



**Weston Solutions, Inc.**  
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www.westonsolutions.com

January 30, 2015

Mr. Steven Merritt  
On-Scene Coordinator  
United States Environmental Protection Agency, Region 8  
Mail Code: 8EPR-ER  
1595 Wynkoop Street  
Denver, CO 80202

Re: Time-Critical Removal Action Draft Report  
Stone Castle Recycling Assessment  
Parowan, Iron County, Utah  
TDD: 0001/1410-01  
DCN: W0201.1A.00378  
WO#: 20408.012.001.0201.00

Dear Mr. Merritt:

The United States Environmental Protection Agency (U.S. EPA) tasked the Weston Solutions, Inc., (WESTON®) Superfund Technical Assessment and Response Team (START) under Technical Direction Document (TDD) 0001/1411-06 to support U.S. EPA at the Stone Castle Recycling Removal Site (Site) in Parowan, Iron County, Utah. A Time-Critical Removal Action was conducted to address the threat to human health due to waste exposure based on the results from a Removal Site Evaluation performed by EPA and START in 2014. This report describes tasks performed on December 1 to 29, 2014 to complete the Time-Critical Removal Action, including waste management and disposal, air and noise monitoring, air sampling and analysis, waste sampling and analysis, and soil sampling and analysis. The results of the Removal Site Evaluation, previously provided to EPA in a letter report dated December 19, 2014, are summarized to provide context for the removal action. **Attachment A** provides the figures for this report. **Attachment B** provides the tables for this report. **Attachment C** provides the approved Sampling and Analysis Plan (SAP) for the removal. **Attachment D** provides photographic documentation of Site conditions. **Attachment E** provides the Health and Safety Plan. **Attachment F** provides the analytical data. **Attachment G** provides the VIPER data. **Attachment H** provides a copy of the Site Logbook.

#### **SITE DESCRIPTION**

The Site address is 1338 West 200 South, Parowan, Iron County, Utah. The site is located at latitude 37.8393198 and longitude -112.8572735 (Attachment A, Figures 1 and 2). This site was referred to EPA by the Utah Department of Environmental Quality's (UTDEQ) Division of Solid and Hazardous Waste following a series of mysterious and well-publicized fires at electronics waste (e-waste) recycling facilities operated by Stone Castle, LLC throughout the state. This



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commercial property is currently owned by both the Wheeler Family Trust and the Carr Family Trust.

## **SITE HISTORY**

From the document *U.S. EPA Action Memorandum* dated 11/24/14:

The Site was discovered by the Solid and Hazardous Waste Division in the Utah Department of Environmental Quality (UTDEQ) during the course of an investigation into three electronics waste recycling facilities operated by Stone Castle, LLC (Stone Castle) in Clearfield, Cedar City, and Parowan, Utah. Stone Castle was in the business of scrapping used and donated cathode-ray tube (CRT) television sets on behalf non-profit organizations and municipalities along the Interstate 15 corridor in Utah. Stone Castle operated at the Site from approximately August 2013 to March 2014, when there was a fire at the Site. After the fire, the electronic waste materials at the Site were abandoned. When it functioned as an operating entity, Stone Castle dismantled electronics, sold the component parts, and recovered raw materials. During this dismantling procedure, Stone Castle removed the cathode-ray from the leaded-glass vacuum tube inside CRT televisions. Stone Castle segregated, crushed, and sent this glass to other leaded glass makers to melt down and create new leaded-glass CRTs. Following the move from analog to digital broadcasting, and the corresponding shift from CRT televisions to plasma and liquid-crystal display (LCD) high-definition televisions, the market for leaded glass collapsed. Stone Castle had large volumes of nearly worthless CRTs and recovered raw materials without sufficient revenue to properly process electronic waste, to pay employees and facility leases, and to dispose of the electronic wastes. These wastes were placed into corrugated cardboard "Gaylord boxes" and frequently stored outside of already full warehouse storage areas, where they rapidly deteriorated and failed, spilling their contents onto the ground, subjecting the contents to further weathering. The storage of these materials outside led to multiple fires at Stone Castle facilities, potentially caused by projection television lenses concentrating heat from solar radiation onto flammable materials. The CRT stockpile left outside at the Site caught fire on March 2, 2014. During the fire at the Site, the Parowan Fire Department used heavy equipment to push containerized CRTs and electronic wastes away from the waste materials engulfed in the fire to create a fire break. As a result, there are three discrete piles of material at the Site: burned electronic waste debris containing approximately 340 cubic yards of material, mixed electronic waste debris containing approximately 830 cubic yards of material, and 640 cubic yards of intact CRT televisions in deteriorating corrugated cardboard boxes (Attachment A, Figure 3).

On August 13, 2014, acting on information provided by both the EPA Region 8 Resource Conservation and Recovery Act (RCRA) Program and the Solid and Hazardous Waste Division of the Utah Department of Environmental Quality



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(UTDEQ), the OSC conducted a preliminary assessment of the Site to determine whether a Removal Site Evaluation was warranted. At the time of this visit, UTDEQ was pursuing all available enforcement remedies available under the Utah Solid and Hazardous Waste Act and RCRA to have the Stone Castle complete a clean-up of the Site by September 28, 2014. Because of that, and other factors, the EPA agreed to postpone activities until after the September 28, 2014 deadline.

On September 29, 2014, after Stone Castle failed to comply with the UTDEQ enforcement order deadline for removing wastes, the property owner contacted the OSC and agreed to provide access to the EPA. The OSC immediately tasked the START contractor to perform an assessment and treatability study on the wastes at the Site to determine if a removal was warranted and feasible.

## **REMOVAL SITE EVALUATION**

EPA tasked START with documenting and inventorying waste at the Site to determine if it posed a threat to human health or the environment. On October 14, 2013 START mobilized to the Site and conducted field work. The stockpiles of waste on Site were found to be in three distinct matrices: burned debris, general electronic waste and intact CRT televisions. START estimated waste volumes for the burned debris, general electronic debris, and intact CRT televisions at 317.75, 831.11, and 512.78 cubic yards (yd<sup>3</sup>), respectively. The total waste volume at the Site was estimated to be 1,661.64 yd<sup>3</sup>.

Soil was collected from eleven locations to determine possible impacts from the metals present in the waste as well as the presence of toxic thermal decomposition byproducts from the fire at the Site. Each soil sample was collected using a hand auger at a depth of 0-6 inches below ground surface. Field screening results collected at each sampling location with x-ray fluorescence (XRF) instrumentation confirmed that surface soils contained lead concentrations ranging from 6.0 to 78.0 parts per million (ppm), well below the typical EPA screening level of 400 ppm. START also collected composite samples of each of the waste matrices present at the Site for the purpose of documenting the toxicity characteristics and determining whether the lead from the CRT glass was prone to migrate if the material was left to weather and degrade on Site. All samples were submitted to Accutest Laboratories in Wheat Ridge, Colorado. All soil samples were analyzed for target analysis list (TAL) Metals. Two of the soil samples were analyzed for dioxins. Each of the waste samples were analyzed for Toxic Characteristic Leaching Procedure (TCLP) metals and semivolatile organic compounds (SVOCs) to determine if they exhibited toxicity or other hazardous waste characteristics.

While conducting the Removal Site Evaluation, START also completed additional assessment activities with an eye toward CRT recycling and waste disposal options. Included in these activities was documenting the quantity, volume, and mass of leaded-glass present in the intact televisions at the Site and determining the typical labor necessary to disassemble the television sets to recover the CRT and segregate all other components. From visual inspection, the average



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intact CRT television had a 27 inch screen and weighted approximately 40 pounds (lb). The particular unit that START disassembled weighed 36 lb. Following disassembly and segregation, the leaded-glass weighed 33 lb, or roughly 92% of the total mass, the circuit board and electronic components weighed two pounds, or roughly 5% of the total mass, and the plastic enclosure weighed the remaining one pound, or roughly 3% of the total mass. The methodical disassembly of an average sized CRT television set took approximately five minutes to complete.

START also collected in bulk approximately 4 gallons each of broken CRT glass, burned debris, mixed electronic waste, and impacted soil for use in a Treatability Study (see following section). As treatment products, START purchased a 40 lb bag of a monoammonium phosphate (MAP) fertilizer and Portland cement.

Analytical results from the Removal Site Evaluation indicated that hazardous substances, as defined by CERCLA Part 101(14), were present at the Site and represent actual or potential threat to nearby human populations. The lead in the CRT glass was found to be the primary contaminant present at the Site. Lead is listed as a hazardous substance per 40 CFR §302.4. Lead is prone to leaching from the surfaces of broken CRT glass once the cathode ray tube is ruptured and exposed to weathering in the environment. Both the TCLP testing and soil sampling results demonstrated that lead, present in the debris at the Site, is being released into soils. Four waste samples from the Site were analyzed for TCLP metals. All but one of the four samples, SCOU1W04 (mixed debris), significantly exceeded the RCRA regulatory levels for leachable lead via TCLP metals analysis. The likely reason the mixed debris sample did not also exceed the regulatory limits for lead is because of dilution and adsorption of leachable lead onto non-hazardous packaging materials present in the sample.

All data collected during the Removal Site Evaluation was uploaded to a geospatial map viewer and linked to the website at <http://www.epaos.org/stonecastlerecyclingparowan>. The data displayed in the viewer included sample locations, waste pile volumes and areal extents, photographs, XRF soil screening data, and validated analytical laboratory sample results.

### **TREATABILITY STUDY**

In order to evaluate the effectiveness of on-site waste treatment, START conducted a bench-scale treatability study. After disposal research and the corresponding determination that the electronic wastes present at the site were ineligible for recycling under RCRA, START began evaluating the use of proven solidification/stabilization techniques. The plan for the Treatability Study was based around binding the lead present in the CRTs with phosphate to create insoluble pyromorphite minerals on the hazardous debris surfaces in the waste present at the Site. Based on research of previous studies and the availability of phosphate fertilizers near the Site, the first treatment product tested was agricultural grade MAP fertilizer, which contained 11% nitrogen and 52% phosphate, by weight.

In order to meet the size standard for TCLP Metals analysis specified in EPA Method 1311, all sample volume needs to pass through a 3/8 inch sieve, the bulk waste needed to be crushed.



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START had all composite samples of the waste matrices taken from the Site processed by Hazen Research in Golden, Colorado using industrial grinding equipment. The size reduction ensured that the phosphate would have better interaction with more surface area in the ground waste. The elements of the mixed waste study sample were determined by estimating the ratio of each waste matrix likely to be found at the Site. This resulted in a mixture composed of roughly 30% intact television parts and non-hazardous debris, 30% broken leaded-glass, 30% burned debris, and 10% impacted soil.

Study samples were treated with both 1% and 3% MAP phosphate. The treatment ratios were determined by weighing dry samples and MAP prior to the addition of 10% water, by weight, to all of the samples. In all samples except SCOU1T07, START used a mortar and pestle to pulverize the pelletized MAP into a powder. This step helped to increase the reagent surface area for more immediate reaction with the lead in the waste during mixing. Each sample was mixed in a separate, clean container and allowed to react for 24 hours. The total weight of each sample submitted for TCLP metals analysis was controlled at 1,000 grams, which contained sufficient volume for the analysis.

Laboratory analysis of these treatability study samples indicated that two treatment ratios, SCOU1T02 (glass) and SCOU1T05 (mixed waste) were unsuccessful in binding the lead below the EPA regulatory limit of 5.0 milligrams per liter (mg/L) via TCLP. Further research and discussions with other resources at EPA led to the identification of a second treatment agent, Portland cement. This agent was thought to provide physical binding of the mobile metals in the hazardous debris.

EPA tasked START with continuing the treatability study with both Portland cement and MAP. For this second set of samples, only the broken glass matrix was used since the initial analytical results indicated that this material contained the highest concentrations of leachable lead requiring treatment. For the appropriate treatment ratio of Portland cement to hazardous debris, START consulted similar EPA removal projects and pertinent technical literature, which indicated effective ratios of up to 30%, by weight.

As in the first round, the treatment ratios were determined by weighing dry samples and the treatment reagents prior to the addition of 10% water, by weight, into all of the samples. The pelletized MAP was pulverized into powder by START using a mortar and pestle. Each sample was mixed in a separate, clean container and allowed to react for 24 hours. The total weight of each sample was controlled at 1,000 grams, which contained sufficient volume for the analysis. All samples were submitted to Accutest Laboratories in Wheat Ridge, Colorado for TCLP Metals analysis.



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Treatability Study	Sample ID (SCOU1__)											
	T01	T02	T03	T04	T05	T06	T07	T08	T09	T10	T11	T12
Size (in)	3/8	3/8	3/8	3/8	3/8	3/8	3/8	3/8	3/8	3/8	3/8	3 **
Portland (% w/w)	0	0	0	0	0	0	0	0	3	10	3	0
MAP (% w/w)	1	3	1	3	1	3	3 *	0	0	0	3	3
Waste Matrix	Glass	Glass	Burned Debris	Burned Debris	Mixed Waste	Mixed Waste	Mixed Waste	Glass	Glass	Glass	Glass	Glass
TCLP Lead Concentration (mg/L) ***	3.9	<u>8.5</u>	3.2	1.8	<u>8.1</u>	0.6	0.7	<u>16.8</u>	<u>6.4</u>	1.7	0.1	<u>10.9</u>

\* MAP agent was added in pellet form, without grinding in mortar and pestle

\*\* Batch was mixed prior to size reduction

\*\*\* Italicized underlined red values exceed and green values are below RCRA regulatory limit (5.0 mg/L) for TCLP Metals

As presented in the table above, the treatability study showed the best reduction in TCLP leachable lead in sample SCOU1T11, which dropped the TCLP lead concentration from 16.8 to 0.1 mg/L. As compared to sample SCOU1T08, which was the study control, this resulted in a roughly 99% reduction in leachable lead. Sample SCOU1T11 was also the only sample with a measurable amount of arsenic (0.058 mg/L), cadmium (0.025 mg/L), chromium (0.019 mg/L), and mercury (0.0014 mg/L), but all of these results remain below the RCRA regulatory limits for TCLP metals. Sample SCOU1T11 was crushed glass that was mechanically ground down to pass through a 3/8 inch sieve before being wet with 10% water, treated and mixed with 3% powdered MAP, allowed to react briefly, and finally treated and mixed with 3% Portland cement, and allowed to react for 24 hours. The mixture of the more expensive MAP, which has been proven to bind lead from the CRT substrates, with a similar amount of the heavier and less expensive Portland cement, proved that the bench-scale results could likely be implemented in the field on a larger scale with locally available reagents.

Based upon these results and discussions with both ERRS and START, EPA made the decision to process the hazardous debris at the Site and add the MAP using an industrial-scale horizontal grinder, followed by mixing the Portland cement into the partially treated stockpiles with a pug mill, and then packaging the entire mixture into roll-off dumpsters for disposal.

Wastes treated in the field using this treatment process are expected to achieve TCLP metals results similar to those measured during the Treatability Study. This treatment methodology will allow the wastes to be disposed of in a RCRA Subtitle D solid waste landfill, rather than a RCRA Subtitle C hazardous waste landfill. Based upon initial pricing from landfills closest to the site, using treatment could reduce waste disposal costs by about 85%, from roughly \$270/ton for hazardous waste to just under \$40/ton. Once the treatment reagents, processing equipment rental, and labor involved in treating the wastes have been factored in, the overall costs savings may drop to around 60% less than simply disposing of the Site wastes in a RCRA Subtitle C facility.



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## **SCOPE OF WORK**

START was tasked by EPA with the following scope of work as part of the Time-Critical Removal Action.

- Provide assistance during the on-site treatment of waste to ensure the process yields a sufficient reduction in TCLP lead. This includes delivering all treatability study data and reports to the OSC and ERRS Removal Manager to aid in planning and decision making.
- Develop a site-specific Sampling and Analysis Plan (SAP) detailing sampling and data to be collected at the Site during the Removal. The plan shall detail sampling and monitoring of dust, airborne metals, and noise created on-site and document the absence of off-site migration (Attachment C).
- Collect additional field screening data in the footprint of the waste staging area. This data shall be used to determine the extent of soil impact using XRF screening equipment.
- Compile additional Site data including photographs, videos, geospatial data, and general site documentation sufficient to document Site work during the removal action. This shall include waste volume estimates and final disposal volumes. Data shall be uploaded to the website and/or viewer for this Site on EPAOSC.net promptly, in accordance with the EPA Region 8 Response Unit Data Management Plan.

## **REMOVAL ACTION ACTIVITIES**

### **Treatment Process**

In order to treat electronic waste at the Site, EPA worked with Emergency and Rapid Response Services (ERRS) Contractor and START to develop a treatment process to reduce TCLP lead prior to offsite disposal (Figure 5). The methodology of the waste treatment process was developed during the previously completed treatability study. Approximately one third of the waste found on Site was packaged in cubic yard cardboard boxes resting on wooden pallets. To reduce the volume of waste needing treatment and the associated volume of treatment agents required for treatment, the pallets and boxes were first segregated. ERRS used a skid-steer and excavator to sort the waste. Large pieces of scrap metal were also separated and staged for recycling. The electronic waste was then size reduced mechanically using a large horizontal grinder. A three to four inch cutting screen was first used to size reduce waste and water was added to control dust coming off the unit. All site electronic waste was first size reduced in this manner.

The electronic waste was then treated with MAP fertilizer and water. Initially, a ratio of 3% MAP fertilizer was selected for treatment of the waste. After discussions amongst EPA, ERRS, and START, the decision was made to increase the ratio to approximately 4.5% MAP. ERRS used an excavator and front-loader to mix the MAP and water into the waste. The partially treated waste was then size reduced a second time using the same horizontal grinder and a two inch cutting screen. Similar to the first grinding process, water was added to control dust coming off the grinder and the waste was staged in piles.



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The second treatment process employed the use of a pug mill and Portland cement as the treatment agent. Similar to the MAP fertilizer, initially a ratio of 3% Portland cement was selected for treatment of the waste. After discussions amongst EPA, ERRS, and START, the decision was made to increase the ratio to approximately 4.5% cement. The Portland cement was raised and loaded into the pig mill's silo with a tele-handler or sky jack rented by ERRS. After filling the water tank, the pug mill was calibrated and tested by the operating technician. The partially treated waste was loaded into the hopper by ERRS using an excavator. The pug mill then amalgamated the waste with cement and additional water for final treatment. The mill technician controlled the unit's mixing speed to maintain a uniform batch. The final treated waste was then staged on the east side of the Site for analysis prior to disposal.

### **Air Monitoring & Sampling**

START conducted air monitoring and sampling to determine and prevent off-site transport of contaminants during the Removal Action. Data Ram IV monitors were used to monitor and sample particulates in air at the site boundaries and within the work zone (Figure 4). A VIPER system was used to transmit the data to the support zone. On December 9, 2014 air samples were collected using the Data Ram III internal pumps, set at 2 liters per minute. The units were positioned at site boundaries, within the work zone, and a field blank was also collected (SCOU1A04). Analysis of the air samples showed metal concentrations less than the method detection limit for arsenic (0.0026 mg/m<sup>3</sup>) and lead (0.0013 mg/m<sup>3</sup>) (Table 3).

### **Noise Monitoring**

During grinding operations, START monitored noise levels both in the work zone and at the Site boundary. Using a 3M Quest SoundPro SE/DL Handheld Sound Level Meter, START recorded noise levels of 85-97 decibels (dB) near the grinder. A work zone perimeter of 85 dB was demarcated beyond which hearing protection was required for Site personnel. Noise levels were recorded at all the Site boundaries and these levels did not exceed 58 dB.

### **VIPER Data**

The VIPER system consisted of three instrument LINC's (Lifeline Interoperable Network Communicators), a Lifeline Gateway, and a wireless capable laptop computer. Each LINC was plugged into a Data Ram III particulate monitor and transmitted its data wirelessly to the Gateway. The Gateway received the monitoring data and sent it to both a laptop computer in the support zone, and to a remote file server. The laptop computer, programmed with the VIPER Survey Controller interface, displayed real time monitoring data and flashed alerts if levels exceeded the action level. The remote data server is maintained by the EPA Environmental Response Team (ERT) for achieving and publishing. The air monitoring data and air sampling results were added to the geospatial map viewer and linked to the website. An electronic backup file was secured from ERT (Attachment G) which contains the particulate air monitoring data.



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### **Waste Sampling and Analysis**

START collected waste samples throughout the treatment process to quantify the reduction of TCLP lead. In addition, a pre-treatment sample, SCOU1W05, was collected to establish waste background levels. Sample SCOU1W06 was collected from the waste pile after the addition of MAP to determine the reduction of TCLP lead based solely on the first treatment process. Two samples, SCOU1W07 and SCOU1W08, were collected from the waste after the final treatment to confirm disposal values. All waste samples were submitted for TCLP metals analysis and SCOU1W05 was also submitted for total metals analysis. The results (Table 4) indicated that the addition of MAP reduced the TCLP lead concentration from 7.88 to 1.33 mg/L, or a 17% reduction. Results from samples SCOU1W07 and SCOU1W08 showed a further reduction in TCLP lead values down to non-detectable levels.

### **Soil Screening and Treatment**

As part of the treatment process, waste was sorted and moved from its original staging location (Figure 4). ERRS then searched the underlying soil manually and removed any remaining large pieces of glass. The impacted soil was then excavated from the surface down approximately two inches throughout sorting area and in the waste treatment area. This soil was treated with Portland cement prior to disposal. Approximately 42 yd<sup>3</sup> of treated soil was estimated to have been removed from the Site for disposal.

START utilized a NITON XRF Analyzer made by Thermo Scientific to field screen the excavated area (Table 5). The screening concentrations for lead were all under 500 ppm so no additional excavation was performed. Clean backfill was delivered and used for final grading of the Site.

### **Final Waste Disposal**

A total of 14 (one) ton bags of MAP fertilizer or 28,000 lb and a total of 26 (one) ton bags or 52,000 lb of Portland cement was used during on Site treatment. After verifying analytical results from the final treated waste, ERRS loaded the waste into 30 yd<sup>3</sup> roll-off boxes for off-site disposal. Each partly filled roll-off box was estimated to contain 21 yd<sup>3</sup> or 25,515 lb (12.8 tons) of waste. This estimate was based on a final treated waste density of 7 pounds per gallon, which was measured on Site by START. The roll-off boxes were not completely filled in order to comply with state highway weight limitations.

A total of 17 roll-off boxes or 218 tons of non-RCRA, non-hazardous treated waste was transport by truck to the ECDC Environmental facility in East Carbon, Utah. In addition, 42 yd<sup>3</sup> of non-hazardous treated soil and 42 yd<sup>3</sup> of non-hazardous wood and cardboard were also transported to the same facility. The scrap metal, totaling 865 lb, was sent to a scrap metal facility in Cedar City, Utah for recycling.

