agent Name

Signature

6/21/2002
Shipment Date

TRANSPORTER

Transporter Name Valley Lines Driver Name (Print) Marty Acme
Address 1395 GARVER RD Vehicle License No./State AE-89784 / PA
FREESPORT, PA 16229 Truck Number 42 / 420

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Marty Acme
Driver Signature

6/21/02

Shipment Date

Marty Acme
Driver Signature

6/21/02

Delivery Date

DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples

Name of Authorized Agent

Signature

6-21-02

Receipt Date



Log Number

011

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name CRAPT oil company Shipping Location Acety Acet Munnar
Address PO Box 899 2501 Memorial Blvd Address Acety Munnar Services
Cornellville, PA 15425 Kittanning, PA
Phone No. _____ Phone No. 724-548-2111

Codes

Approval
Number

Description of Material

NON HAZARDOUS PETROL
CONTAMINATED SOIL
DESTINED FOR RECYCLING

Gross Weight (Pounds)

42360

Tare Weight (Pounds)

31800

Net Weight (Pounds)

40560

Net Weight (Tons)

20.28

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

KEVIN D. DYON
Generator Authorized Agent Name

Signature

6/21/2002
Shipment Date

TRANSPORTER

Transporter Name AMERICAN WASTE MGMT SVCS Driver Name (Print) Ron Zook
Address ONE AMERICAN WAY Vehicle License No./State AB 30329 PA
NANNON, OHIO 44481 Truck Number 8152

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature

Shipment Date

Driver Signature

Delivery Date

DESTINATION

Site Name Soil Remediation Inc.Phone No. (330) 536-6825Address Lowellville, OhioState Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples

Name of Authorized Agent

Signature

6-21-02

Receipt Date

Jul 1 01 2002 08:47PM P12

FAX NO. :

FROM :



Log Number

012

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name GNAPT OIL COMPANY Shipping Location POWELL BEAR MINIMAT
Address PO BOX 899 2561 MINERAL SPRING Address PO BOX 899 2561 MINERAL SPRING, OHIO
LOWELLVILLE, PA 15425 724-548-2111
Phone No. _____ Phone No. _____

Codes

Description of Material

Approval
NumberNON HAZARDOUS PETROL
CONTAMINATED SOIL
DESTINED FOR RECYCLING

Gross Weight (Pounds)

71620

Tare Weight (Pounds)

27200

Net Weight (Pounds)

44420

Net Weight (Tons)

22.21

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 280.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Name

Signature

Shipment Date

KARIN D. O'NEAL

6/21/02

TRANSPORTER

Transporter Name AMERICAN WASTE MGMT. SVCS. Driver Name (Print) JAMES PENNINGTON
Address ONE AMERICAN WAY Vehicle License No./State PA 14630 OIL
WARRER, OH 44484 Truck Number 7005

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature

Shipment Date

Driver Signature

Delivery Date

DESTINATION

Site Name Soil Remediation Inc.Phone No. (330) 536-6825Address Lowellville, OhioState Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples

Name of Authorized Agent

Signature

6-21-02

Receipt Date

JUL 1 01 2002 08:48AM P13

FRX NO. 1

FROM :



Log Number

013

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name GNAPT OIL COMPANY Shipping Location HUNLEY BURN MOUNTAINS
Address PO BOX 899 2561 E. MONROE BLVD Address ARCH: MCKAY TRENDS
CUNNELLSVILLE, PA 15425 KIRKSVILLE, PA
Phone No. _____ Phone No. 724-548-2111

Approval Number	Description of Material	Codes	Gross Weight (Pounds)	Tare Weight (Pounds)	Net Weight (Pounds)	Net Weight (Tons)
	NON HAZARDOUS PETROL CONTAMINATED SOIL DESTINED FOR RECYCLING		79860	32800	47060	23.53

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 40 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORTON Robert B Norton 6/21/2002
Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Transporter Name Valley LINES Driver Name (Print) Marty Ann
Address 1395 S. GARRARD RD Vehicle License No./State AE-89784/PA
PHILADELPHIA, PA 19129 Truck Number 412/4120

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

[Signature] 6/21/02 [Signature] 6/21/02
Driver Signature Shipment Date Driver Signature Delivery Date

DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples [Signature] 6-21-02
Name of Authorized Agent Signature Receipt Date



Log Number

014

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name GRAFT OIL COMPANYShipping Location Honey Grove Mini MartAddress PO Box 899 2501 MEMPHIS BLVD
Connellsville, PA 15425Address ALLEN MILLER STREETS
KITTANNING, PA

Phone No. _____

Phone No. 724-588-2111

Codes

Approval
Number

Description of Material

NON HAZARDOUS PETROL
CONTAMINATED SOIL
DESTINED FOR RECYCLING

Gross Weight (Pounds)

81020

Tare Weight (Pounds)

32900

Net Weight (Pounds)

48120

Net Weight (Tons)

24.06

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Name Kenn D. DysonSignature [Signature]Shipment Date 6/21/2002

TRANSPORTER

Transporter Name Valley LinesDriver Name (Print) Brian AdansonAddress 1395 SARVER RDVehicle License No./State AE-91488-PAFreeport, PA 16229Truck Number VL-25