This removal action addressed the threat to human health posed by Site waste and no further action is required for this Site. If there are any questions or comments regarding this report, please do not hesitate to contact me at [jeff.bryniarski@westonsolutions.com](mailto:jeff.bryniarski@westonsolutions.com) or (303) 729-6106.



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Sincerely,

WESTON SOLUTIONS, INC.

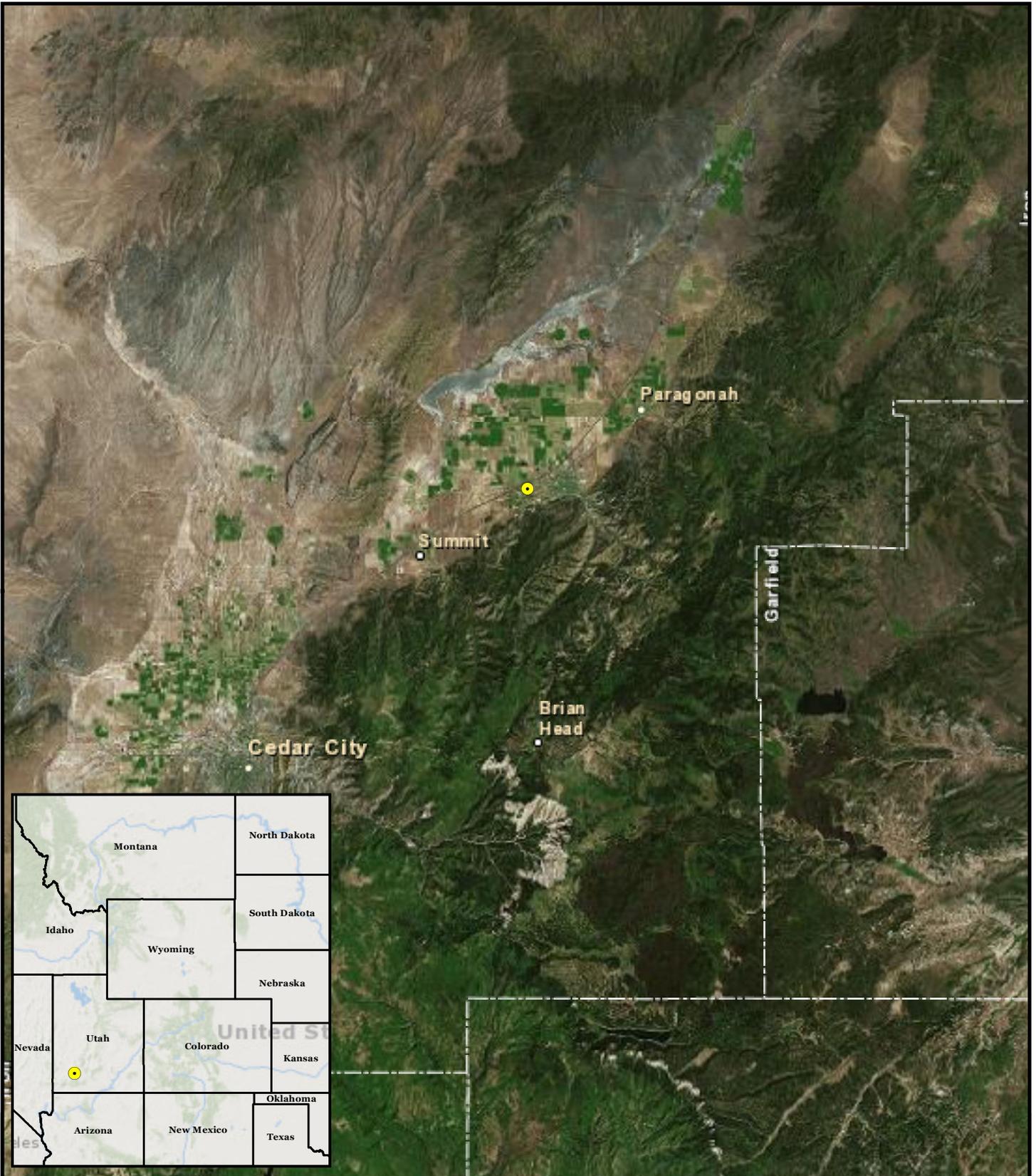
Jeff Bryniarski  
Project Team Lead

Attachment:

- A – Figures
- B – Tables
- C – Sampling and Analysis Plan
- D – Photographic Log
- E – Health and Safety Plan
- F – Laboratory Analytical Data
- G – VIPER Data
- H – Site Logbook

cc: Dave Robinson, Project Manager  
START DCN File

# **Attachment A**



**Legend**

● Site Location



Prepared for:  
U.S. EPA Region 8



Contract No.:  
EP-S8-13-01

TDD:  
1411-06

TO:  
0001

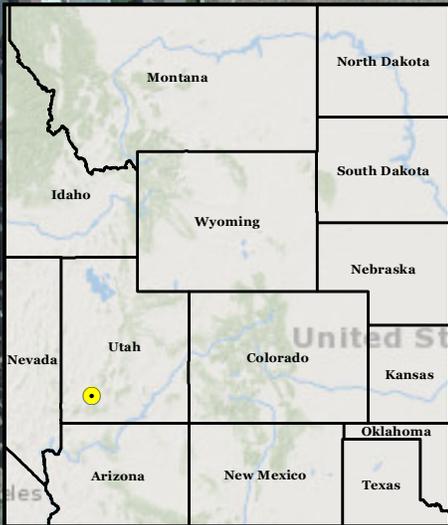
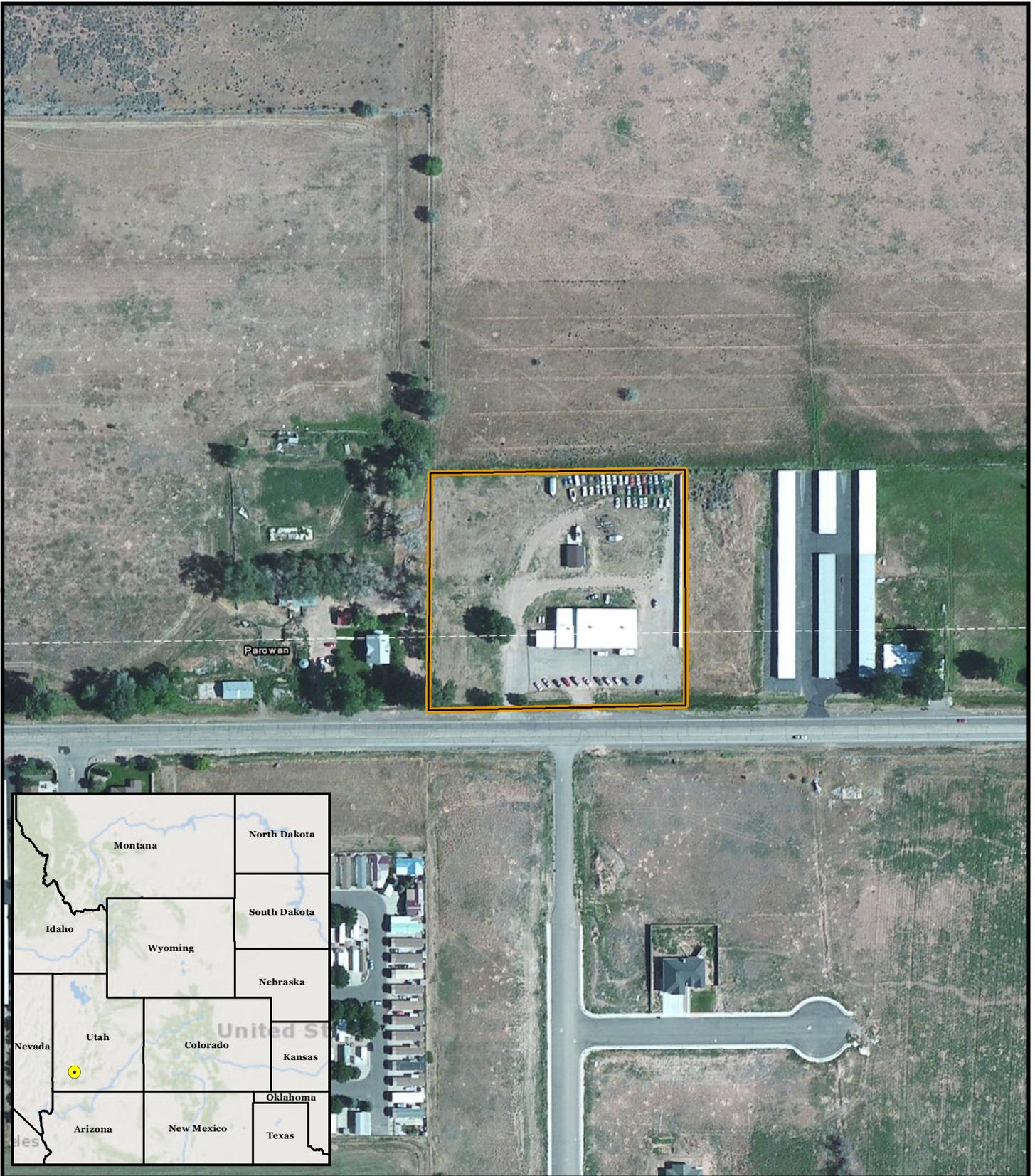


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**FIGURE 1**  
**SITE LOCATION MAP**  
**STONE CASTLE RECYCLING**  
**CITY OF PAROWAN**  
**IRON COUNTY, UTAH**

Date: 1/30/2015



**Legend**

 Site Boundary

0 105 210 420 Feet



Prepared for:  
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TDD:  
1411-06

TO:  
0001



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**FIGURE 2**  
**SITE VICINITY MAP**  
**STONE CASTLE RECYCLING**  
**CITY OF PAROWAN**  
**IRON COUNTY, UTAH**

Date:1/30/2015

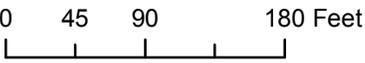


<p><b>Legend</b></p> <p> Burnt Material</p> <p> Debris</p> <p> TV's</p> <p>0 20 40 80 Feet</p> <p></p>	<p>Prepared for: U.S. EPA Region 8</p> <p>Contract No.: EP-S8-13-01</p> <p>TDD: 1411-06</p> <p>TO: 0001</p> 	 <p>Prepared By: Weston Solutions, Inc. START IV</p> <p>Suite 100 1435 Garrison Street Lakewood, CO 80215</p>	<p><b>FIGURE 3</b> <b>WASTE LOCATION MAP</b> <b>STONE CASTLE RECYCLING</b> <b>CITY OF PAROWAN</b> <b>IRON COUNTY, UTAH</b></p> <p>Date:1/30/2015</p>
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**Legend**

-  Air Monitoring Unit
-  Grinder
-  Pugmill
-  Waste Staging Area
-  Waste Treatment Area
-  Waste Sorting Area




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**U.S. EPA Region 8**

Contract No.:  
**EP-S8-13-01**

TDD:  
**1411-06**

TO:  
**0001**

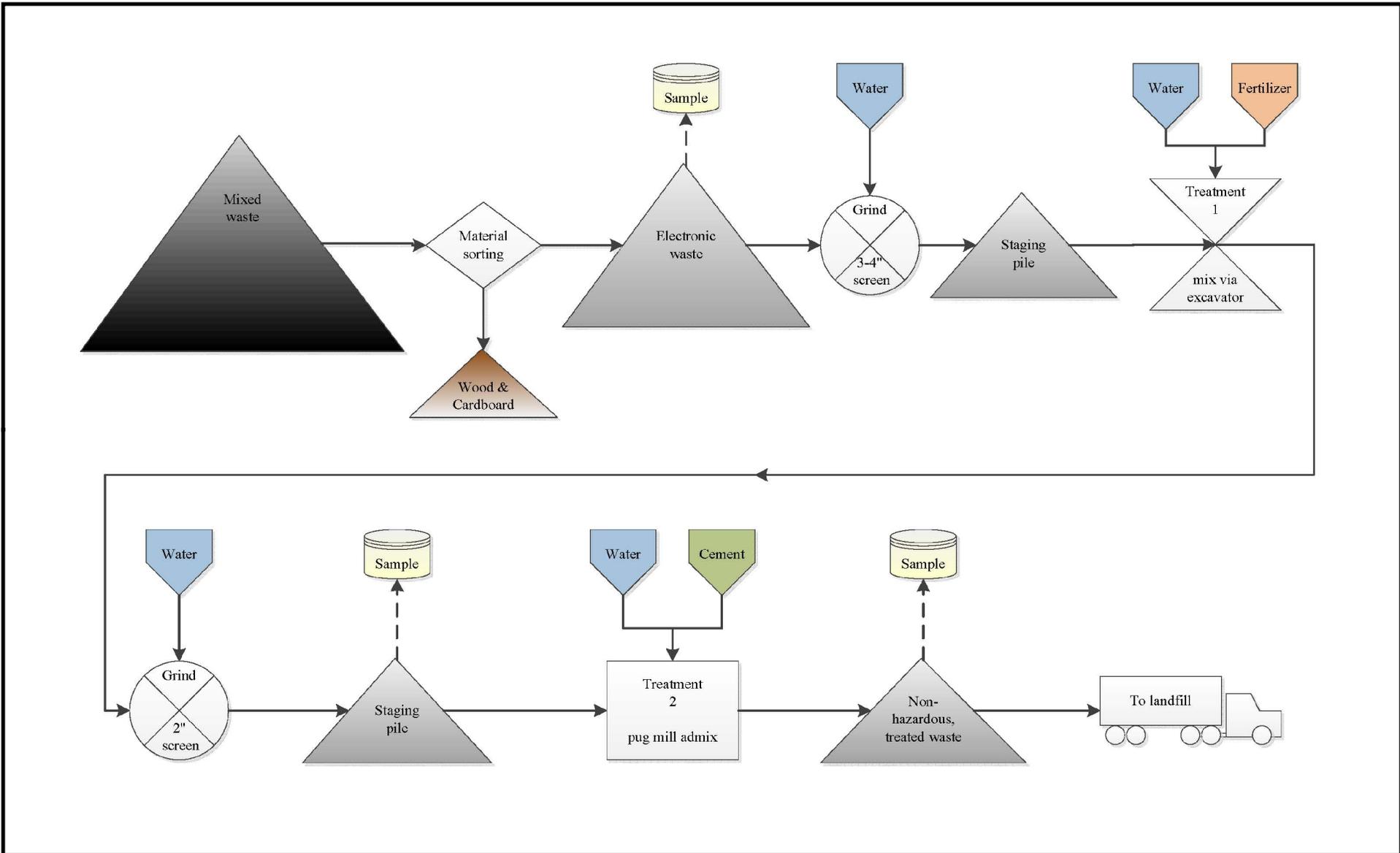



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**FIGURE 4**  
**SITE WASTE**  
**TREATMENT MAP**  
**STONE CASTLE RECYCLING**  
**CITY OF PAROWAN**  
**IRON COUNTY, UTAH**

Date:1/30/2015



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TDD:  
1411-06

TO:  
0001



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**FIGURE 5  
SITE TREATMENT  
PROCESS OVERVIEW  
STONE CASTLE RECYCLING  
CITY OF PAROWAN  
IRON COUNTY, UTAH**

Date: 1/30/2015

Figure 6: Air Monitoring Data LINC229 12/3/14

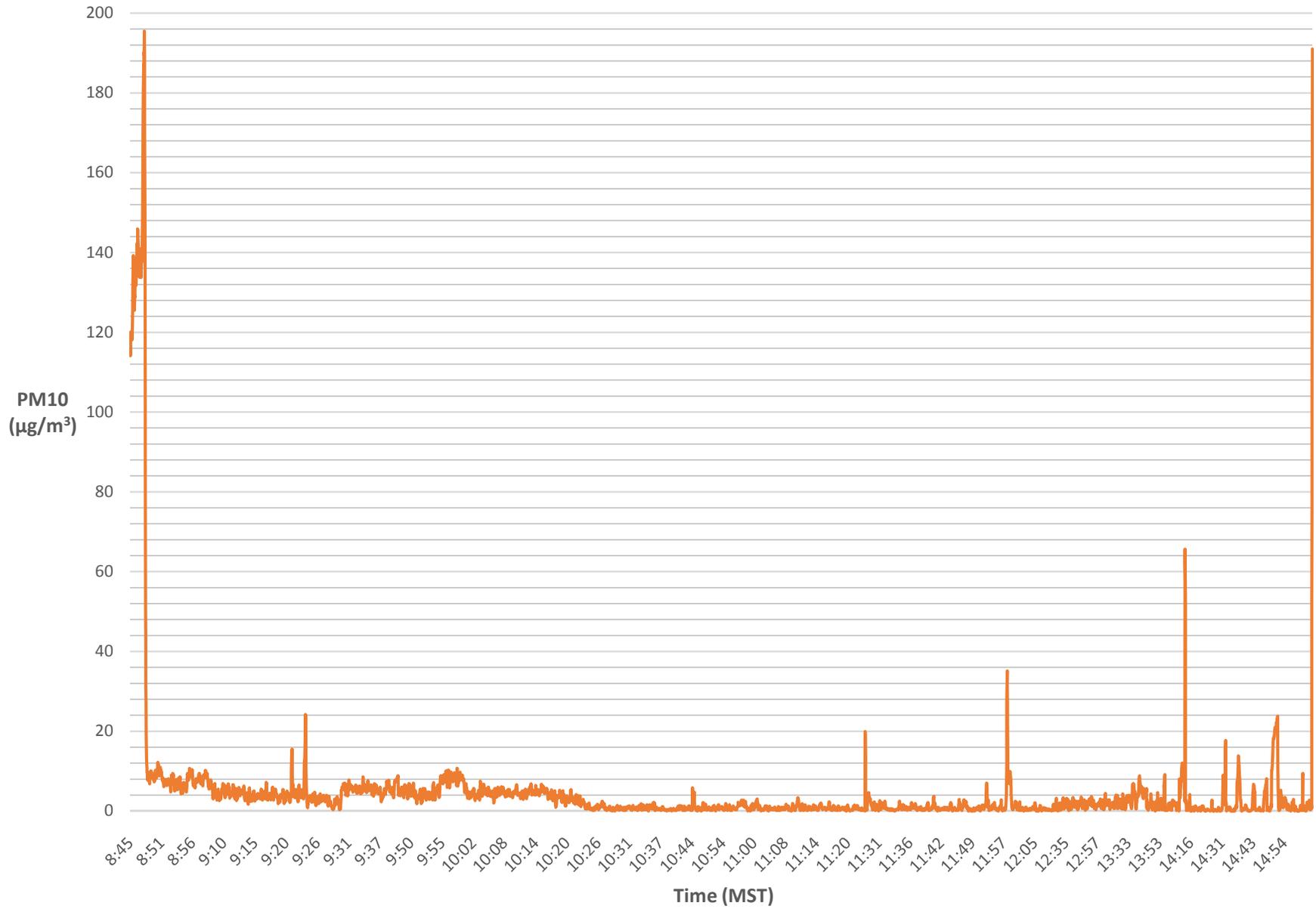


Figure 7: Air Monitoring Data LINC230 12/3/14

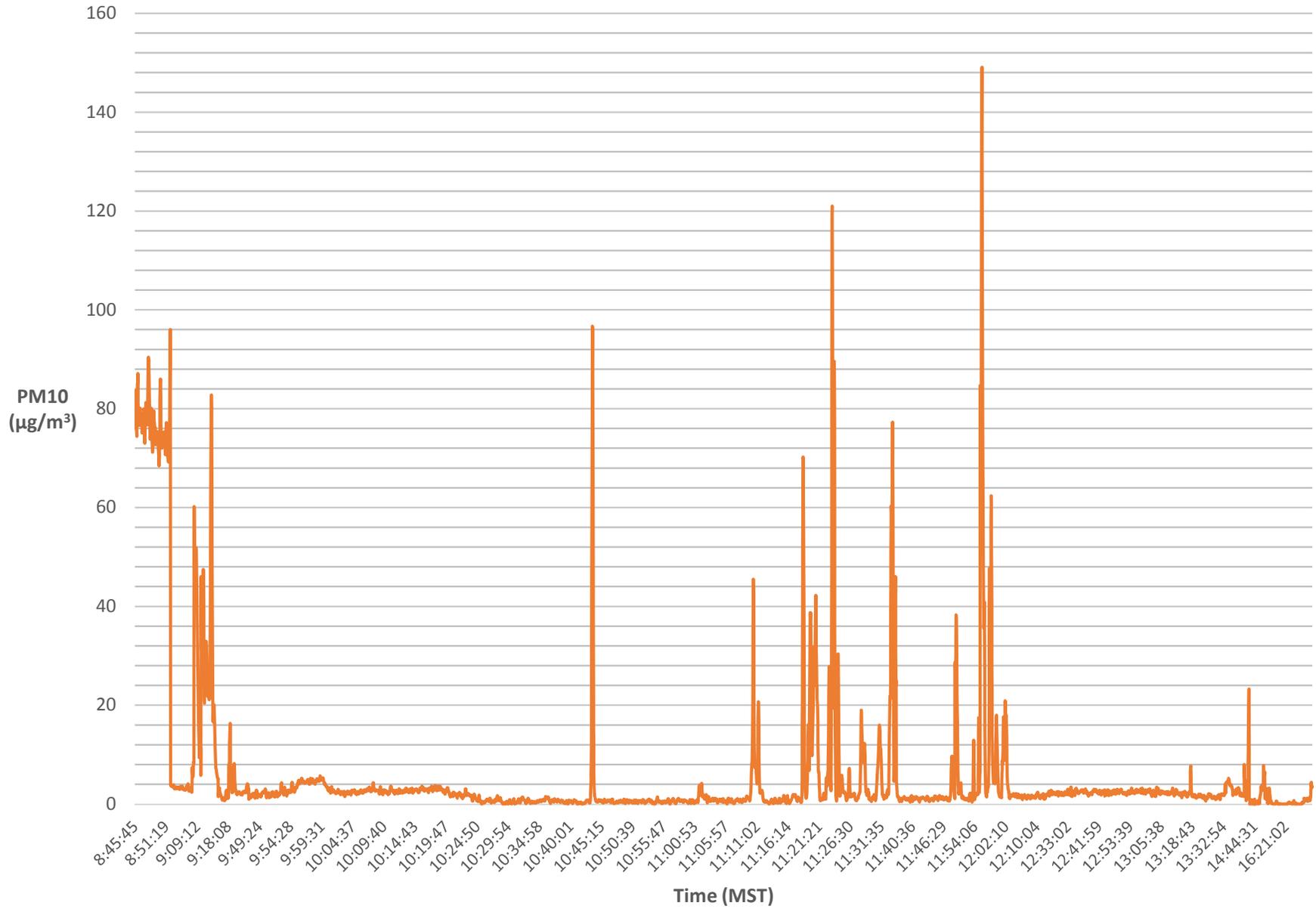


Figure 8: Air Monitoring Data LINC233 12/3/14

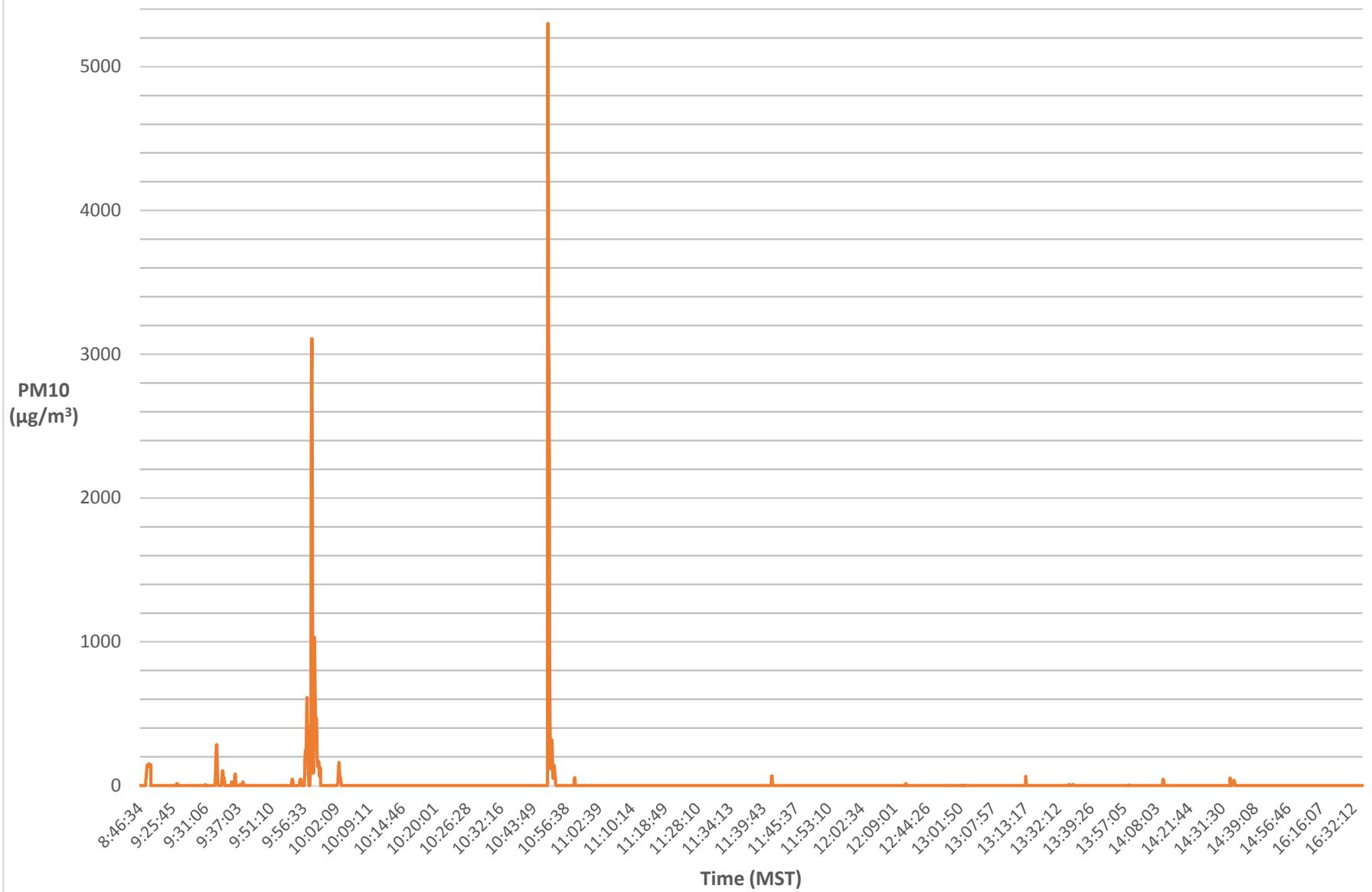


Figure 9: Air Monitoring Data LINC229 12/4/14

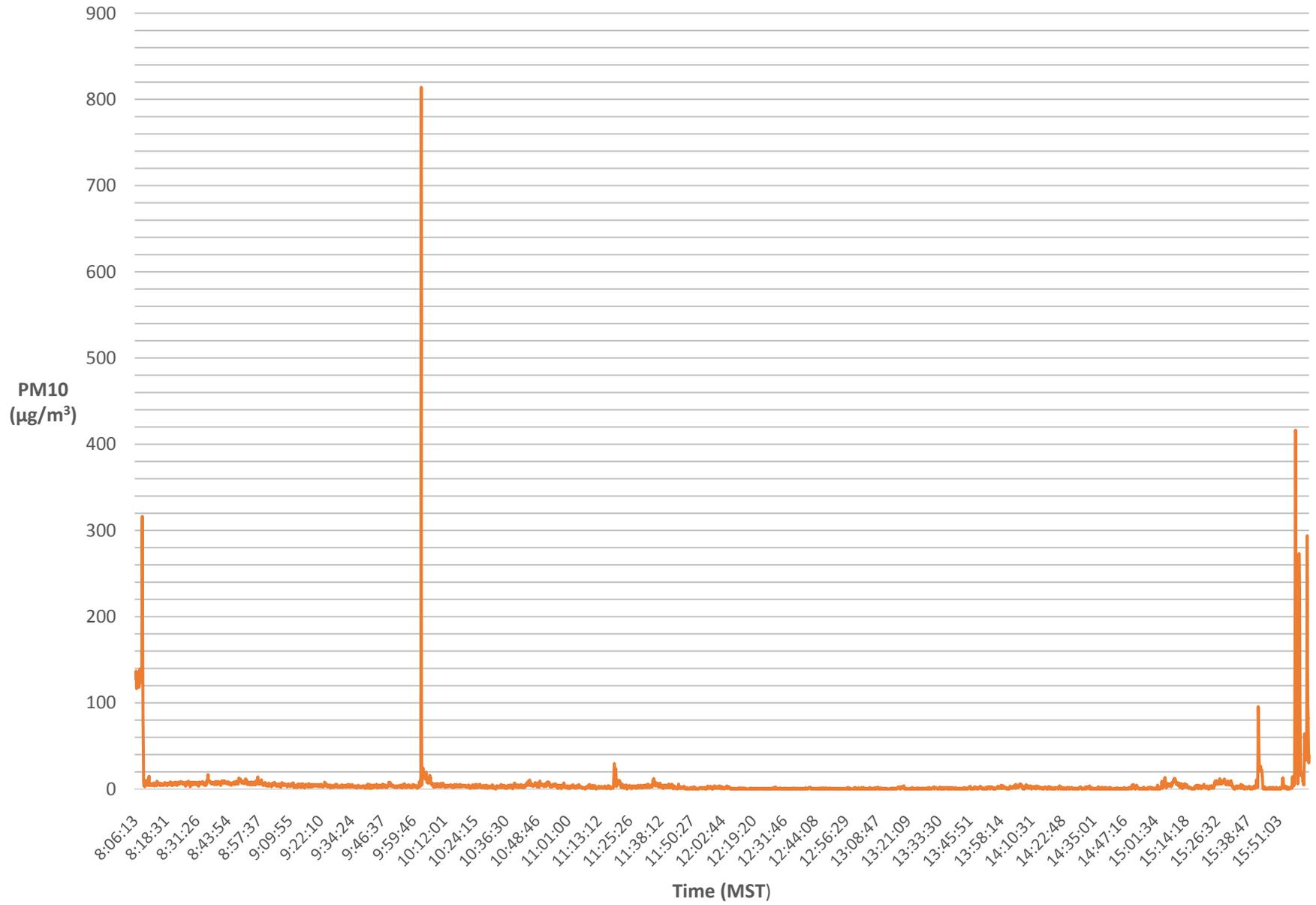


Figure 10: Air Monitoring Data LINC230 12/4/14



Figure 11: Air Monitoring Data LINC233 12/4/14

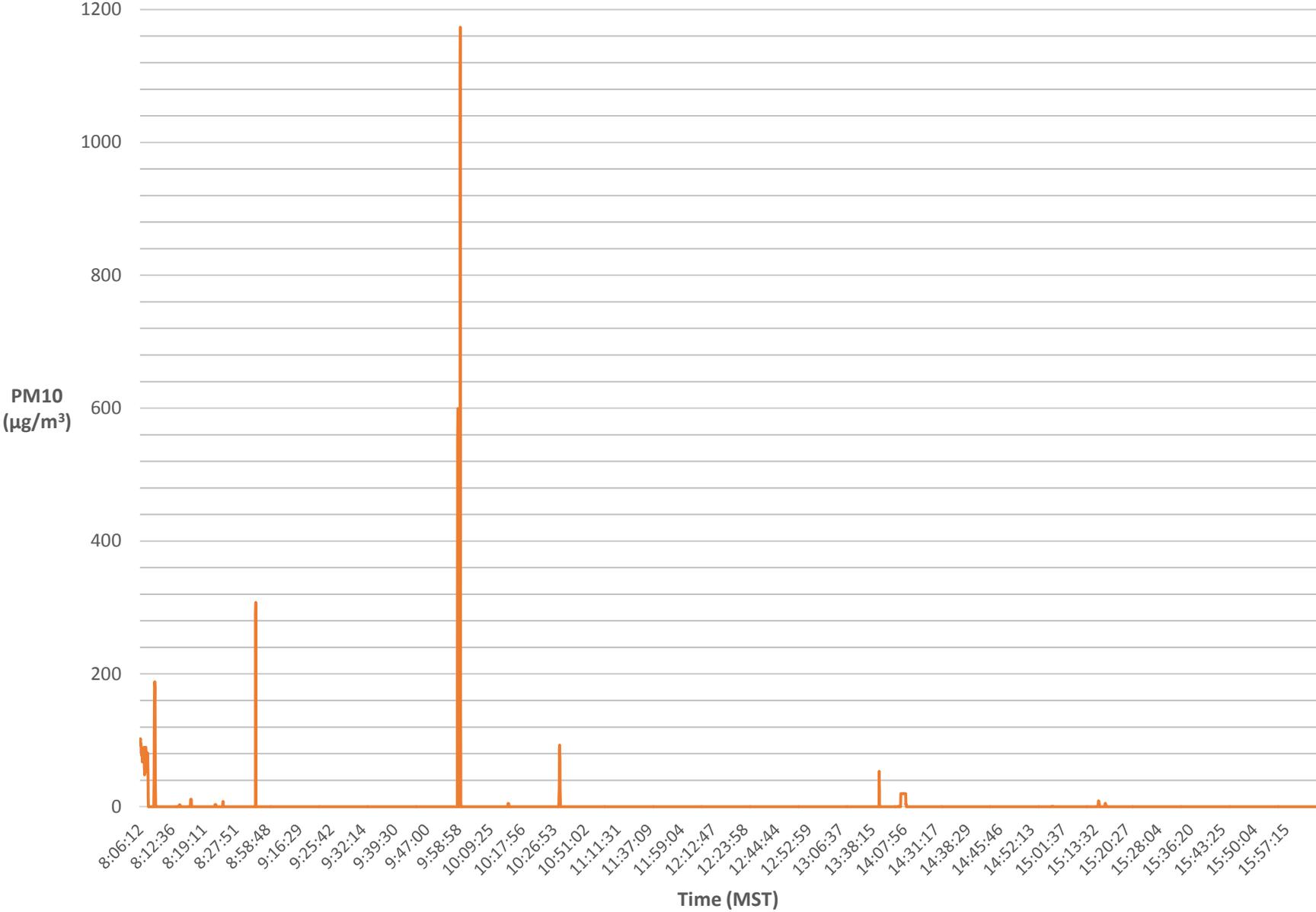


Figure 12: Air Monitoring Data LINC229 12/5/14

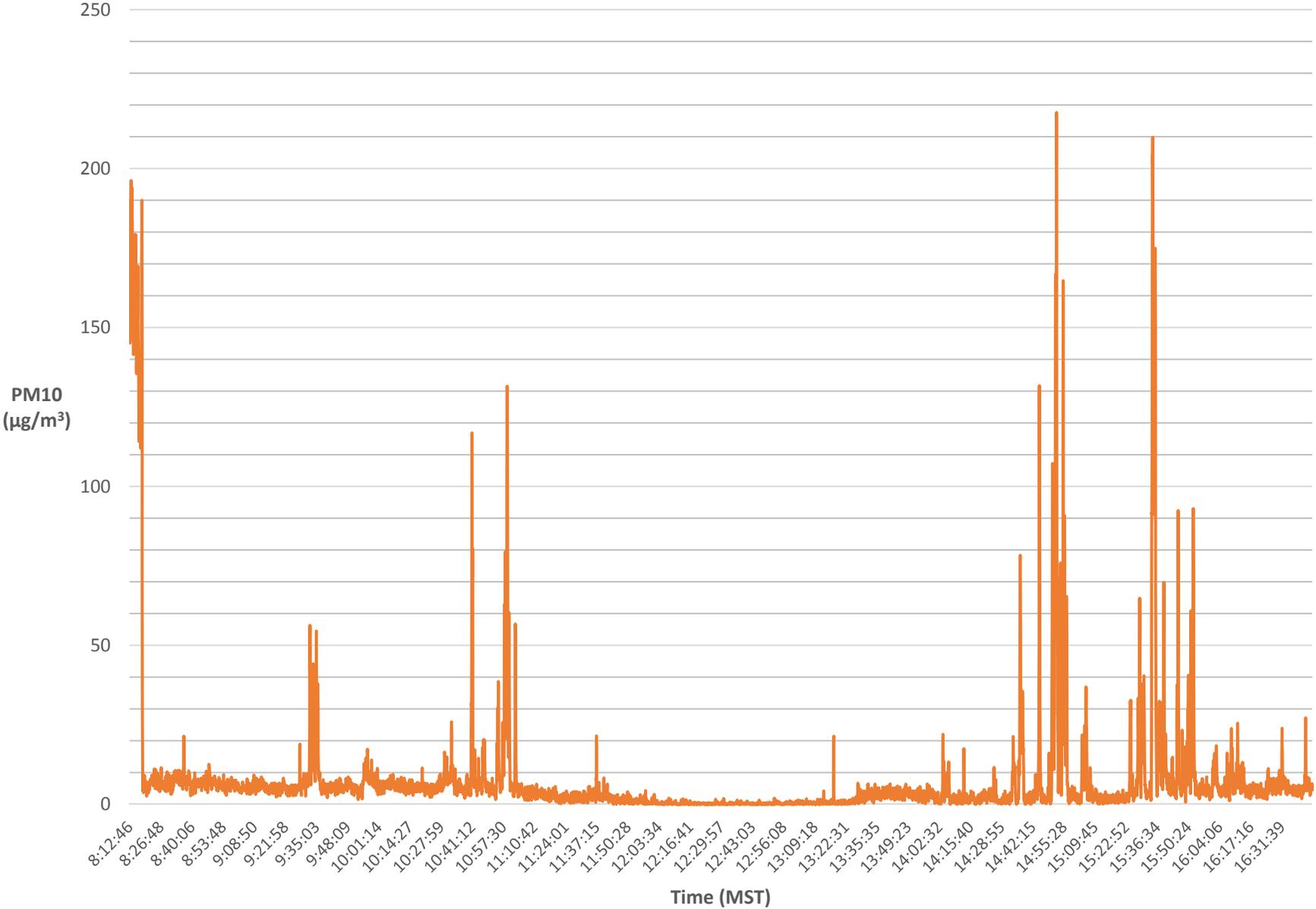


Figure 13: Air Monitoring Data LINC230 12/5/14

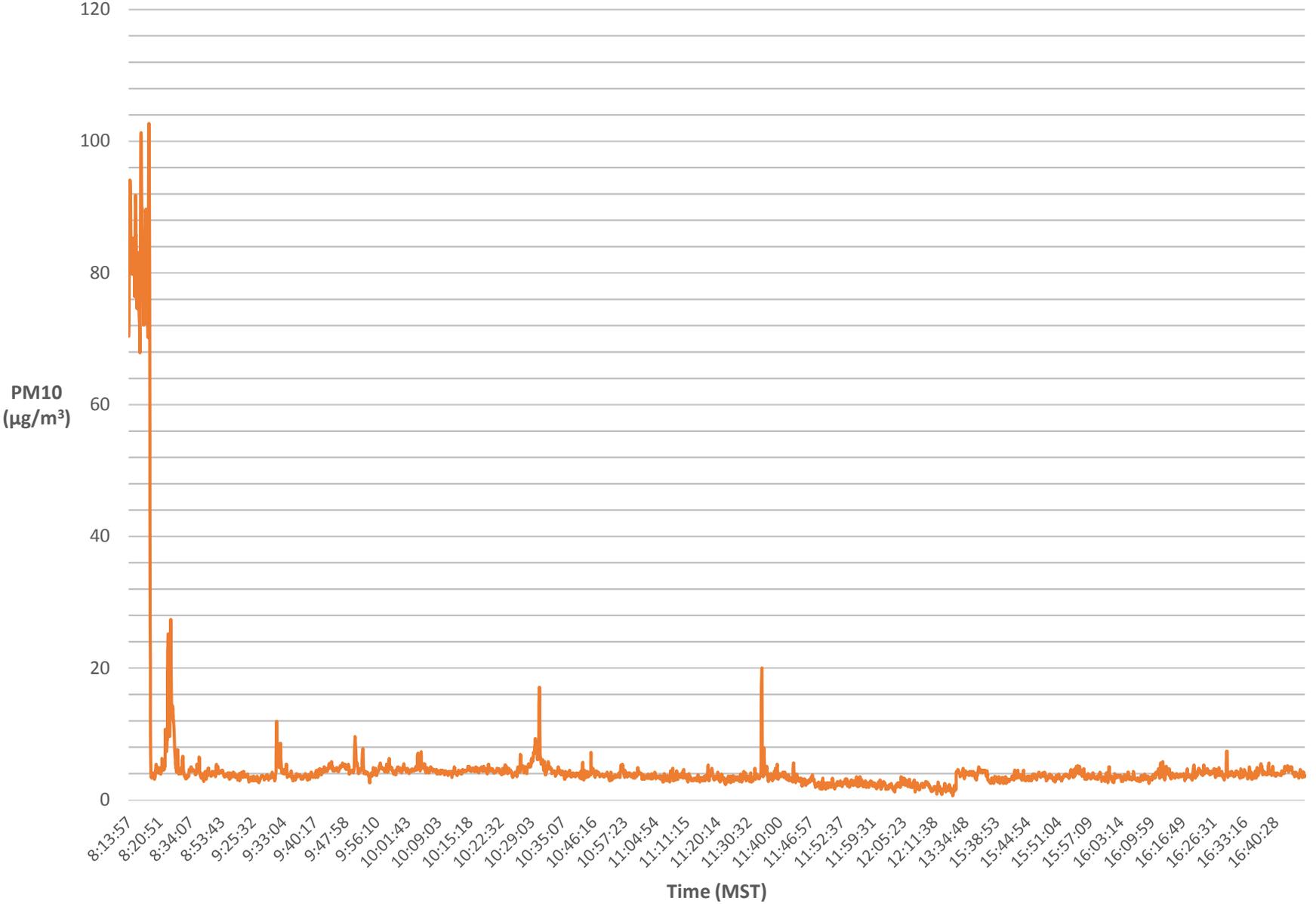


Figure 14: Air Monitoring Data LINC233 12/5/14

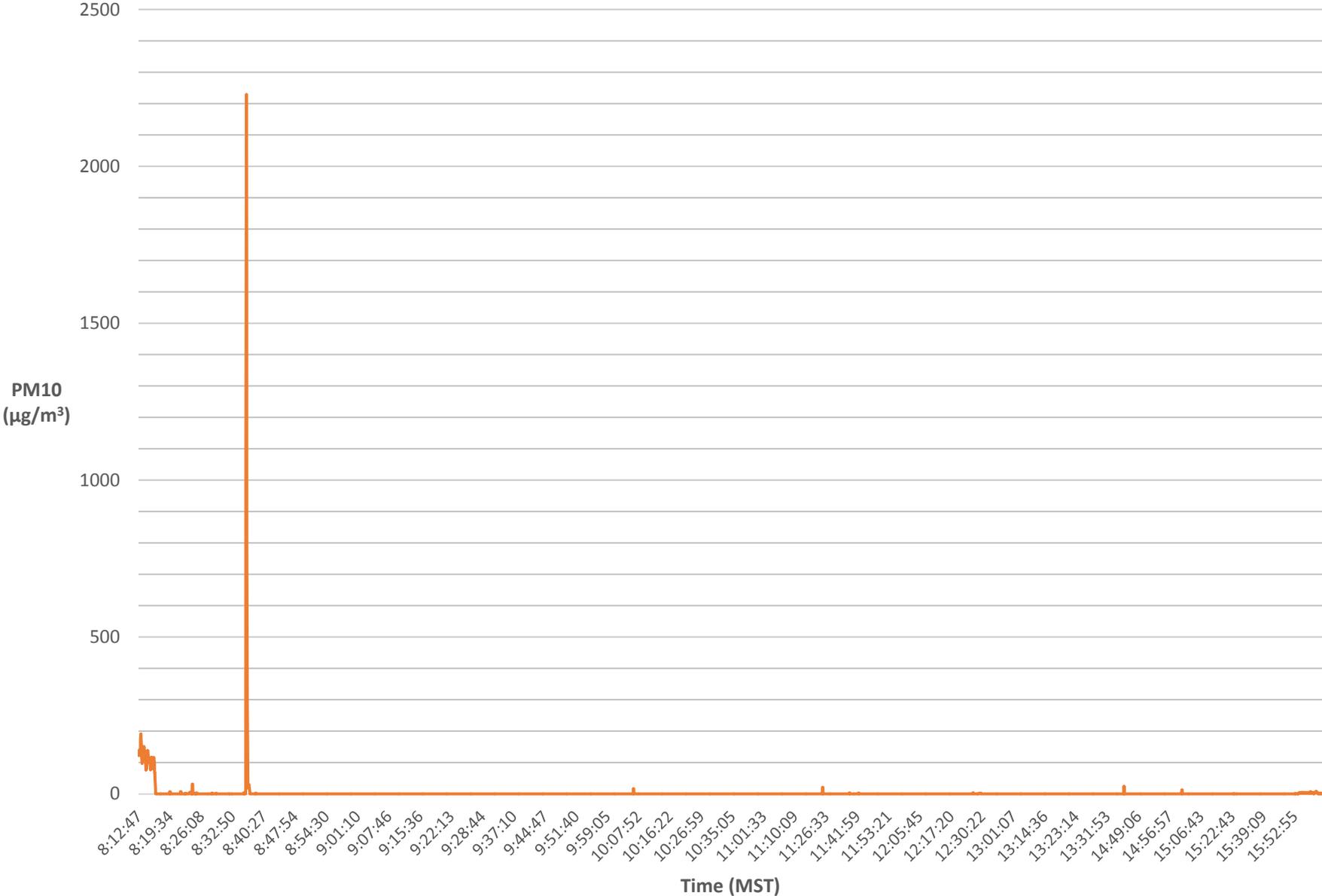


Figure 15: Air Monitoring Data LINC229 12/6/14

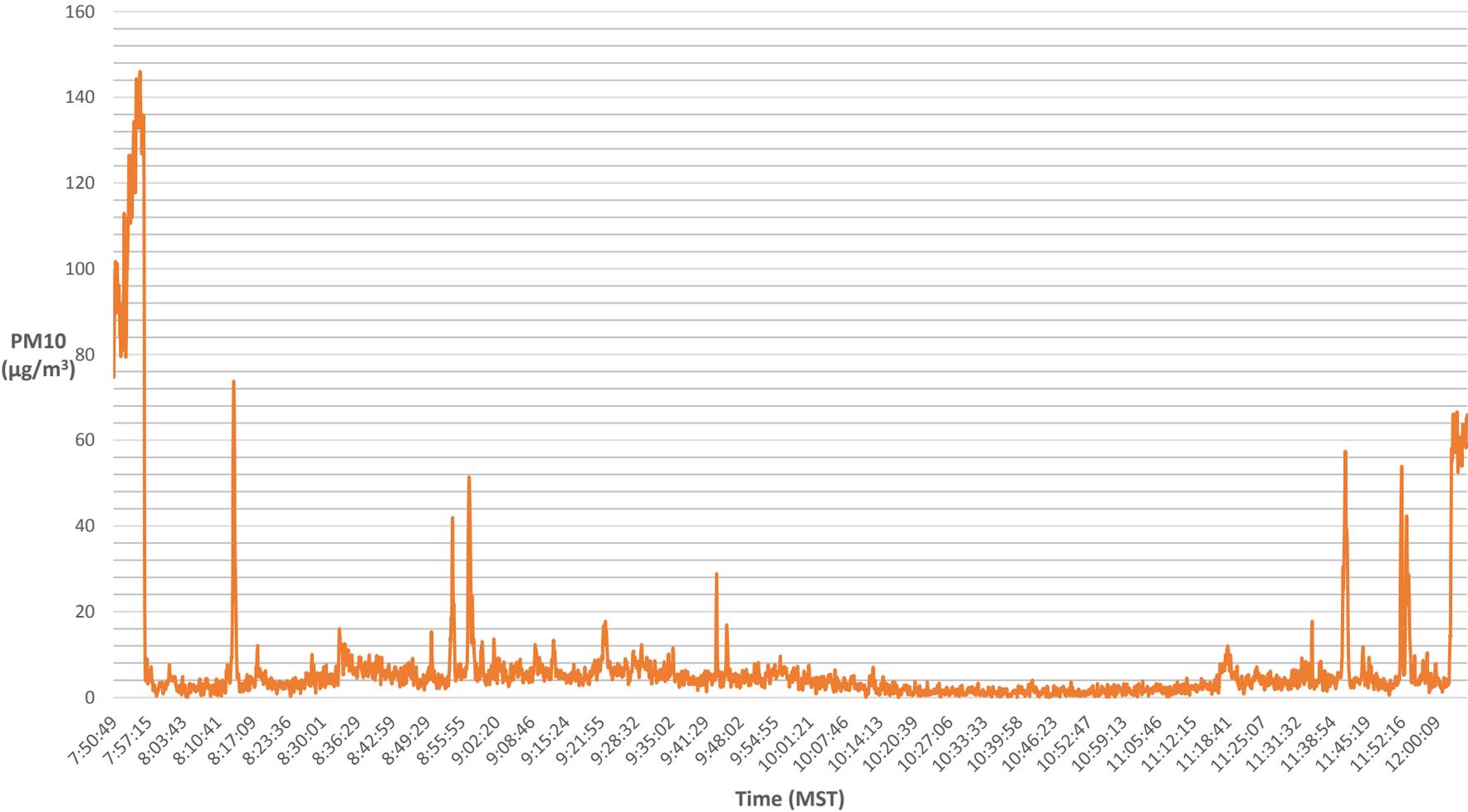


Figure 16: Air Monitoring Data LINC230 12/6/14

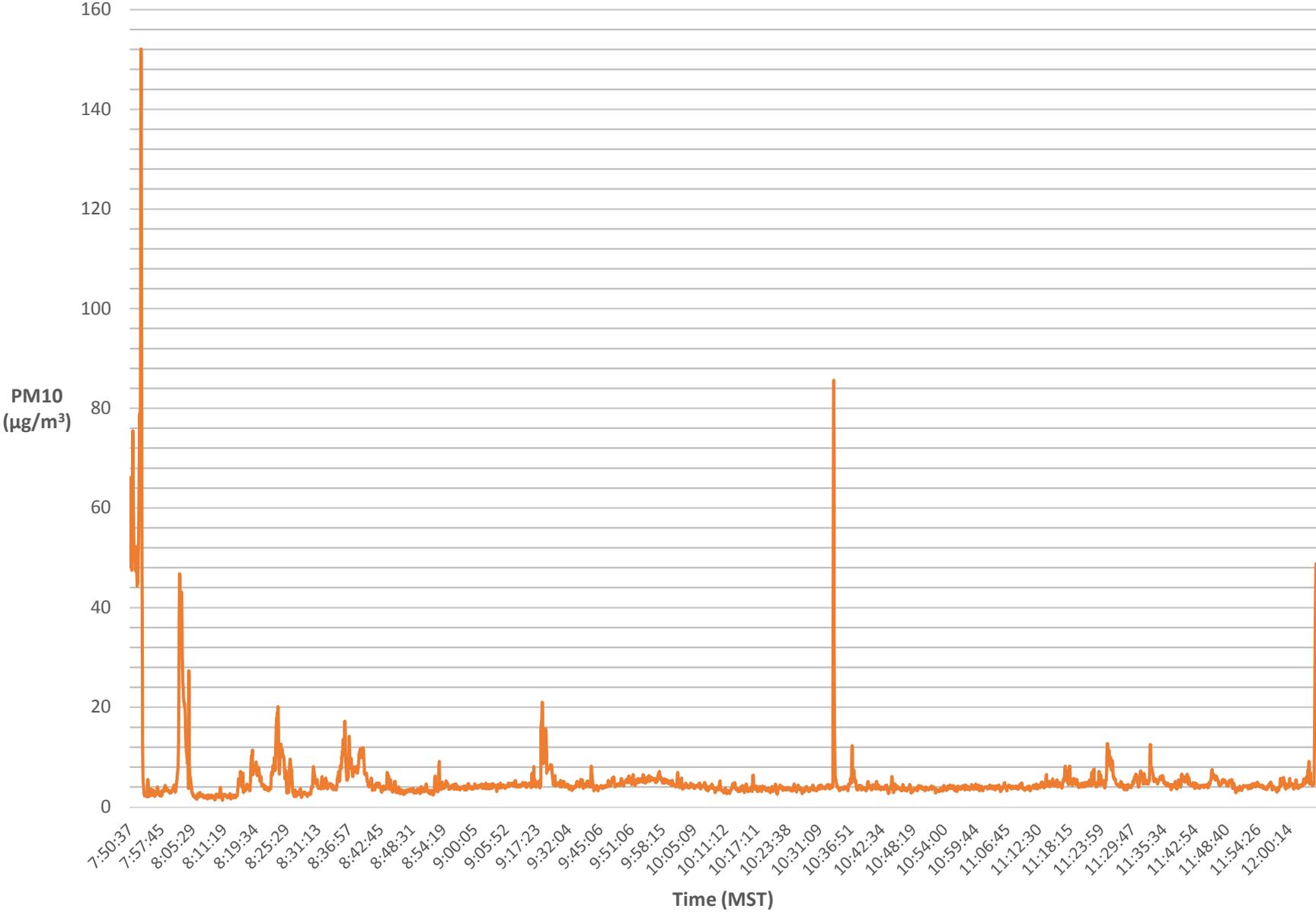


Figure 17: Air Monitoring Data LINC233 12/6/14

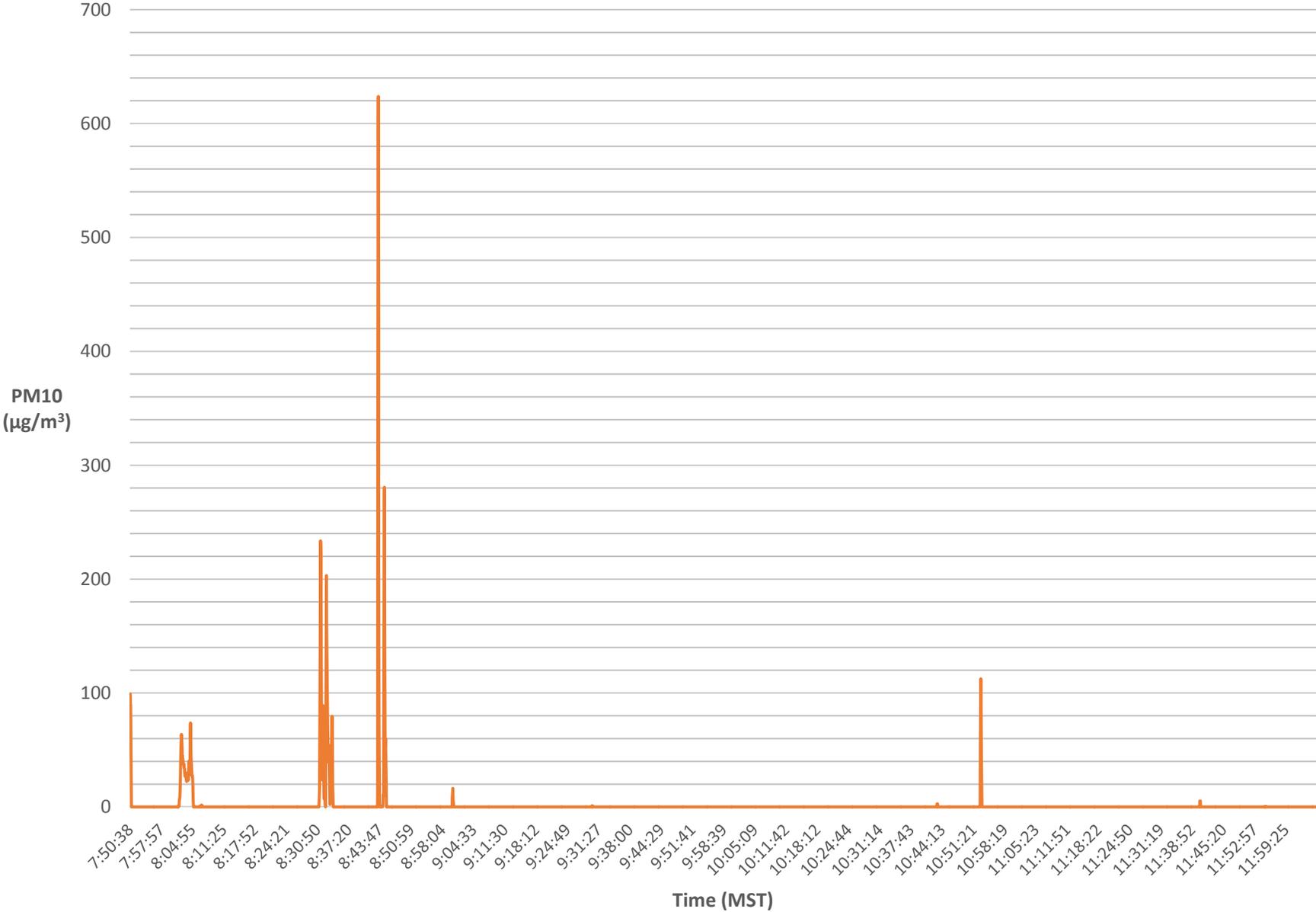