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature Brian L AdansonShipment Date 6-21-02Driver Signature Brian L AdansonDelivery Date 6-21-02

DESTINATION

Site Name Soil Remediation Inc.Phone No. (330) 536-6825Address Lowellville, OhioState Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples

Name of Authorized Agent

Signature [Signature]Receipt Date 7/21/2002 6:30:45 PM

JUL 01 2002 08:49 AM PLS

FAX NO. :

FROM :



Log Number
015

NON-HAZARDOUS MATERIAL MANIFEST
GENERATOR

Generator Name GRAFT Oil Company Shipping Location HUNCY 9200 MINIMARS
Address PO BOX 899 # 2561 Mineral Ohio Address 200 McKean St Arch Street
Cumwellsville, PA 15425 KITTANNING, PA 16201
Phone No. (724) 628-9580 Phone No. (724) 548-2111

Approval Number	Description of Material NON HAZARDOUS PETROL CONTAMINATED SOIL DESTINED FOR RECYCLING	Codes	Gross Weight (Pounds) <u>66940</u>	Net Weight (Tons) <u>20.32</u>
			Tare Weight (Pounds) <u>26300</u>	
			Net Weight (Pounds) <u>40640</u>	

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

Robert B. Norton Robert B. Norton 6/27/2002
Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Transporter Name Stallby Line Trucking Driver Name (Print) WILLIAM BELLAS
Address 1395 Larkin Road Vehicle License No./State YES 5073
Freeport PA Truck Number 1641

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

William Bellas 6/27/02 William Bellas 6/27/02
Driver Signature Shipment Date Driver Signature Delivery Date

DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples 6-27-02 7/30/2002 6:30:45 PM
Name of Authorized Agent Signature Receipt Date
STP 01 2002 05:49AM P16 FRX NO. 1 FROM :



Log Number

016

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name GRAFT OIL Company Shipping Location HENRY ROAD MINI MARKS
Address PO BOX 899 2561 MEMORIAL BLVD Address 200 MILLMAN ST - ARCH ST.
CUNNILLSVILLE, PA 15425 LITANYING, PA 16201
Phone No. (724) 626-9580 Phone No. (724) 548-2111

Codes

Approval
Number

Description of Material

NON HAZARDOUS PETROL
CONTAMINATED SOIL
DESTINED FOR RECYCLING

Gross Weight (Pounds)

74480

Tare Weight (Pounds)

26400

Net Weight (Pounds)

48080

Net Weight (Tons)

24.04

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORTON Robert B. Norton 6/27/2002
Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Transporter Name VALLEY LINES TRUCKING INC Driver Name (Print) JAMES E SHANKLE
Address FREEPORT PA Vehicle License No./State YLS-9705
Truck Number VL-37

State Permit # PUC A-00116353

I hereby certify that the above named material was picked up at
the generator site listed above.

I hereby certify that the above named material was delivered
without incident to the destination listed below.

James E Shankle 6-27-02 James E Shankle 6-27-02
Driver Signature Shipment Date Driver Signature Delivery Date

DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples 6-27-02
Name of Authorized Agent Signature
JUL 01 2002 08:50AM P17 FAX NO. 7/24/2002 6:30:45 PM RECEIVED



Log Number
~~000~~ 017

**NON-HAZARDOUS MATERIAL MANIFEST
GENERATOR**

Generator Name CRAPT OIL COMPANY Shipping Location HANCOY AREA MINI MARS
Address PO BOX 099 2561 MEMORIAL BLVD. Address 200 MCKEAN ST; Arch ST.
CANNELSVILLE, PA 15425 KITTANNING, PA 16201
Phone No. (724) 9 628-9580 Phone No. (724) 548-2111

Codes

Description of Material

Gross Weight (Pounds)

73300

Tare Weight (Pounds)

26200

Net Weight (Pounds)

47100

Net Weight (Tons)

28.55

NON HAZARDOUS PETROL
CONTAMINATED SOIL
DESTINED FOR RECYCLING

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORTON Robert B Norton 6/27/2002
Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Transporter Name VALLEY LINES TRUCKING INC Driver Name (Print) DERRICK J. OGDEN
Address 1395 SARVER RD. FREEPORT, PA Vehicle License No./State YLJ-9707
16229 Truck Number 22

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Derrick J. Ogden 6/28/2002
Driver Signature Shipment Date Driver Signature Delivery Date

DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples
Name of Authorized Agent Signature 6-28-02
Date



Log Number
018

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name GRAFT oil COMPANY
Address P.O. Box 899, 2561 Memorial Blvd.
Cornellville, PA 15425
Phone No. (724) 628-9580

Shipping Location Honey Bear Mini Mart
Address 200 McKean St ARCH ST.
KITTSBORO, PA 16201
Phone No. (724) 548-2111

Approval Number	Description of Material	Codes
	NON HAZARDOUS PETROL CONTAMINATED SOIL DESTINED FOR RECYCLING	