Figure18: Air Monitoring Data LINC229 12/9/14

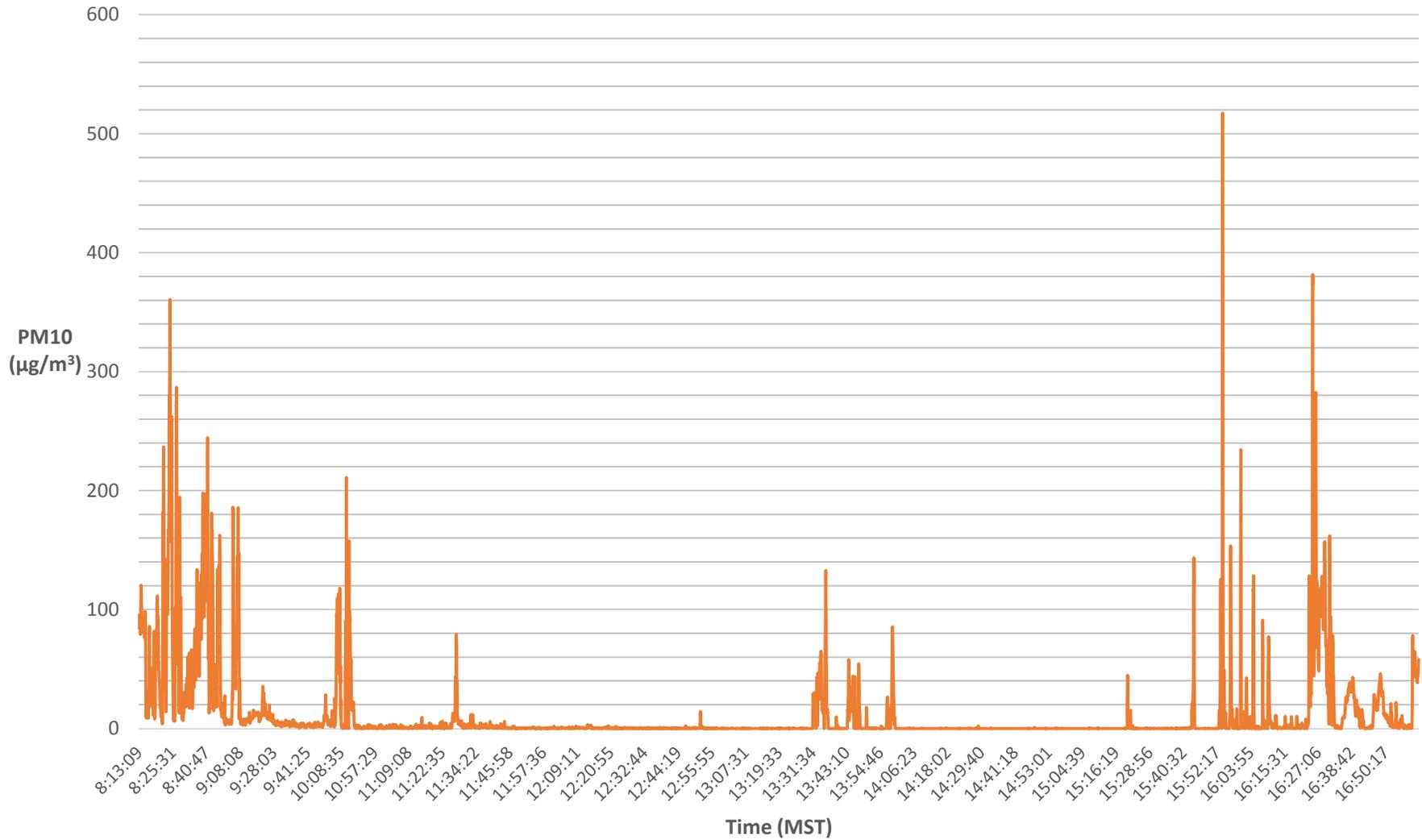


Figure 19: Air Monitoring Data LINC230 12/9/14

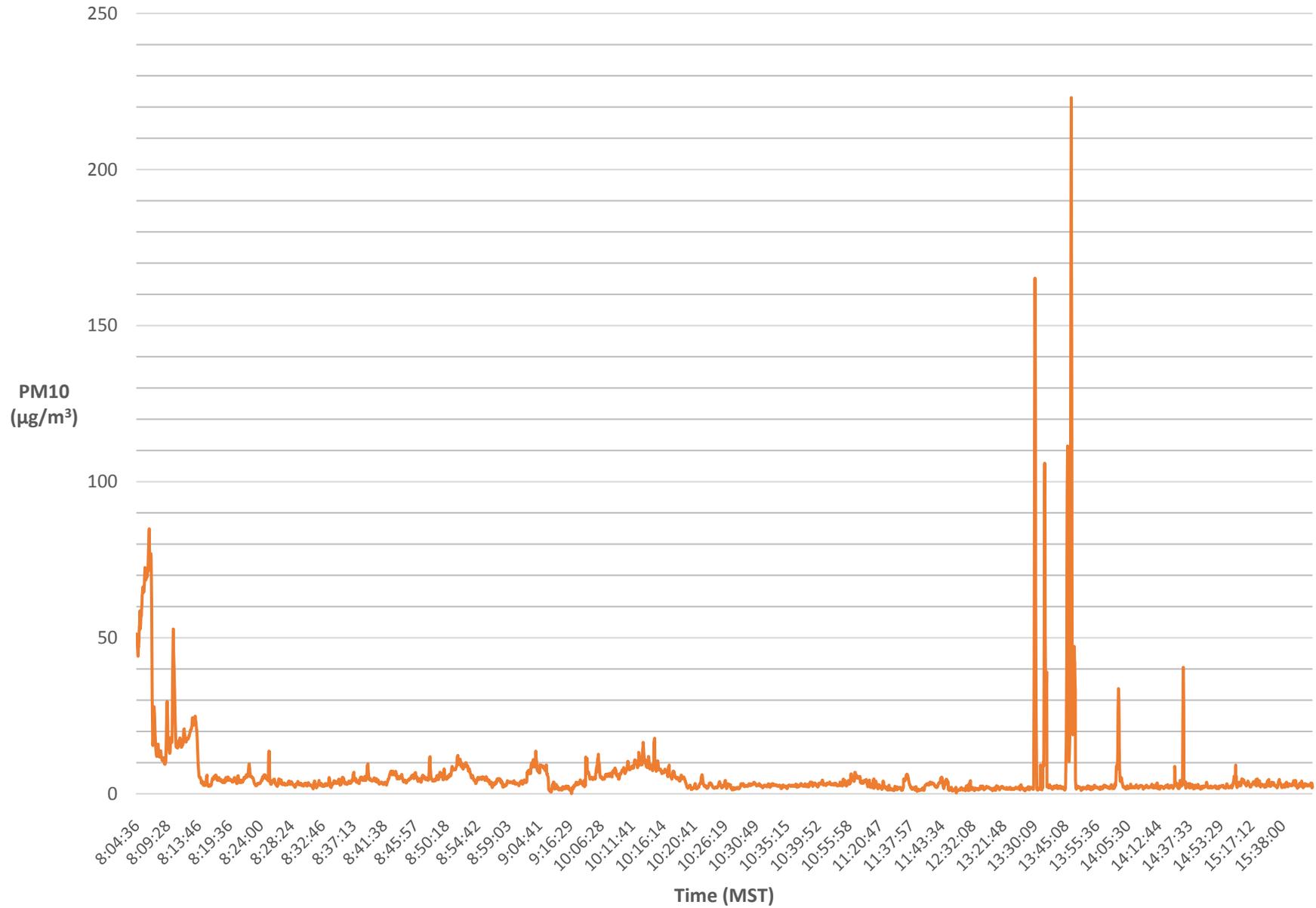


Figure 20: Air Monitoring Data LINC233 12/9/14

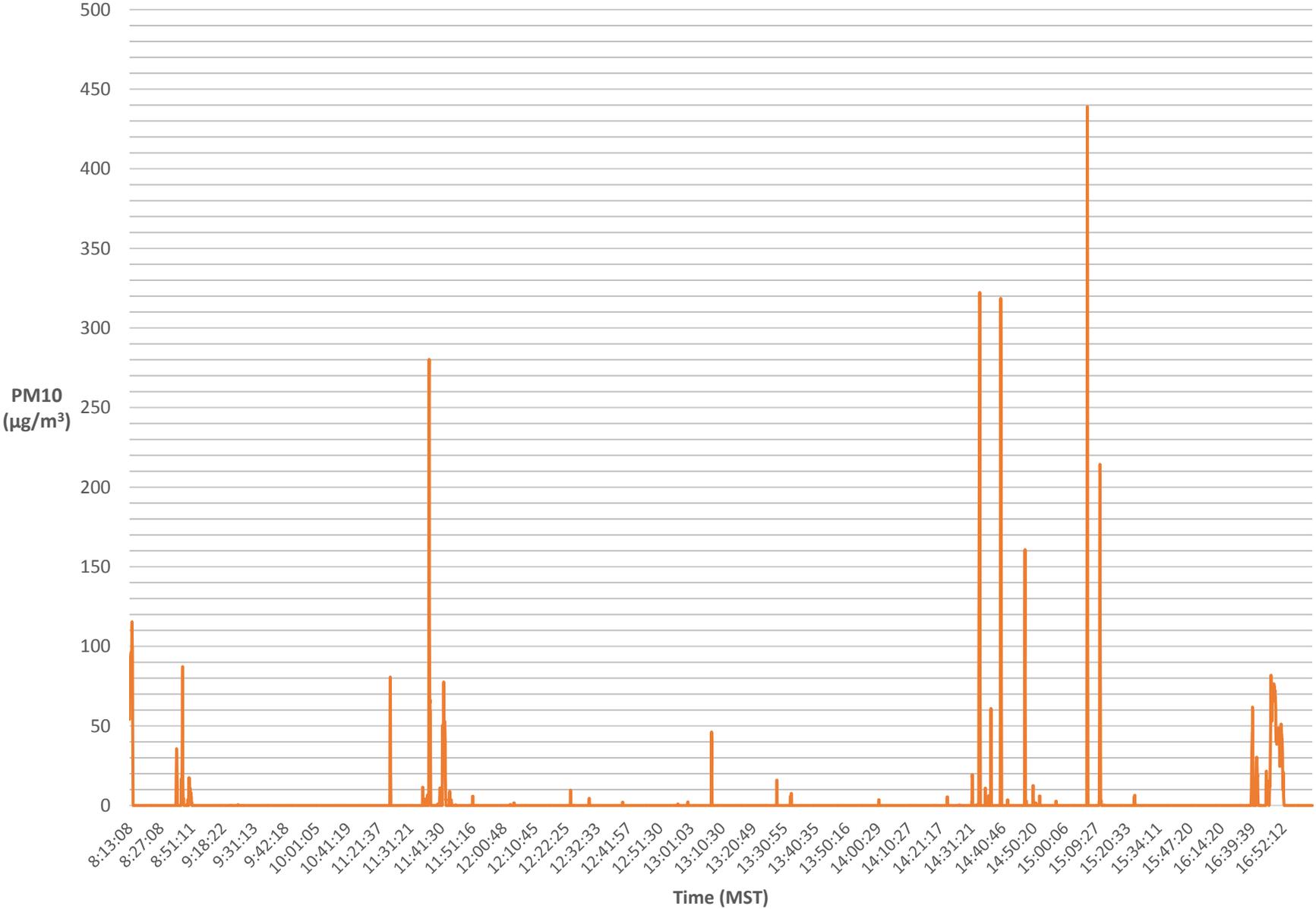


Figure 21: Air Monitoring Data LINC229 12/10/14

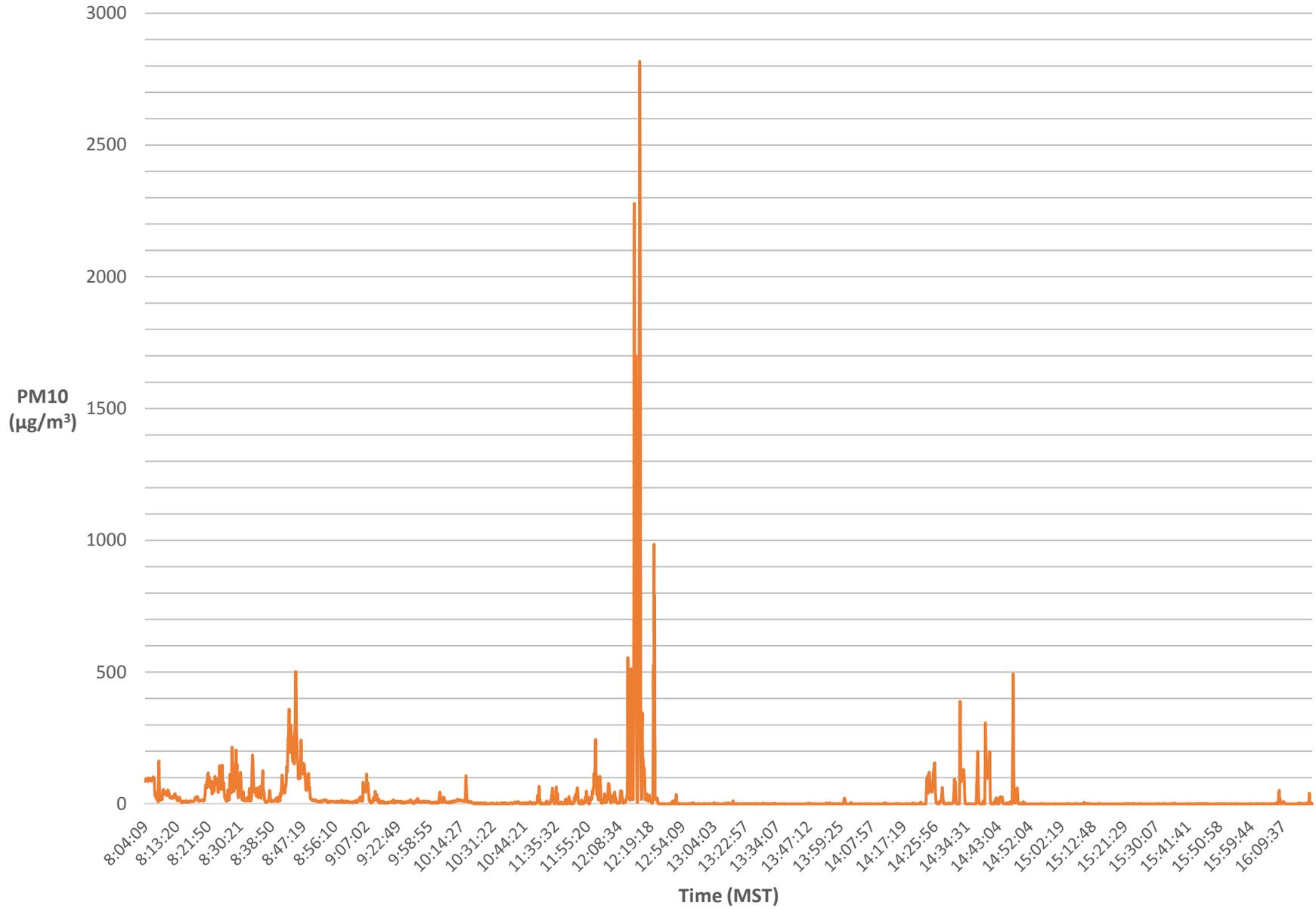


Figure 22: Air Monitoring Data LINC230 12/10/14

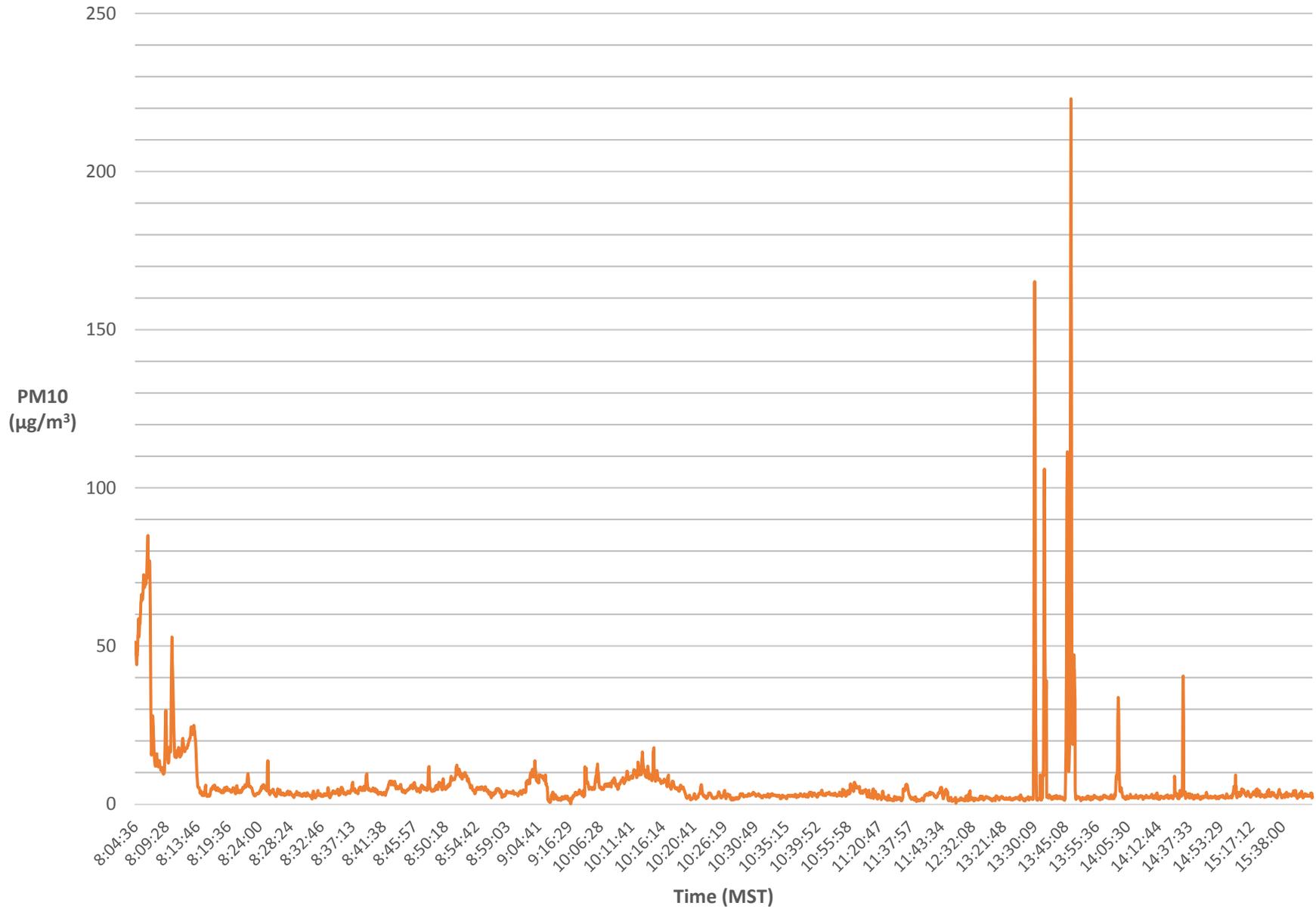


Figure 23: Air Monitoring Data LINC233 12/10/14

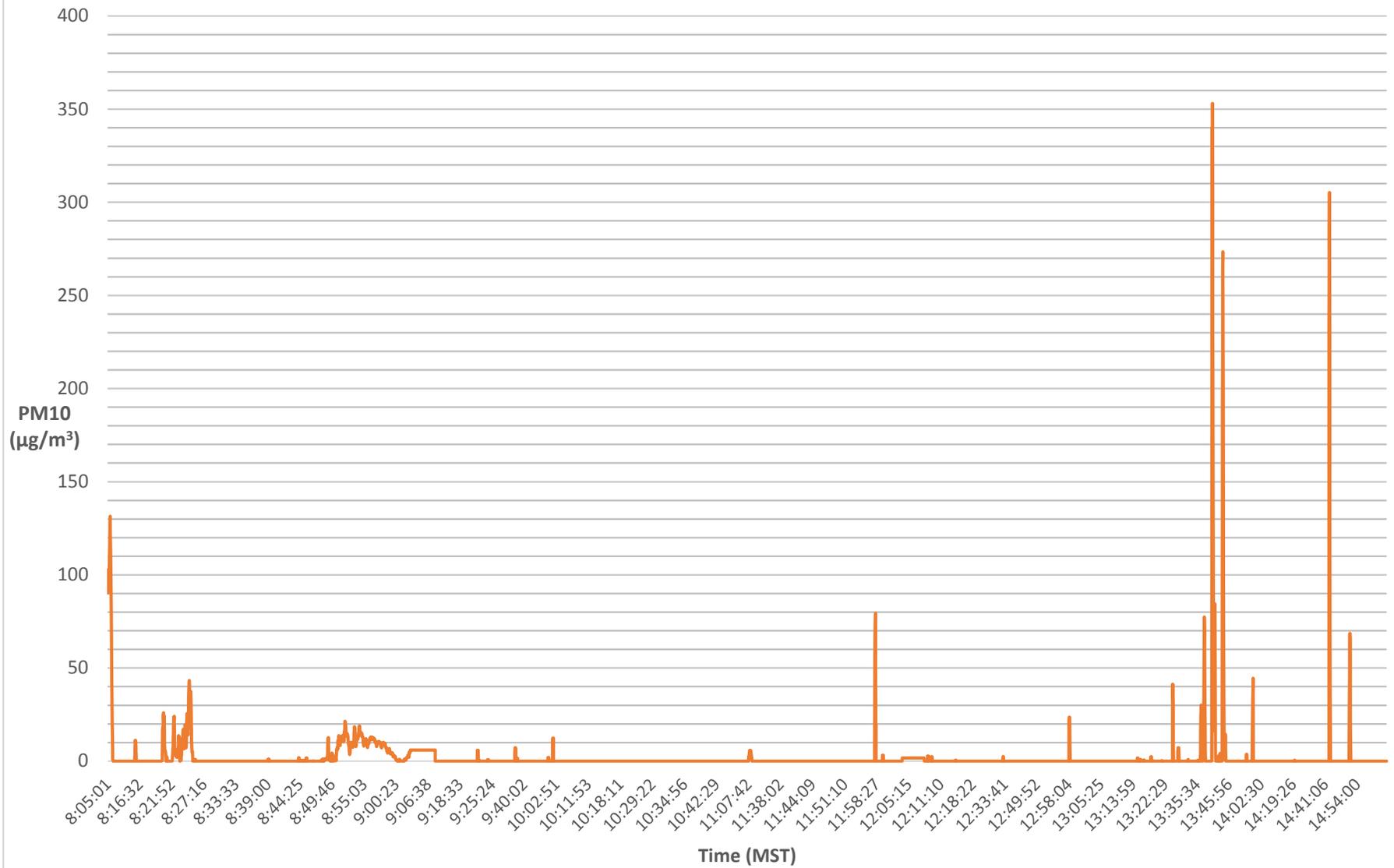


Figure 24: Air Monitoring Data LINC229 12/11/14

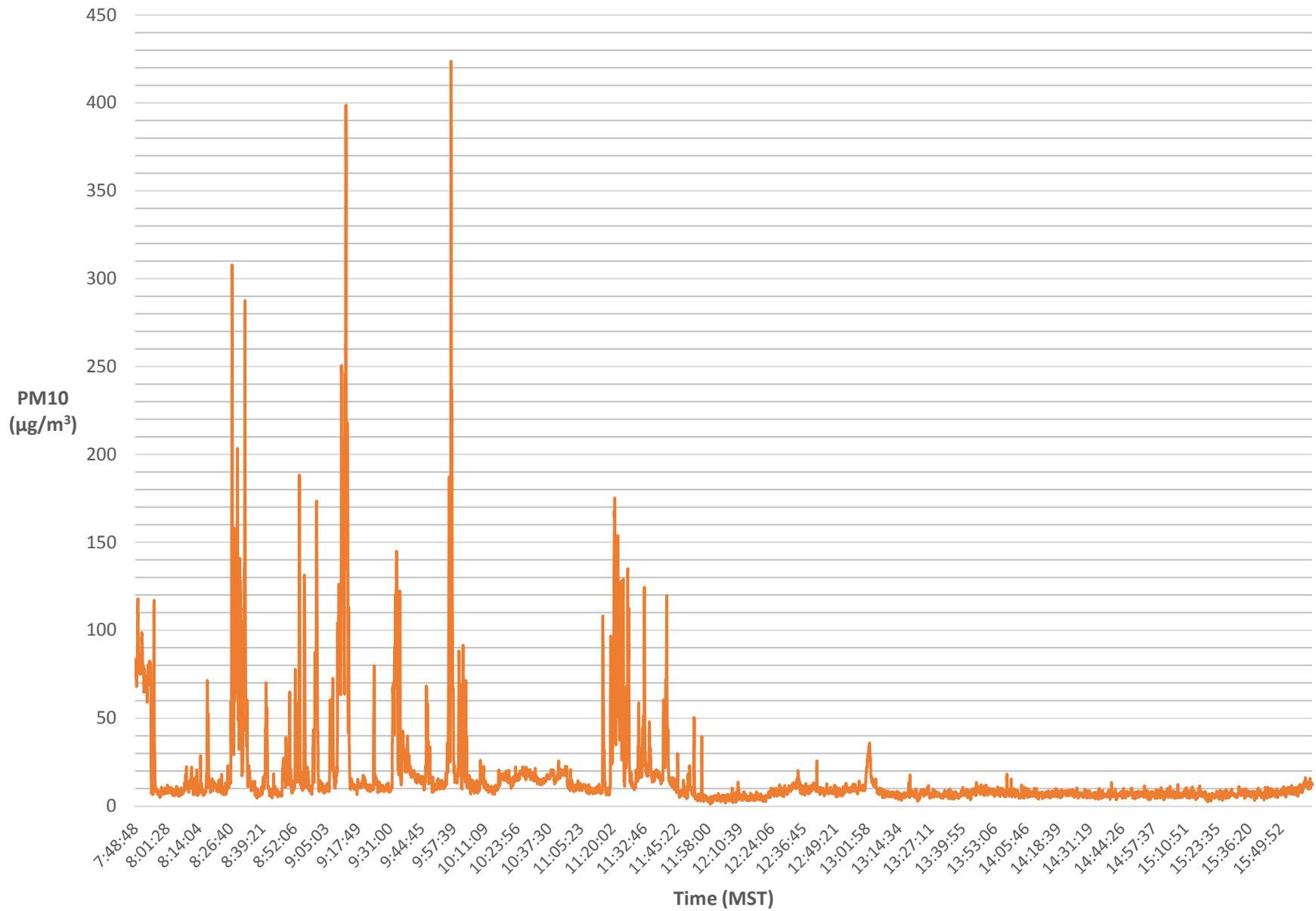


Figure 25: Air Monitoring Data LINC230 12/11/14

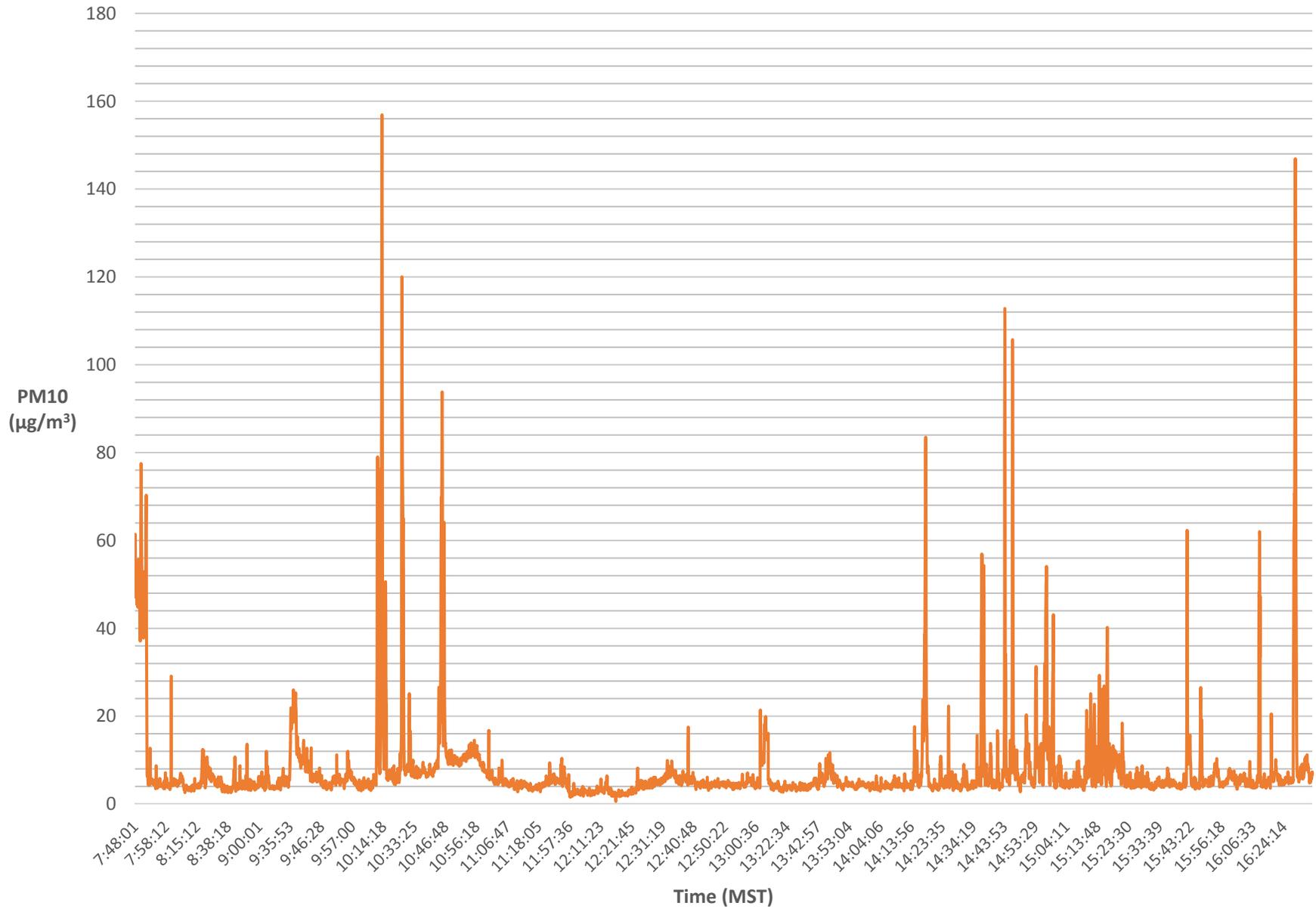
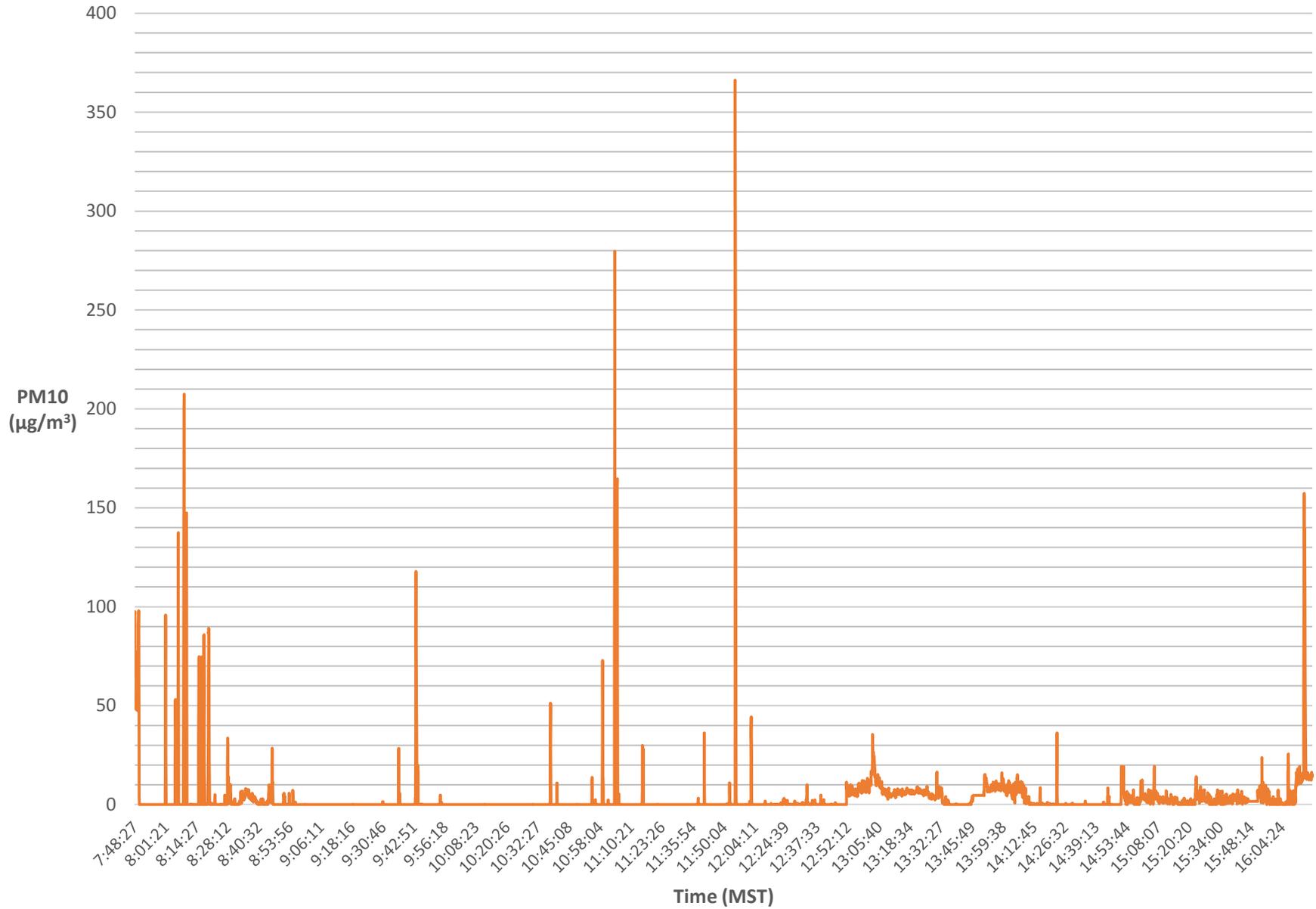


Figure 26: Air Monitoring Data LINC233 12/11/14



## **Attachment B**

**Table 1**  
**Organization of the Response**  
**Stone Castle Recycling Removal Site**  
**Parowan, Iron County, Utah**

Agencies or Parties Involved	Contact	Description of Participation
U.S. EPA – Region VIII Division of Superfund Emergency Response Branch 1595 Wynkoop Street Denver, CO 80202 (303) 312-6146	Steven Merritt	Federal OSC responsible for overall project oversight and success.
Weston Solutions, Inc. 1435 Garrison St Suite 100 Lakewood, CO 80215 (303) 729-6106	Jeff Bryniarski	WESTON START project team lead responsible for site removal assessment, removal oversight support, documentation, air monitoring, sampling, and START-related cost-tracking.
Environmental Restoration, LLC 2140 N. Redwood Road Salt Lake City, UT 84116 (801) 746-6136	Byron Hartman	Response manager responsible for direction of daily ERRS activity. Provided personnel and equipment necessary for removal and coordinated transportation and disposal of waste streams. Also tracked ERRS-related costs.
State of Utah Department of Environmental Quality Division of Solid & Hazardous Waste 195 N. 1950 West P.O. Box 144880 Salt Lake City, UT 84114 (801) 536-0248	Patrick Sheehan	UDEQ project manager who participated in initial assessment of the Site and reporting of the removal progress.

ERRS – Emergency and Rapid Response Services

OSC – On-Scene Coordinator

START – Superfund Technical Assessment and Response Team

UDEQ – State of Utah Department of Environmental Quality

U.S. EPA – United States Environmental Protection Agency

Table 2  
Stone Castle OU1 Removal  
Air Monitoring Data  
12/3/14 to 12/11/14

Date	LINC <sup>(1)</sup> ID	Predominant Wind Direction <sup>(2)</sup>	Location	PM10 Data, $\mu\text{g}/\text{m}^3$ <sup>(3)</sup>		
				Minimum	Maximum	Average <sup>(4)</sup>
12/3/2014	229	Southwest	Northwest Corner	0.0	196	1.6
	230	Southwest	West Perimeter	0.0	149	1.9
	233	Southwest	South Perimeter	0.0	5,301	1.2
12/4/2014	229	Southwest	Northwest Corner	0.0	814	1.8
	230	Southwest	West Perimeter	0.0	93	1.0
	233	Southwest	South Perimeter	0.0	1,173	1.1
12/5/2014	229	Southwest	Northeast Corner	0.0	218	2.9
	230	Southwest	West Perimeter	0.6	103	3.9
	233	Southwest	South Perimeter	0.0	2,229	1.3
12/6/2014	229	Northwest	Northeast Corner	0.0	146	3.7
	230	Northwest	West Perimeter	1.3	152	4.5
	233	Northwest	South Perimeter	0.0	624	1.1
12/9/2014	229	North	Northeast Corner	0.0	517	1.7
	230	North	West Perimeter	0.1	223	3.7
	233	North	South Perimeter	0.0	439	1.2
12/10/2014	229	South	Northeast Corner	0.0	2,817	2.3
	230	South	West Perimeter	0.1	223	3.7
	233	South	South Perimeter	0.0	353	1.3
12/11/2014	229	South	Northeast Corner	1.1	424	10.9
	230	South	West Perimeter	0.6	157	5.8
	233	South	South Perimeter	0.0	366	1.6

<sup>(1)</sup> Lifeline Interoperable Network Communicator

<sup>(2)</sup> From daily NOAA data at Cedar City, UT Airport

<sup>(3)</sup> Micrograms per Cubic Meter of Air

<sup>(4)</sup> Geometric Mean of the set of results

Table 3  
 Stone Castle OU1 Removal  
 Air Sampling Results  
 12/09/14

Sample ID	Data Ram ID	LINC <sup>(1)</sup> ID	Site Location <sup>(2)</sup>	Air Volume (Liters)	Analyte	Result	
						µg/sample <sup>(3)</sup>	mg/m <sup>3</sup> <sup>(4)</sup>
SCOU1A01	DR 662	233	South Perimeter	960	Arsenic	<2.5	<0.0026
					Lead	<1.3	<0.0013
SCOU1A02	DR 661	229	Northeast Corner	960	Arsenic	<2.5	<0.0026
					Lead	<1.3	<0.0013
SCOU1A03	DR 495	230	West Perimeter	960	Arsenic	<2.5	<0.0026
					Lead	<1.3	<0.0013
SCOU1A04	NA <sup>(5)</sup>	NA	Field Blank	NA	Arsenic	<2.5	<0.0026
					Lead	<1.3	<0.0013

Table 4  
 Stone Castle OU1 Removal  
 Waste Sampling Results  
 12/10/14 and 12/12/14

Analysis Method - SW 6010C						
Analyte	Units	EPA Limit	Sample ID			
			SCOU1W05	SCOU1W06	SCOU1W07	SCOU1W08
Arsenic	mg/L	5.0	ND	ND	ND	ND
Barium	mg/L	100.0	2.37	0.516	0.0542	0.145
Cadmium	mg/L	1.0	0.0514	0.422	ND	0.0134
Chromium	mg/L	5.0	ND	0.0442	ND	ND
Lead	mg/L	5.0	7.88	1.33	ND	ND
Mercury	mg/L	0.2	ND	0.00033	ND	ND
Selenium	mg/L	1.0	ND	ND	ND	ND
Silver	mg/L	5.0	ND	ND	ND	ND
Percent Moisture	%	--	8.2	12.7	20.1	17.9

Notes:

mg/L- milligram per liter

µg/g - microgram per gram

ND - Not detected at the method detection limit

**Analyte exceeds U.S. EPA regulatory action levels**

Analysis Method - SW 6020		
Analyte	Units	Sample ID
		SCOU1W05
Aluminum	µg/g	1,900
Antimony	µg/g	69
Arsenic	µg/g	2.7
Barium	µg/g	130
Beryllium	µg/g	0.22
Cadmium	µg/g	13
Calcium	µg/g	37,000
Chromium	µg/g	8.3
Cobalt	µg/g	4.9
Copper	µg/g	180
Iron	µg/g	7,700
Lead	µg/g	820
Magnesium	µg/g	7,300
Manganese	µg/g	290
Nickel	µg/g	47
Potassium	µg/g	820
Selenium	µg/g	ND
Silver	µg/g	0.98
Sodium	µg/g	240
Thallium	µg/g	ND

Table 5  
 Stone Castle OU1 Removal  
 Soil XRF Field Screening Data  
 12/12/14

Field ID	Time	Lead (ppm) <sup>(1)</sup>	Latitude	Longitude
SCOU1SX01	9:04	45	37.839649	-112.857682
SCOU1SX02	9:05	16	37.83961	-112.857679
SCOU1SX03	9:07	26	37.839581	-112.857669
SCOU1SX04	9:08	47	37.839547	-112.857662
SCOU1SX05	9:10	40	37.839492	-112.857658
SCOU1SX06	9:11	306	37.839464	-112.857614
SCOU1SX07	9:14	51	37.839499	-112.857592
SCOU1SX08	9:16	21	37.839552	-112.857572
SCOU1SX09	9:19	198	37.839603	-112.857498
SCOU1SX10	9:23	476	37.839635	-112.857565
SCOU1SX11	9:26	45	37.839656	-112.857507
SCOU1SX12	9:30	450	37.839596	-112.857482
SCOU1SX13	9:33	29	37.839555	-112.857486
SCOU1SX14	9:37	31	37.839622	-112.857467
SCOU1SX15	9:39	208	37.839582	-112.857435
SCOU1SX16	9:41	43	37.839543	-112.857435
SCOU1SX17	9:43	252	37.839515	-112.857417
SCOU1SX18	9:45	187	37.839483	-112.857435
SCOU1SX19	9:47	253	37.839449	-112.857454
SCOU1SX20	9:49	99	37.839417	-112.857494
SCOU1SX21	9:51	169	37.839393	-112.857519
SCOU1SX22	9:52	91	37.839395	-112.857427
SCOU1SX23	9:54	49	37.839434	-112.857392
SCOU1SX24	9:57	199	37.839502	-112.85737

<sup>(1)</sup> Parts per Million

**Table 6**  
**Waste Materials Disposition Summary**  
**Stone Castle Recycling (OU1) Site**  
**Parowan, Iron County, Utah**

Description	Waste Stream	Container Total	Date	Manifest Number	Transporter Name	Disposal Method	Disposal Facility
Non-RCRA, Non-Hazardous, Discarded Televisions and Cathode Ray Tube Monitors	Non-hazardous Wood & Cardboard	(1) 21-yd <sup>3</sup> <sup>(1)</sup> roll-off box	12/16/2014	868-01	MP Environmental Services, Inc. 1043 N. Industrial Park Circle Grantsville, UT 84029 877-800-5111	Landfill	ECDC Environmental 1111 West Highway 123 PO Box 69 East Carbon, UT 84520 708-596-7042
		(1) 21-yd <sup>3</sup> roll-off box	12/16/2014	868-02			
Non-RCRA, Non-Hazardous, Discarded Televisions and Cathode Ray Tube Monitors (Treated)	Treated Electronic Waste	(1) 21-yd <sup>3</sup> roll-off box	12/17/2014	868-03	MP Environmental Services, Inc. 1043 N. Industrial Park Circle Grantsville, UT 84029 877-800-5111	Treatment and Disposal at Landfill	ECDC Environmental 1111 West Highway 123 PO Box 69 East Carbon, UT 84520 708-596-7042
		(1) 21-yd <sup>3</sup> roll-off box	12/17/2014	868-04			
		(1) 21-yd <sup>3</sup> roll-off box	12/17/2014	868-05			
		(1) 21-yd <sup>3</sup> roll-off box	12/17/2014	868-06			
		(1) 21-yd <sup>3</sup> roll-off box	12/26/2014	868-07			
		(1) 21-yd <sup>3</sup> roll-off box	12/19/2014	868-08			
		(1) 21-yd <sup>3</sup> roll-off box	12/26/2014	868-09			
		(1) 21-yd <sup>3</sup> roll-off box	12/23/2014	868-12			
		(1) 21-yd <sup>3</sup> roll-off box	12/24/2014	868-13			
		(1) 21-yd <sup>3</sup> roll-off box	12/23/2014	868-14			
		(1) 21-yd <sup>3</sup> roll-off box	12/24/2014	868-15			
		(1) 21-yd <sup>3</sup> roll-off box	12/23/2014	868-16			
		(1) 21-yd <sup>3</sup> roll-off box	12/24/2014	868-17			
		(1) 21-yd <sup>3</sup> roll-off box	12/29/2014	868-18			
		(1) 21-yd <sup>3</sup> roll-off box	12/30/2014	868-19			
(1) 21-yd <sup>3</sup> roll-off box	12/29/2014	868-21					
(1) 21-yd <sup>3</sup> roll-off box	12/29/2014	868-22					

<sup>(1)</sup> Cubic yard

## **Attachment C**

**SAMPLING AND ANALYSIS PLAN -  
QUALITY ASSURANCE PROJECT PLAN  
FOR THE  
STONE CASTLE RECYCLING (OU1) SITE  
PAROWAN, IRON COUNTY, UTAH**

Prepared for  
**UNITED STATES ENVIRONMENTAL PROTECTION AGENCY**  
Region VIII

Prepared by  
**WESTON SOLUTIONS, INC.**  
Region VIII Superfund Technical Assessment and Response Team

Original Document Date: December 1, 2014  
Document Revision Number/Date: NA

For approval signatures, see Worksheet 1 & 2.

Project Dates of Removal:	December 2014
CERCLA ID / Site Spill Identifier No.:	A8F5
Contract Name:	START IV
Contract No.:	EP-S8-13-01
Technical Direction Document No.:	0001/1411-06
Document Control No.:	W0201.1E.00389

## SAP Revision Log

**Site:** Stone Castle Recycling (OU1)

**OSC:** Steve Merritt

**TDD:** 0001/1411-06

Date	Revision Number	Reason for Change of Scope/Procedures	SAP Section Superseded	Requested By	Approved By

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## LIST OF ACRONYMS

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°C	degrees Celsius
AES	Atomic Emission Spectrometry
CA	Corrective Action
CCV	continuing calibration verification
CERCLA	Comprehensive Environmental Response, Compensation, and Liability Act
CLP	Contract Laboratory Program
CO	Contracting Officer
COC	Chain-of-Custody
COR	Contracting Officer Representative
CRQL	Contract Required Quantitation Limits
CVAA	Cold Vapor Atomic Absorption
DQO	Data Quality Objective
EDD	electronic data deliverable
ERM	Emergency Response Manager
ERRS	Emergency and Rapid Response Services (Contractor)
ERT	Environmental Response Team
GIS	Geographic Information System
HASP	Health and Safety Plan
HRS	Hazard Ranking System
ICP	inductively coupled plasma
IDW	investigation-derived waste
MCE	mixed cellulose ester
MDL	method detection limit
mg/kg	milligrams per kilogram
mg/L	milligrams per liter
MPC	Measurement Performance Criteria
MS	matrix spike
MSD	matrix spike duplicate
NA	not applicable
ND	non-detect
NIOSH	National Institute of Safety and Health
PAL	Project Action Limit
PQL	Project Quantitation Limit
PPE	Personal Protective Equipment
PTL	Project Team Lead
QA	quality assurance
QAPP	Quality Assurance Project Plan
QC	quality control
RCRA	Resource Conservation and Recovery Act
RSL	regional screening levels
SAP	Sampling and Analysis Plan
SI	Site Inspection
SOP	Standard Operating Procedure
START IV	Superfund Technical Assessment and Response Team 4
TAL	Target Analyte List
TBD	to-be-determined

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## LIST OF ACRONYMS

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TCL	Target Compound List
TDD	Technical Direction Document
UFP-QAPP	Uniform Federal Policy–Quality Assurance Project Plan
U.S. EPA	United States Environmental Protection Agency
VOC	Volatile Organic Compounds
WAM	Work Assignment Manager
WESTON	Weston Solutions, Inc.
XRF	X-Ray Florescence.

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<b>Figure 1</b>	Site Location Map
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## 1.0 INTRODUCTION

This Sampling Activities Plan (SAP)-Quality Assurance Project Plan (QAPP) is designed to guide field operations at the Stone Castle Recycling (OU1) Site in Parowan, Iron County, Utah. All data will be generated in accordance with the quality requirements described in the Quality Assurance Project Plan for Region 8 CERCLA Removal and Emergency Response Activities in Colorado, Utah, Wyoming, Montana, North Dakota, and South Dakota (Weston 2013). The purpose of this SAP-QAPP is to describe site-specific tasks that will be performed in support of the stated objectives. This SAP-QAPP references the QAPP for generic tasks common to all data collection activities including routine procedures for sampling and analysis, sample documentation, equipment decontamination, sample handling, data management, assessment, and data review. Additional site-specific procedures and/or modifications to procedures described in the QAPP are described in the following SAP-QAPP elements.

This SAP-QAPP is prepared, reviewed, and approved in accordance with the procedures detailed in the *START IV Programmatic QAPP*. Any deviations or modifications to the approved SAP will be documented using the SAP Revision Form.

### Project Organization and Team

Refer to the QAPP Worksheet 3 & 5, and 4, 7, & 8 for the program organizational chart, communication pathways, personnel responsibilities and qualifications, and special personnel training requirements. Project-specific information is provided below.

The following are key individuals identified for this project:

Name	Title/Role	Organization	Receive Copy of SAP-QAPP?
Jeff Bryniarski	Project Team Lead	Weston	Yes
Dave Robinson	Project Manager	Weston	Yes
Steve Merritt	OSC	EPA	Yes

The individuals who will receive a copy of the Program QAPP are specified on QAPP Worksheet 3 & 5 (Project Organization and QAPP Distribution) as noted by the asterisk symbol adjacent to their names. The program QA Manager (QAPP Worksheet 4, 7 & 8) and the Project Manager will maintain the approved QA project plan consisting of the Program QAPP, Project SAP and SAP Document Review Crosswalk. The PTL will distribute the most current copy of the project QA documents via electronic or hard copy, as directed by the OSC. Files for this project will be kept in accordance with Section H.20 of Contract No.: EP-S8-13-01, stating a length of 10 years from close of the project or end of litigation.

### QAPP Reference

Weston Solutions, Inc. 2013. Quality Assurance Project Plan for Region 8 CERCLA Removal and Emergency Response Activities in Colorado, Utah, Wyoming, Montana, North Dakota, and South Dakota. Prepared for the START IV Contract. July 2013.

## Worksheet 1 & 2 — Title and Approval Page

(UFP-QAPP Manual Section 2.1)  
(EPA 2106-G-05 Section 2.2.1)

### 1. Project Identifying Information

- a) **Site Name/Project Name:** Stone Castle Recycling (OU1) Site / Stone Castle Recycling Parowan RV
- b) **Site Location/Number:** Parowan, Iron County, Utah / A8F5
- c) **Contract/Work Assignment Number:** EP-S8-13-01 / 0001/1411-06

### 2) List Plans and reports from previous investigation relevant to this project.

**Lead Investigative Organization's Report  
Author:**

Jeff Bryniarski/WESTON  
Printed Name/Title



Signature/Date 12/1/14

**Lead Investigative Organization's Program  
Leader:**

\_\_\_\_\_  
Printed Name/Title

\_\_\_\_\_  
Signature/Date

**Lead Investigative Organization's Technical  
Manager:**

Dave Robinson/WESTON  
Printed Name/Title

\_\_\_\_\_  
Signature/Date

**Federal Regulatory Agency Emergency Response  
Team Leader:**

Steve Merritt/EPA  
Printed Name/Title

\_\_\_\_\_  
Signature/Date

**Federal Regulatory Agency Delegated Approval  
Officer:**

\_\_\_\_\_  
Printed Name/Title

\_\_\_\_\_  
Signature/Date

**Document Control Numbering System:** W0201.1E.00389

## Worksheet 9 — Project Planning Session Summary

(UFP-QAPP Manual Section 2.5.1 and Figures 9-12)

(EPA 2106-G-05 Section 2.2.5)

<b>Date of Planning Session:</b> November 6 & 17, 2014				
<b>Location:</b> Conference Call/Meeting				
<b>Purpose:</b> Scoping meeting for Removal Activities				
Name	Title/Role	Organization	Phone No.	E-mail Address
Jeff Bryniarski	Project Team Lead	Weston	303-729-6106	jeff.bryniarski@westonsolutions.com
Dave Robinson	Project Manager	Weston	303-729-6181	david.robinson@westonsolutions.com
Steve Merritt	OSC	EPA	303-312-6146	merritt.steven@epa.gov
Byron Hartman	ERRS RM	Environmental Restoration	801-746-6136	b.hartman@erllc.com

### Notes/Comments:

A conference call took place on November 6 & 17 after the EPA tasked START with quality assurance project planning for the Stone Castle Recycling (OU1) Site, Parowan, Iron County, Utah. WESTON staff later discussed the best way to proceed with the project.

### Action Items:

Action	Responsible Party	Due Date
Develop a SAP-QAPP	Jeff Bryniarski	November 25, 2014
Amend Health and Safety Plan	Jeff Bryniarski	November 25, 2014
Develop Equipment List	Jeff Bryniarski	November 25, 2014
Staff Project	Dave Robinson	November 25, 2014

## **Worksheet 10 — Conceptual Site Model**

(UFP-QAPP Manual Section 2.5.2)  
(EPA 2106-G-05 Section 2.2.5)

- **Problem Definition**

The EPA has tasked START with removal work oversight, confirmation sampling, monitoring, and documenting during removal activities at the Stone Castle Recycling (OU1) Site, Parowan, Iron County, Utah. START will collect samples of treated waste for analysis to provide quality assurance data for disposal. START will collect confirmation soil samples to document soil impact after removal of site waste. START will perform air sampling and monitoring activities during removal action to ensure human health is protected.

- **Background Information/Site History;**

This site was referred to EPA by the Solid and Hazardous Waste Program in the Utah Department of Environmental Quality following a series of mysterious and well-publicized fires at electronics waste (e-waste) recycling facilities operated by Stone Castle Recycling throughout the state.

On October 15, 2014, START conducted a removal assessment to document current site conditions and estimate waste volumes. Soil and waste samples were collected which confirmed the presence of uncontained characteristic hazardous waste at the site.

- **Contaminants of Concern/Target Analytes**

The site contains large quantities of e-waste in containers of various sizes and conditions. The specific contaminants of concern are lead and arsenic, with other heavy metals also present.

## **Worksheet 11 — Project/Data Quality Objectives**

(UFP-QAPP Manual Section 2.6.1)  
(EPA 2106-G-05 Section 2.2.6)

### **1. State the Problem**

E-waste in containers of various sizes and conditions are present on site. EPA has issued an action memo for a removal action at the site. This time-critical removal action is being conducted to mitigate endangerment posed to human health, human welfare, and the environment by Site conditions.

### **2. Identify the Goals of the Study**

- Protect human health by removing heavy metal contaminated e-waste from the site.
- Protect human health from inhalation hazards by performing air monitoring and air sampling during e-waste processing and treatment.
- Confirm the efficacy of the waste treatment process by collecting waste samples prior to, during, and after the treatment process.
- Ensure that treated e-waste meets the established Department of Transportation (DOT) shipping classification and classifications acceptable for disposal in an approved landfill by collecting waste samples for laboratory analysis.
- Document that ERRS is treating waste in accordance with the site specific plan.
- Protect human health by performing noise monitoring during removal activities.
- Protect human health by performing in-situ screening of soil after all waste has been removed to determine if additional soil remediation is required at the site.

### **3. Identify Information Inputs**

- Air monitoring for particulates will be performed using Data RAM IV units during waste processing and treatment. Samples will be laboratory analyzed.
- Air sampling for arsenic and lead will be performed using a Data RAM IV unit's internal pumps during waste processing and treatment.
- In-situ screening of soil for metals will be performed using the x-ray fluorescence analyzer (XRF).
- Waste samples will be collected and analyzed for metals and TCLP metals.
- Data collected from air monitoring instruments on site will be logged and transmitted

for display in a site Viewer. The position of air monitoring and sampling stations will be located with GPS data loggers.

- Photographs will be taken and will be loaded to the site-specific EPAOSC.net website.