Gross Weight (Pounds)	72700
Tare Weight (Pounds)	26500
Net Weight (Pounds)	46200

Net Weight (Tons)	23.1
-------------------	------

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORTON Robert B. Norton 6/28/2002
Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Transporter Name VALLEY LINKS Driver Name (Print) Tim L. Mills
Address 1395 SANDY Rd. Vehicle License No./State _____
FREEDORA, PA. Truck Number VL-29

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Tim L. Mills 6/29 Tim L. Mills
Driver Signature Shipment Date Driver Signature Delivery Date

DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples 6-28-02
Name of Authorized Agent Signature Date
JUL 01 2002 09:51 AM FAX NO. FROM :



Log Number

019

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name GRAFT oil COMPANYShipping Location Honey Bear Mini MartAddress Pc Box 899, 2561 Memorial Blvd.Address 200 Market St & ARCH ST.Cosmo/Iskville, PA 15425Kittanning, PA 16201Phone No. (724) 628-9580Phone No. (724) 548-2111

Codes

Approval
Number

Description of Material

NON HAZARDOUS PETROL
CONTAMINATED SOIL
DESTINED FOR RECYCLING

Gross Weight (Pounds)

75060

Tare Weight (Pounds)

26300

Net Weight (Pounds)

48760

Net Weight (Tons)

24.38

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Name ROBERT B. NORTONSignature Robert B. NortonShipment Date 6/28/2002

TRANSPORTER

Transporter Name Valley Lane TruckingDriver Name (Print) WILLIAM BELLASAddress 1395 Lamon RoadVehicle License No./State YFS 5073Transport PATruck Number KL41State Permit # P.U.C.A-00116353

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature William BellasShipment Date 6/28/02 Driver Signature William BellasDelivery Date 6/28/02

DESTINATION

Site Name Soil Remediation Inc.Phone No. (330) 536-6825Address Lowellville, OhioState Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples

Name of Authorized Agent

Signature

Receipt Date

JUL 01 2002 08:52 AM P20

FAX NO. :

FROM :



Log Number 20

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name GRAET Fil Company Shipping Location Henry Beer Mini Mart
Address P.O. Box 899, 2561 McVane Blvd. Address 200 McKean St. & Arch St.
Cornellsville, PA 15425 Kittanning, PA 16201
Phone No. (724) 628-9500 Phone No. (724) 548-2111

Approval Number	Description of Material	Codes	Gross Weight (Pounds)	Tare Weight (Pounds)	Net Weight (Pounds)	Net Weight (Tons)
	NON HAZARDOUS PETROL CONTAMINATED SOIL DESTINED FOR RECYCLING		65280	26000	39280	19.64

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORTON Robert B Norton 6/28/2002
Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Transporter Name VALLEY LINES Driver Name (Print) Tim L. Mills
Address 1395 SARUM Rd Vehicle License No./State VL-29
FREEDRICK, PA Truck Number VL-29

State Permit # _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Tim L. Mills 6/28/02 Tim L. Mills 6/28
Driver Signature Shipment Date Driver Signature Delivery Date

DESTINATION

Site Name Soil Remediation Inc. Phone No. (330) 536-6825
Address Lowellville, Ohio State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples 6-28-02
Name of Authorized Agent Signature Date
Name of Receiver Soil Remediation Inc. Date 6-28-02
Signature Date



Log Number

021

NON-HAZARDOUS MATERIAL MANIFEST

GENERATOR

Generator Name GRIFT Oil Company
Address PO Box 879, 2561 PEABODY BLVD.
Cornellville, PA 15425
Phone No. (724) 628-9580

Shipping Location Honey Bear Mini Mart
Address 200 McKean St & Arch St.
Gettysburg, PA 16201
Phone No. (724) 548-2111

Codes

Approval
Number

Description of Material

NON HAZARDOUS PETROL
CONTAMINATED SOIL
DESTINED FOR RECYCLING

Gross Weight (Pounds)

70380

Tare Weight (Pounds)

26200

Net Weight (Pounds)

44180

Net Weight (Tons)

22.09

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, is not a DOT hazardous substance as defined by 49 CFR Part 172 or any applicable state law, has been fully and accurately described above, classified, packaged and is in proper condition for transportation according to applicable regulations.

ROBERT B. NORTON
Generator Authorized Agent Name

Robert B. Norton
Signature

6/28/2002
Shipment Date

TRANSPORTER

Transporter Name VALLEY LINES TRUCKING
Address 1395 ~~SAFETY~~ RD. FREEPORT, PA
16229

Driver Name (Print) DERRICK J. OGDEN
Vehicle License No./State YLJ - 9707
Truck Number 22

State Permit #

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Derrick J. Ogden 6/28/2002
Driver Signature Shipment Date

Driver Signature Delivery Date

DESTINATION

Site Name Soil Remediation Inc.

Phone No. (330) 536-6825

Address Lowellville, Ohio

State Permit # 0250050885P902

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Frank Naples

Name of Authorized Agent

[Signature] 6-28-02
Signature Receipt Date

Jul. 01 2002 08:53 AM P22

FAX NO. :

FROM :

ATTACHMENT D

PHOTOGRAPHS