#### **4. Define the Boundaries of the Study**

The site is located at 1338 West 200 South, Parowan, Iron County, UT (Figure 1). It is estimated that there are roughly 330 cubic yards of burned debris, 830 cubic yards of hazardous debris, and 640 cubic yards of intact televisions present at the site. All site work is expected to take place within the site boundary (Figure 2). EPA has received approval from the property owner to utilize the warehouse building on site for storage of equipment during the removal activities.

#### **5. Develop the Analytic Approach**

- Waste (untreated, partially treated, and treated) samples will be submitted to an independent laboratory for metals and TCLP metals analysis.
- Air samples will be submitted to an independent laboratory for lead and arsenic analysis.
- Soil will be screened in-situ for metals using the XRF.
- Analytical sample results will be reviewed and verified by a WESTON START chemist to determine data usability.

#### **6. Specify Performance or Acceptance Criteria**

If uncertainty is identified during field screening, additional field tools will be employed to address the uncertainty. Performance and Acceptance criteria are addressed in Worksheet 17.

#### **7. Develop the Detailed Plan for Obtaining Data**

Data will be collected per the sampling design and rationale provided in Worksheet 17. Sample nomenclature is described in Worksheet 17, Identification and Handling. Sample descriptions will be logged in the field logbook. Documentation of removal activities will be collected using a site logbook. In addition, a FileMaker Pro form loaded onto an iPad may be used. Sampling data will be collected using the Scribe Mobile Application loaded onto an iPad. Data will be entered into Scribe for data management and reporting purposes. Chain of custody forms will be generated from the Scribe database. A Scribe compatible EDD will be requested from the laboratory for importing analytical results into the database. Geospatial data will be collected using the iPad loaded with the ESRI mobile application and a Bluetooth connected GPS.

## Worksheet 14 & 16 —Project Tasks & Schedule

(UFP-QAPP Manual Section 2.8.2)  
 (EPA 2106-G-05 Section 2.2.4)

Activity	Responsible Party	Planned Start Date	Planned Completion Date	Deliverable(s)	Deliverable Due Date
Develop a SAP-QAPP	WESTON	November 17, 2014	November 25, 2014	SAP-QAPP	November 25, 2014
Amend Health and Safety Plan	WESTON	November 17, 2014	November 25, 2014	HASP Amendment	November 25, 2014
Develop equipment list	WESTON	November 17, 2014	November 25, 2014	Equipment list to OSC and EPA warehouse	November 25, 2014
Mobilize to site	WESTON	December 1, 2014	December 1, 2014	N/A	N/A
Site Work	WESTON	December 1, 2014	December 20, 2014	EPA Response Manager Database	TBD
Project-Specific Document Examination	WESTON	November 17, 2014	December 20, 2014	Relevant information included in Project-Specific report	December 20, 2014
Address EPA comments on Draft Project-Specific Report	WESTON	Upon receiving	January 16, 2014	After Action Report	January 16, 2014
Project Closeout	WESTON	January 16, 2014	TBD	Contract Closeout Report	TBD

## Worksheet 15 — Project Action Limits and Laboratory-Specific Detection/Quantitation Limits

(UFP-QAPP Manual Sections 2.6.2.3 and Figure 15)  
 (EPA 2106-G-05 Section 2.2.6)

**Matrix:** Soil

**Analytical Method:** XRF

Analyte <sup>1</sup>	Project Action Limit (PAL) <sup>2</sup>	PAL Reference <sup>2</sup>	Project Quantitation Limit (PQL) Goal	Laboratory Quantitation Limit <sup>3</sup>	Laboratory Detection Limit <sup>3</sup>
Lead	800 ppm	Industrial RSL	800 ppm	13 ppm	13 ppm

**Matrix:** Waste

**Analytical Method:** SW 6010C (TCLP Metals)

Analyte <sup>1</sup>	Project Action Limit (PAL) <sup>2</sup>	PAL Reference <sup>2</sup>	Project Quantitation Limit (PQL) Goal	Laboratory Quantitation Limit <sup>3</sup>	Laboratory Detection Limit <sup>3</sup>
Lead	5.0 mg/L	TCLP	5.0 mg/L	0.1 mg/L	--
Arsenic	5.0 mg/L	TCLP	5.0 mg/L	0.3 mg/L	--

**Matrix:** Air

**Analytical Method:** NIOSH 7300

Analyte <sup>1</sup>	Project Action Limit (PAL) <sup>2</sup>	PAL Reference <sup>2</sup>	Project Quantitation Limit (PQL) Goal	Laboratory Quantitation Limit <sup>3</sup>	Laboratory Detection Limit <sup>3</sup>
Lead	0.025 mg/m <sup>3</sup>	Respiratory Protection	0.025 mg/m <sup>3</sup>	0.0013 mg/m <sup>3</sup>	--
Arsenic	0.005 mg/m <sup>3</sup>	Respiratory Protection	0.005 mg/m <sup>3</sup>	0.0026 mg/m <sup>3</sup>	--

<sup>1</sup> CLP laboratories use accepted analytical methods for the isolation, detection, and quantitation of specific target compounds and analytes. The CLP Target Compound List (TCL), Target Analyte List (TAL), and their corresponding Contract Required Quantitation Limits (CRQL) are listed in Appendix B and Appendix C, respectively.

<sup>2</sup> Links to State regulatory cleanup standards are provided in Appendix D.

<sup>3</sup> Terminology is project/laboratory-specific.

## **Worksheet 17 — Sampling Design and Rationale**

(UFP-QAPP Manual Section 3.1.1)

(EPA 2106-G-05 Section 2.3.1)

Samples will be managed in accordance with SAP Worksheet 26 & 27.

### **Safety**

All field activities will be conducted in strict accordance with an approved and amended Health and Safety Plan (HASP), which will be developed before the start of removal activities. It is anticipated that all field work can be accomplished in modified Level D Personal Protective Equipment (PPE) equipment. START personnel performing sampling will wear PPE appropriate to the hazard presented. At a minimum, the following guidelines should be followed: when on site steel toed-boots shall be worn; sampling gloves and eye protection should be worn. In addition, hearing protection will be required during the operation of heavy equipment.

### **Sample Collection**

#### Soil Screening

Surface soil samples will be screened in-situ using an XRF to determine if metal concentrations in site soils exceed the action levels. Loose material will be removed from the ground surface prior to screening. Soil will be screened using the XRF and if the action level is exceeded, ERRS will scrape two to four inches of soil for disposal and then the remaining soil will be screened again; continuing until the site soil has concentration of arsenic and lead below action limits. Confirmation soil samples will be collected and submitted for laboratory analysis on an as needed basis.

#### Waste Sampling

Waste samples will be collected using a decontaminated stainless steel shovel and decontaminated buckets. The waste will be run through a 3/8 inch sieve to ensure that the sized material meets the standard for TCLP Metals analysis. (This will eliminate the need for additional laboratory pre-processing of the waste samples.)

#### Air Sampling

Air samples will be collected using Data RAM IV internal pumps and cassette air cartridges with mixed cellulose ester (MCE) media. The collected air samples will be analyzed for airborne arsenic and lead particulates. These samples may be collected at the site perimeter or within the work zone in accordance with ASTM E1370 - 14.

### **Sample Analysis and Handling**

Samples will be analyzed for the parameters listed in SAP-QAPP Table 1. Requirements for the sample container, volume, preservation, and QC samples are included in Table 1.

Sample analysis will be performed by an independent commercial laboratory. Samples will be analyzed for the parameters listed on Worksheet 15. In addition, requirements for the sample container, volume, preservation, and QC samples are listed on Worksheet 19 & 30 of the QAPP. Table 1 summarizes the information from Worksheet 15 and Worksheet 19 & 30.

### **Sampling Logistics and Contingencies**

Access to the property and warehouse building will be obtained and managed by the EPA before beginning removal activities.

Weather may be cold. Excessive precipitation may necessitate delay of work. Cold weather should not delay work but will require health and safety breaks in warm buildings or vehicles.

Samples will be tested and sent to the laboratory to meet the deadlines outlined in SAP.

The purpose of this sampling is outlined in SAP Worksheet 11.

Any changes from the planned equipment or methods will be documented in the field logbook.

## Worksheet 18 — Sampling Locations and Methods

(UFP-QAPP Manual Section 3.1.1 and 3.1.2)  
 (EPA 2106-G-05 Sections 2.3.1 and 2.3.2)

Sample locations will be determined in the field.

All samples for analysis, including QC samples, will be given a unique sample number. The sample numbers will be recorded in the field logbook and on the chain-of-custody paperwork.

Sample nomenclature will include identifiers to allow for unique identification of all containers on site. Sample names will include:

- The first two characters will be “SC” for Stone Castle Recycling.
- The second two characters will denote the Operable Unit, for this site “OU1”
- The third field will be one character to denote the sample sub-matrix, “W” for waste, “SX” for soil, and “A” for air.
- The fourth field will be a two-digit number that represents the sequential number of the sample location.

An example of a waste sample collected from the third location on site would be SCOU1W03.

All sample information will be managed in SCRIBE so that waste, waste volumes, and waste streams can be managed.

Sample cross contamination will be reduced by using disposable plastic scoops for each sample. If a stainless steel scoop is used, it will be decontaminated between samples with a brush to remove gross particulate and a nitric acid rinse, followed by a distilled water rinse. The scoop will then be allowed to gravity drain.

Sampling Location / ID	Matrix	Type	Analyte/Analytical Group
SCOU1W##	Waste	Grab	SW 6010C TCLP Metals
SCOU1W##	Waste	Grab	SW 6020 Metals
SCOU1W##	Waste	Grab	SW 7470 TCLP Mercury
SCOU1A##	Air	Composite	NIOSH 7300 MCE Arsenic & Lead

Sampling SOPs references will be provided in Worksheet 21.

## Worksheet 19 & 30 — Sample Containers, Preservation, and Hold Times

(UFP-QAPP Manual Section 3.1.2.2)

(EPA 2106-G-05 Section 2.3.2)

Matrix	Analyte/ Analyte Group	Method/ SOP <sup>1</sup>	Container(s) (number, size & type per sample) <sup>2</sup>	Preservation	Preparation Holding Time	Analytical Holding Time	Data Package Turnaround
Waste	Metals	EPA 6020	One 8-oz glass jar	Store @ < 4°C	N/A	180 days	2 days
Waste	TCLP Metals (no mercury)	EPA 6010C	One 8-oz glass jar	Store @ < 4°C	N/A	180 days	2 days
Waste	TCLP Mercury	EPA 7470	No additional volume	Store @ < 4°C	N/A	28 days	2 days
Air	Arsenic & Lead	NIOSH 7300	MCE filter	None	None	N/A	1 week

## Worksheet 20 — Field Quality Control Sample Summary

(UFP-QAPP Manual Sections 3.1.1 and 3.1.2.)  
 (EPA 2106-G-05 Section 2.3.5)

Matrix	Analyte/Analytical Group	No. of Field Samples <sup>1</sup>	No. of Field Duplicates	No. of MS/MSD	No. of Field Blanks	No. of Equip. Blanks	No. of Trip Blanks	No. of Other	Total No. of Samples to Laboratory
Waste	Metals	1	0	0	0	0	0	0	1
Waste	TCLP Metals (no mercury)	4	0	0	0	0	0	0	4
Waste	TCLP Mercury	4	0	0	0	0	0	0	4
Air	Arsenic & Lead	3	0	0	1	0	0	0	4

- 1 Samples that are collected at different depths at the same location, and analyzed separately, will be counted as separate field samples. Even if they are taken from the same container as the parent field sample, MS/MSDs are counted separately, because they are analyzed separately. If composite samples or incremental samples are collected, only the sample that will be analyzed will be included; subsamples and increments will not be listed separately.
- 2 TBD – To be determined

Sample numbers may be updated based on project needs.

## Worksheet 21 — Field SOPs

(UFP-QAPP Manual Section 3.1.2)  
 (EPA 2106-G-05 Section 2.3.2)

SOP Number or Reference	Title, Revision, Date, and URL (if available)	Originating Organization	SOP Option or Equipment Type (if SOP provides different options)	Modified for Project? Y/N	Comments
2001	General Field Sampling Guidelines, 6/2011	U.S. EPA, ERT	Project-specific	Project-specific	SOPs are available in the Programmatic QAPP, Appendix I
2006	Sampling Equipment Decontamination, 6/2011	U.S. EPA, ERT	Project-specific	Project-specific	SOPs are available in the Programmatic QAPP, Appendix I
2008	General Air Sampling, 6/2011	U.S. EPA, ERT	Project-specific	Project-specific	SOPs are available in the Programmatic QAPP, Appendix I
2049	Investigation-Derived Waste (IDW) Management, 6/2011	U.S. EPA, ERT	Project-specific	Project-specific	SOPs are available in the Programmatic QAPP, Appendix I
2017	Waste Pile Sampling, 6/2011	U.S. EPA, ERT	Project-specific	Project-specific	SOPs are available in the Programmatic QAPP, Appendix I
G-12	Specifications and Guidance for Contaminant-Free Sample Containers, 12/1992	U.S. EPA, Office of Solid Waste and Emergency Response	Project-specific	Project-specific	SOPs are available in Programmatic QAPP, Appendix I
2012	Soil Sampling, 6/2011	U.S. EPA, ERT	Project-specific	Project-specific	SOPs are available in the Programmatic QAPP, Appendix I

During sampling and categorizing activities, IDW may be generated. IDW may consist of decontamination fluids, excess sampled media (e.g., soil, sediment, water, etc.), disposable sampling supplies, and personal protective equipment (e.g., Tyvek/Saranex coveralls, gloves, booties, etc.). Handling of IDW will be performed according with SOP 2049 as listed above as well as procedures described in *Management of Investigation Derived Wastes during Site Inspections (May 1991)*. Waste disposal for IDW will be dependent upon classification of the waste as either RCRA hazardous or RCRA nonhazardous waste.

IDW will be managed in accordance with EPA ERT Standard Operating Procedure (SOP) #2049. Spent sampling supplies and expendable PPE will be containerized and disposed of into the appropriate waste stream. It is anticipated that IDW will be stored on the Site and managed by the EPA ERRS contractor as part of the disposal operations.

### Decontamination

General decontamination procedures are described in EPA ERT SOP #2006 Sampling Equipment Decontamination.

## Worksheet 22 — Field Equipment Calibration, Maintenance, Testing, and Inspection

(UFP-QAPP Manual Section 3.1.2.4)

(EPA 2106-G-05 Section 2.3.6)

Field Equipment	Calibration Activity	Maintenance Activity	Testing Activity	Inspection Activity	Frequency	Acceptance Criteria	Corrective Action	Title or Position of Responsible Person	SOP Reference <sup>1</sup>
X-Ray Florescence (XRF)	Check factory calibration with known standards	Check battery	Calibration check	Visually inspect for external damage (e.g., perforated lens, etc.)	Refer to instrument SOP	Refer to instrument SOP	Refer to instrument SOP	Field personnel	1707
Sampling Tools (Disposable Scoops)	NA	NA	NA	Visually inspect for obvious defects or broken parts	Prior to use	NA	Replace	Field personnel	NA
Disposable, inert sample mixing containers	NA	NA	NA	Visually inspect for cleanliness	Prior to use	NA	Replace	Field personnel	NA
Thermo Scientific DataRAM 4 Particulate Monitor	Check factory calibration with known standards	Replace cassettes/filters Check battery	Calibration check	Visually inspect for external damage	Refer to instrument SOP	Refer to instrument SOP	Refer to instrument SOP	Field personnel	2084
Metal sampling equipment as necessary (trowels)	NA	Clean prior and after each use	NA	Visually inspect for cleanliness	Prior to use	Should be covered from previous decontamination procedure	Perform decontamination procedure again as needed	Field personnel	NA

<sup>1</sup> Refer to Field SOPs (Worksheet 21) and Analytical SOPs (Worksheet 23).

Air monitoring data collected by the DataRAM 4 Particulate Monitors will be transmitted via VIPER to a remote server maintained by EPA ERT.

## Worksheet 23 — Analytical SOPs

(UFP-QAPP Manual Section 3.2.1)  
 (EPA 2106-G-05 Section 2.3.4)

Relevant SOPs based on currently known contaminants are listed below. All Analytical SOPs are listed in the *Programmatic QAPP*.

Lab SOP Number <sup>1</sup>	Title, Revision Date, and/or Number and URL (if available)	Screening or Definitive Data	Matrix/Analytical Group	SOP Option or Equipment Type	Modified for Project? (Y/N)
TBD	METHOD 6020A INDUCTIVELY COUPLED PLASMA-MASS SPECTROMETRY (ICP-MS), 2/2007, <a href="http://www.epa.gov/osw/hazard/testmethods/sw846/pdfs/6020a.pdf">http://www.epa.gov/osw/hazard/testmethods/sw846/pdfs/6020a.pdf</a>	Definitive	Water and air/metals (no mercury)	ICP-MS	TBD
1700	NITON XL722S FIELD PORTABLE X-RAY FLUORESCENCE INSTRUMENT, 1/2006, <a href="https://clu-in.org/download/ert/1700-r10.pdf">https://clu-in.org/download/ert/1700-r10.pdf</a>	Screening	Solids and liquids/Metals	XRF	TBD
TBD	NIOSH METHOD 7300 ELEMENTS BY ICP, 3/2003 <a href="http://www.cdc.gov/niosh/docs/2003-154/pdfs/7300.pdf">http://www.cdc.gov/niosh/docs/2003-154/pdfs/7300.pdf</a>	Definitive	Air/metals	ICP-AES	TBD
TBD	METHOD 6010C INDUCTIVELY COUPLED PLASMA-ATOMIC EMISSION SPECTROMETRY, 2/2007 <a href="http://www.epa.gov/solidwaste/hazard/testmethods/sw846/pdfs/6010c.pdf">http://www.epa.gov/solidwaste/hazard/testmethods/sw846/pdfs/6010c.pdf</a>	Definitive	Soil, sediment, debris, aquatic animal tissue, air/metals (no mercury)	ICP-AES	TBD
TBD	METHOD 7470A MERCURY IN LIQUID WASTE (MANUAL COLD-VAPOR TECHNIQUE), 9/1994, <a href="http://www.epa.gov/osw/hazard/testmethods/sw846/pdfs/7470a.pdf">http://www.epa.gov/osw/hazard/testmethods/sw846/pdfs/7470a.pdf</a>	Definitive	Water/Mercury	CVAA	TBD

<sup>1</sup> Lab SOP numbers are lab-specific and will be identified in the site-specific SAP, and/or QAPP.

## Worksheet 24 — Analytical Instrument Calibration

(UFP-QAPP Manual Section 3.2.2)  
 (EPA 2106-G-05 Section 2.3.6)

As stated in Worksheet 22, WESTON field personnel are responsible for the calibration of WESTON and sub-contractor provided analytical field equipment. Documented and approved procedures will be used for calibrating measuring and testing equipment. Widely accepted procedures, such as those published by U.S. EPA and ASTM, or procedures provided by manufacturers in equipment manuals will be adopted.

The responsibility for the calibration of laboratory equipment rests with the selected laboratories. Each type of instrumentation and each U.S. EPA-approved method have specific requirements for the calibration procedures, depending on the analytes of interest and the sample medium. The calibration procedures and frequencies of the equipment used to perform the analyses will be in accordance with requirements established by the U.S. EPA. The laboratory QA manager will be responsible for ensuring that the laboratory instrumentation is maintained in accordance with specifications. Individual laboratory SOPs will be followed for corrective actions and preventative maintenance frequencies. Laboratory quality control, calibration procedures, corrective action procedures, and instrument preventative maintenance will be included in an addendum to this QAPP once the laboratories have been selected for each of the TBA sites. Items may include, but are not limited to those identified in the table below.

Instrument	Calibration Procedure	Frequency of Calibration	Acceptance Criteria	Corrective Action (CA)	Title/Position Responsible for CA	SOP Reference <sup>1</sup>
Portable XRF Analyzer	Refer to Worksheet 22	Refer to Worksheet 22	Refer to Worksheet 22	Refer to Worksheet 22	Refer to Worksheet 22	TBD
CVAA	See 7470A, 7471B, ISM01.3	Daily initial calibration prior to sample analysis. Perform instrument re-calibration once per year minimum.	$R^2 \geq 0.995$ for linear regression	Correct problem then repeat initial calibration. If calibration fails again, re-digest the entire digestion batch.	Lab Manager/ Analyst	7470A, 7471B, ISM01.3

Instrument	Calibration Procedure	Frequency of Calibration	Acceptance Criteria	Corrective Action (CA)	Title/Position Responsible for CA	SOP Reference <sup>1</sup>
ICP-AES	See 6010C	Calibration and initial calibration verification after instrument set up, then daily; continuing calibration verifications. Upper range within 10%. New upper range limits should be determined whenever a significant change in instrument response or every six months. Low-level continuing calibration verification (LLCCV) standard with 30%.	Initial and continuing calibration verification within $\pm 10\%$ of upper range true values and $\pm 30\%$ LLCCV true values.	Inspect system; correct problem; re-run calibration and affected samples	Lab Manager/ Analyst	6010C
ICP/ ICP-MS	See 6010C, 6020A, ISM01.3	Calibration and initial calibration verification after instrument set up, then daily; continuing calibration verification 10% or every 2 hours, whichever is more frequent	Calibration $r^2 > 0.995$ ; initial and continuing calibration verification within $\pm 20\%$ of true values	Inspect system; correct problem; re-run calibration and affected samples	Lab Manager/ Analyst	6010C, 6020A, ISM01.3

<sup>1</sup> Refer to the Analytical SOPs table (Worksheet 23). A laboratory-specific QA Manual may be referenced on a project-specific basis and will be identified in the site specific SAP, and/or QAPP.

## Worksheet 26 & 27 — Sample Handling, Custody, and Disposal

(UFP-QAPP Manual Section 3.3)  
 (EPA 2106-G-05 Manual Section 2.3.3)

**Sampling Organization:** WESTON

**Laboratory:** ALS Environmental  
 960 W. LeVoy Drive  
 Salt Lake City, UT 84123, USA  
 Phone: 801-266-7700

**Method of sample delivery (shipper/carrier):** Hand delivery

**Number of days from reporting until sample disposal:** 1 month

Activity	Organization and Title or Position of Person Responsible for the Activity	SOP Reference
Sample Labeling	START Field Personnel	QAPP Appendix I, SOP G-1 & G-3
Chain-of-Custody Form Completion	START Field Personnel	QAPP Appendix I, SOP G-8
Sample Packaging	START Field Personnel	QAPP Appendix I, SOP G-9
Shipping Coordination	N/A	QAPP, Appendix I, SOP G-9
Sample Receipt, Inspection, & Log-in	Laboratory Sample Custodian	Laboratory SOP
Sample Custody and Storage	Laboratory Sample Custodian /Laboratory Analytical Personnel	Laboratory SOP
Sample Disposal	Laboratory Sample Custodian /Laboratory Analytical Personnel	QAPP Appendix I, SOP G-1 & G-3 Laboratory SOP

## Worksheet 36 — Data Validation Procedures

(UFP-QAPP Manual Section 5.2.2)  
 (EPA 2106-G-05 Section 2.5.1)

Data Validator: WESTON

Analytical Group/ Method	Data Deliverable Requirements	Analytical Specifications	MPC	Percent of Data Packages to be Validated	Percent of Raw Data Reviewed	Percent of Results to be Recalculated	Validation Procedure	Validation Code <sup>1</sup>	Electronic Validation Program/ Version
All	Level 2 Scribe EDD	QAPP Worksheet 28	Worksheets 11, 12, 19 & 30	100	0	0	U.S. EPA Stage 2A unless client requests a greater degree of validation	S2AVEM	N/A

<sup>1</sup> Validation Codes are provided in QAPP Appendix M.

Validation will be performed on all laboratory analytical data unless a defined quantity or percentage of samples is identified by the U.S. EPA in the Technical Direction Document or during the project scoping meeting on a project-specific basis. Project validation criteria as per QAPP Worksheets 12, 15, 19 & 30, 28, and 36, and cited EPA SW-846 methodology will be used. WESTON-contracted laboratory data packages will be verified and validated using a Stage 2A validation, as described in the EPA *Guidance for Labeling Externally Validated Laboratory Analytical Data for Superfund Use* (January 2009) (QAPP Appendix J) unless otherwise specified by the U.S. EPA WAM/COR during the development of the DQOs. Validation Qualifiers will be applied using the following hierarchy: Region 8 UFP-QAPP for Removal Actions and Emergency Responses; the site-specific SAP, and/or QAPP; *EPA National Functional Guidelines for Organic Data Review* (QAPP Appendix K); *EPA National Functional Guidelines for Inorganic Data Review* (QAPP Appendix L); EPA Publication SW-846; and the laboratory-specific SOP. Methods for which no data validation guidelines exist will be validated following the guidance deemed most appropriate by the data validator.

The data validator will receive all laboratory packages and analytical results electronically. Additionally, the validator will be required to submit final validation reports via PDF format and must provide an annotated laboratory analytical result EDD with applicable data validation qualifiers (QAPP Appendix M) identified in the site-specific SAP, and/or QAPP, and/or result value modifications. The

Delegated QA Manager will use EPA document *Using Qualified Data to Document an Observed Release and Observed Contamination* (July 1996) to aid in determining the use of qualified data to document all observed release and observed contamination by chemical analysis under U.S. EPA's HRS. Approved data will be released by the Delegated QA Manager for reporting.

QAPP Worksheet 35 describes the issue resolution process and the individual responsible for conveying results to data users. For issues internal to the laboratory, the laboratory PM will be the responsible party for data resolution issues and will be responsible for conveying this information to the Delegate QA Manager or delegated authority. For external laboratory data and quality issues, the Delegated QA Manager or delegated authority will provide issue resolution information and will be the responsible party for conveying this information to data users. For quality documents, reports, and field information, the Delegated QA Manager, delegated authority, or other persons identified in the table in QAPP Worksheet 35 will be responsible for issue resolutions of such items and will be the responsible party for conveying that information to data users.

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## TABLE

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**Table 1**  
**Sampling and Analysis Summary**

**Site:** Stone Castle Recycling (OU1) Site  
**OSC:** Steve Merritt  
**TDD:** 0001/1411-06

Matrix	Analytical Parameter	Analytical Method	Containers (Numbers, Size, and Type)	Preservation Requirements	Number of Sampling Locations	Number of Field Duplicates	Number of MS/MSDs <sup>2</sup>	Number of Blanks (Trip, Field, Equipment, Rinsate) <sup>1</sup>	Total Number of Samples to Lab <sup>3</sup>	Holding Time
Waste	Metals	EPA 6020	One 8-oz glass jar	Store @ < 4°C	1	0	0	0	1	180 days
Waste	TCLP Metals (no mercury)	EPA 6010C	One 8-oz glass jar	Store @ < 4°C	4	0	0	0	4	180 days
Waste	TCLP Mercury	EPA 7470	No additional volume	Store @ < 4°C	4	0	0	0	4	28 days
Air	Arsenic & Lead	NIOSH 7300	MCE filter	None	3	0	0	1	4	NA

Notes:

<sup>1</sup> Trip blanks are only required for VOCs in water samples.

<sup>2</sup> For the samples designated for MS/MSDs, triple volume is required for VOCs and double volume for other water parameters.

<sup>3</sup> Total number of samples to the laboratory does not include MS/MSD samples.

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## FIGURES

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## **Attachment D**



**Photo Number:** IMG\_A06.JPG **Date:** 12/2/14 **Direction:** Northwest **Photographer:** Bryniarski  
**Subject:** Electronic waste stock piled at the Site



**Photo Number:** IMG\_A05.JPG **Date:** 12/2/14 **Direction:** Southeast **Photographer:** Bryniarski  
**Subject:** Electronic waste stock piled at the Site



**Photo Number:** IMG\_1335.JPG **Date:** 12/2/14 **Direction:** North **Photographer:** Merritt  
**Subject:** ERRS contractor sorts electronic waste and sprays water to suppress airborne dust



**Photo Number:** IMG\_B10.JPG **Date:** 12/3/14 **Direction:** North **Photographer:** Bryniarski  
**Subject:** Electronic waste stock piled at the Site



**Photo Number:** IMG\_B13.JPG    **Date:** 12/3/14    **Direction:** North    **Photographer:** Bryniarski  
**Subject:** ERRS contractor sorts electronic waste prior to grinding and treatment



**Photo Number:** IMG\_B14.JPG    **Date:** 12/3/14    **Direction:** West    **Photographer:** Bryniarski  
**Subject:** ERRS contractor sort electronic waste and segregate cardboard and wooden pallets



**Photo Number:** IMG\_B03.JPG **Date:** 12/3/14 **Direction:** West **Photographer:** Bryniarski  
**Subject:** START contractor collects air monitoring data with Data Ram and VIPER Linc



**Photo Number:** IMG\_C01.JPG **Date:** 12/4/14 **Direction:** Northwest **Photographer:** Bryniarski  
**Subject:** ERRS contractor prepares grinder for use at the Site



**Photo Number:** IMG\_C04.JPG **Date:** 12/4/14 **Direction:** Northwest **Photographer:** Bryniarski  
**Subject:** ERRS contractor begins electronic waste grinding operations



**Photo Number:** IMG\_C02.JPG **Date:** 12/4/14 **Direction:** Northwest **Photographer:** Bryniarski  
**Subject:** START contractor collects noise level readings during grinding operations



**Photo Number:** IMG\_C18.JPG **Date:** 12/4/14 **Direction:** North **Photographer:** Bryniarski  
**Subject:** ERRS contractor sprays water for dust control and stock pile waste



**Photo Number:** IMG\_C22.JPG **Date:** 12/4/14 **Direction:** Northeast **Photographer:** Bryniarski  
**Subject:** ERRS contractor sorts and loads waste



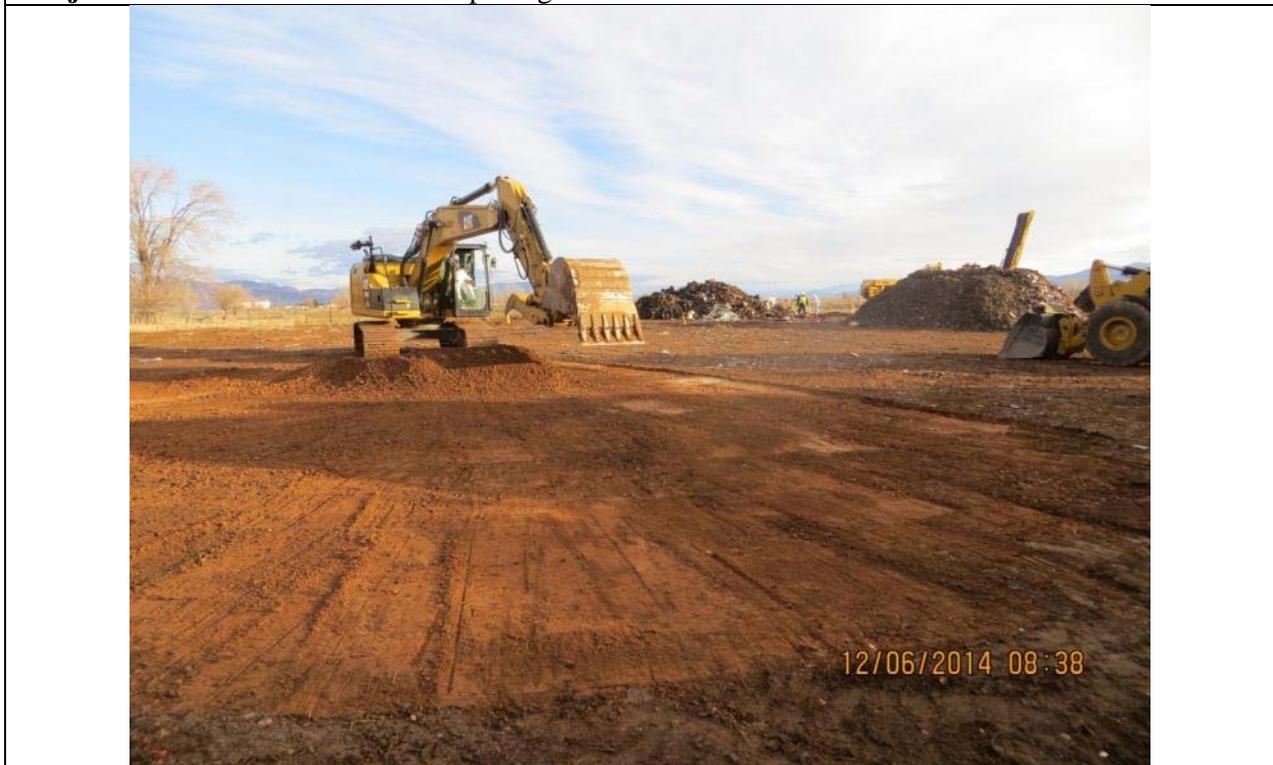
**Photo Number:** IMG\_D02.JPG **Date:** 12/5/14 **Direction:** Overhead **Photographer:** Bryniarski  
**Subject:** Electronic waste inside grinder feed chamber



**Photo Number:** IMG\_D03.JPG **Date:** 12/5/14 **Direction:** Overhead **Photographer:** Bryniarski  
**Subject:** Damaged grinder cutting screen (3-4 inch size)



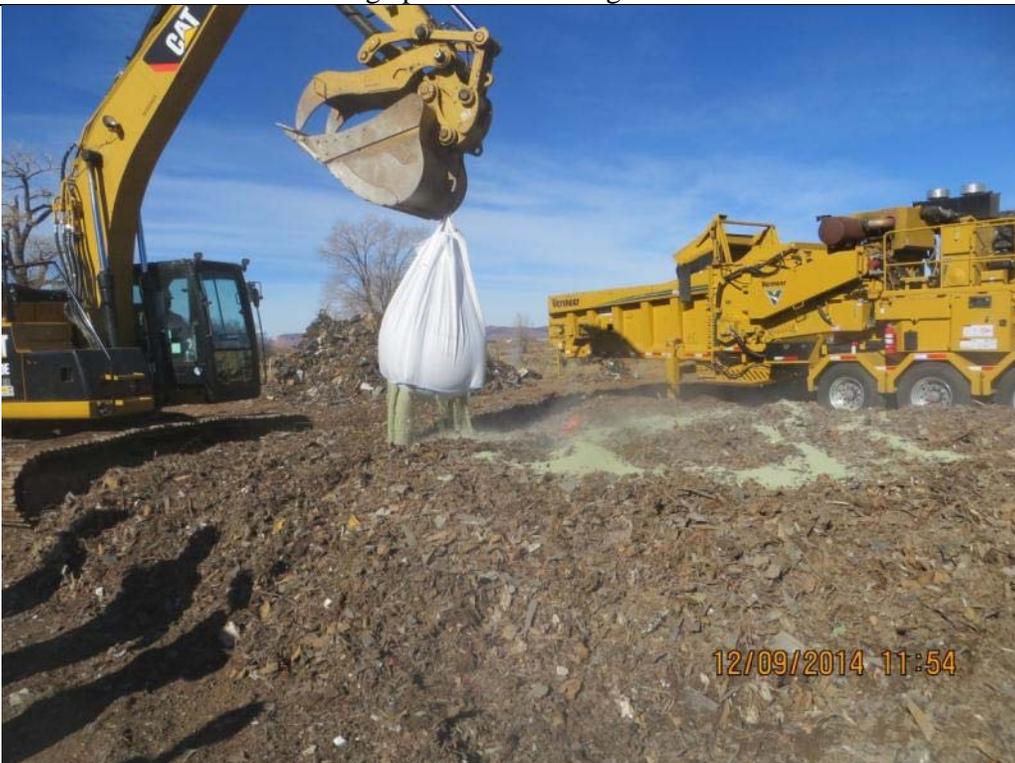
**Photo Number:** IMG\_1416.JPG **Date:** 12/5/14 **Direction:** West **Photographer:** Merritt  
**Subject:** Electronic waste and stock piled ground waste



**Photo Number:** IMG\_E02.JPG **Date:** 12/6/14 **Direction:** North **Photographer:** Bryniarski  
**Subject:** ERRS contractor removes impacted soil in waste stock pile footprint



**Photo Number:** 9-20141208\_125354.jpg **Date:** 12/8/14 **Direction:** West **Photographer:** Way  
**Subject:** ERRS contractor removes large pieces of leaded glass



**Photo Number:** IMG\_F04.JPG **Date:** 12/9/14 **Direction:** Northwest **Photographer:** Bryniarski  
**Subject:** ERRS contractor treats waste with fertilizer prior to second grinding process



**Photo Number:** IMG\_F09.JPG **Date:** 12/9/14 **Direction:** North **Photographer:** Bryniarski  
**Subject:** ERRS contractor loads waste for second grinding process



**Photo Number:** IMG\_G03.JPG **Date:** 12/10/14 **Direction:** Northeast **Photographer:** Bryniarski  
**Subject:** ERRS contractor loads cement into silo of pug mill prior to second waste treatment process



**Photo Number:** 19-20141210\_122103.jpg **Date:** 12/10/14 **Direction:** West **Photographer:** Way  
**Subject:** ERRS contractor loading pug mill with ground waste



**Photo Number:** IMG\_2392.JPG **Date:** 12/10/14 **Direction:** West **Photographer:** Way  
**Subject:** Grinding operations from atop the pug mill



**Photo Number:** IMG\_H04.JPG **Date:** 12/11/14 **Direction:** North **Photographer:** Bryniarski  
**Subject:** ERRS contractor loads remaining waste for second grinding process



**Photo Number:** IMG\_I05.JPG **Date:** 12/12/14 **Direction:** North **Photographer:** Bryniarski  
**Subject:** ERRS contractor loads waste into pug mill for second waste treatment process



**Photo Number:** IMG\_I07.JPG **Date:** 12/12/14 **Direction:** North **Photographer:** Bryniarski  
**Subject:** Original waste stock pile area after remove and soil grading



**Photo Number:** 36-20141212\_144539.jpg **Date:** 12/12/14 **Direction:** East **Photographer:** Way  
**Subject:** Treated waste stock piled for final disposal



**Photo Number:** IMG\_1459.JPG **Date:** 12/15/14 **Direction:** East **Photographer:** Merritt  
**Subject:** Roll off box loading for transport and final disposal



**Photo Number:** IMG\_1463.JPG **Date:** 12/15/14 **Direction:** South **Photographer:** Merritt  
**Subject:** ERRS contractor excavating impacted soil in former waste staging footprint



**Photo Number:** IMG\_1475.JPG **Date:** 12/16/14 **Direction:** Northwest **Photographer:** Merritt  
**Subject:** ERRS contractor treating remaining impacted soil with Portland cement



**Photo Number:** IMG\_1483.JPG **Date:** 12/16/14 **Direction:** North **Photographer:** Merritt  
**Subject:** Size and volume reduction of non-hazardous debris prior to disposal



**Photo Number:** IMG\_1489.JPG    **Date:** 12/16/14    **Direction:** North    **Photographer:** Merritt  
**Subject:** Site view after waste removal

## **Attachment E**

## **SITE HEALTH AND SAFETY PLAN (HASP)**

Office: Denver, CO  
Site Name: Stone Castle Recycling Site  
Client: U.S. EPA Region 8  
Work Location: Parowan, Iron, UT  
WO#: 20408.012.001.0183.00



## SITE HEALTH AND SAFETY PLAN (HASP)

**Prepared by:** Jeff Bryniarski      **W.O. Number:** 20408.012.001.0183.00      **Date:** 10/8/14

**Project Identification**

Office: DEN  
 Site Name: Stone Castle Recycling  
 Client: U.S. EPA Region 8  
 Work Location Address: Parowan, Iron, UT

**Site History:** See next page

**Scope of Work:** Site Assessment to include sampling of site waste and documentation

- Site visit only; site HASP not necessary. List personnel here and sign off below:
- Utility notification required. If required, provide utility notification agency, authorization number, and valid dates:

### Regulatory Status:

Site regulatory status:

<b>CERCLA/SARA</b>	<b>RCRA</b>	<b>Other Federal Agency</b>
<input checked="" type="checkbox"/> U.S. EPA	<input type="checkbox"/> U.S. EPA	<input type="checkbox"/> DOE
<input type="checkbox"/> State	<input type="checkbox"/> State	<input type="checkbox"/> USACE
<input type="checkbox"/> NPL Site	<b>NRC</b>	<input type="checkbox"/> Air Force
<input type="checkbox"/> OSHA	<input type="checkbox"/> 10 CFR 20	<input type="checkbox"/> _____
Hazard Communication (Req'd See Attachment D)		
<input type="checkbox"/> 1910	<input type="checkbox"/> 1926	<input type="checkbox"/> State

**Safety Officer Manual (Required to be On-Site)**  
 Based on the Hazard Assessment and Regulatory Status, determine the Standard HASP(s) applicable to this project. Indicate below which Standard HASP will be used and append the appropriate pages of this form along with the Standard Plan.

<input type="checkbox"/> Stack Test	<input type="checkbox"/> _____
<input type="checkbox"/> Air Emissions	<input type="checkbox"/> _____
<input type="checkbox"/> Asbestos	<input type="checkbox"/> _____
<input type="checkbox"/> Industrial Hygiene	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____

### Review and Approval Documentation:

Reviewed by:	<u>Dave Robinson</u>		Date: <u>9-Oct-14</u>
	Name (Print)	Signature	
Environmental Compliance Advisor	_____	_____	Date: _____
	Name (Print)	Signature	
Approved by:	<u>Dave Robinson</u>	_____	Date: _____
Project Manager	Name (Print)	Signature	

### Hazard Assessment and Equipment Selection:

In accordance with WESTON's Personal Protective Equipment Program and 29 CFR 1910.132, at the site prior to personnel beginning work, the FSO and/or the Site Manager have evaluated conditions and verified that the personal protective equipment selection outlined within this HASP is appropriate for the hazards known or expected to exist. (Refer to CEHS Program Manual Section 5, Personal Protection Program, for guidance.)

<input checked="" type="checkbox"/> <b>FSO</b>	<u>Jeff Bryniarski</u>		Date: <u>10/9/14</u>
	Name	Signature	
<input type="checkbox"/> <b>Site Manager</b>	_____	_____	Date: _____
	Name	Signature	

<input type="checkbox"/> <b>Project Environmental Compliance Officer</b>	_____	Date: _____
	Name	
<input type="checkbox"/> <b>Dangerous Goods Shipping Coordinator</b>	_____	Date: _____
	Name	

Project start date: 10/13/14	This site HASP <b>must be reissued/reapproved</b> for any activities conducted after:	Amendment date(s)	By:
End date: 10/31/14	Date: 10/1/15	1.	
		2.	
		3.	

## **Site History:**

This site was referred to EPA by the Solid and Hazardous Waste Program in the Utah Department of Environmental Quality, following a series of mysterious and well-publicized fires at electronics waste (e-waste) recycling facilities throughout the state operated by Stone Castle Recycling. The PRP, Stone Castle Recycling, LLC, was in the business of scrapping used and donated cathode-ray tube (CRT) television sets on behalf non-profit organizations and municipalities along the I-15 corridor in UT and selling component parts as raw materials. Included in this dismantling procedure, Stone Castle Recycling, LLC, was removing the cathode-ray from the leaded-glass vacuum tube inside the sets. This glass could be segregated, crushed, and sent to other leaded glass makers to melt down and create new leaded-glass CRTs. Following the move from analog to digital broadcasting, and the corresponding shift from CRT televisions to plasma and LCD high-definition televisions, the market for leaded glass evaporated almost overnight and Stone Castle Recycling had large volumes of a now-worthless raw material without sufficient revenue to properly dispose of, pay rent in warehouses, or pay employees. As a result, a tremendous volume of accumulated televisions, in various states of disassembly, are located at sites throughout UT.



## **BEHAVIOR-BASED SAFETY (BBS) – Pledge**

### **I Accept and Understand 100% Safe Work Is an Achievable Goal**

- ★ I will work to develop strong connections and team with my co-workers to establish a culture of working safely 100% of the time.
- ★ I will actively care about all Weston employees, our families, team contractors and clients.
- ★ I will help to keep our projects safe and will meet and exceed compliance requirements.
- ★ I will understand and comply with the Health and Safety Plan, Accident Prevention Plan, and Environmental Compliance Plan for each field project. They guide my actions.
- ★ I will stop any work that presents an imminent hazard to people or the environment or is not adequately addressed in the Health and Safety Plan, Accident Prevention Plan, or Environmental Compliance Plan.
- ★ I will identify changing conditions to address safety implications. No surprises!
- ★ I will identify unsafe working conditions and be proactive in correcting them.
- ★ I will coach and mentor and will accept coaching from others to encourage safe work behaviors.
- ★ I am empowered to share lessons-learned and foster continuous improvement.

### **I will Learn where I can get Assistance**

- ★ I will develop high quality relationships with my Division Environmental, Health, and Safety (EHS) Manager; Profit Center Safety Officer; and Field Safety Officer.
- ★ I will learn how and when to contact our Environmental Advisors.
- ★ I will get to know our Corporate EHS staff and become familiar with the Corporate EHS Portal Site.

### **I will Report All Incidents**

- ★ If a safety incident occurs, even if there is no injury or damage but there could have been, I will report the incident immediately.
- ★ I will conduct safety reviews of all incidents with my supervisor, if requested. The review will focus on cause and lessons-learned so that we can be proactive in preventing it from happening again.

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## PROJECT QUALITY PLEDGE GUIDE

Living by our core value of “Exceptional Quality” means we deliver products and services that meet the highest standards. In doing so, we strive to identify, understand, and execute the project scope of work according to our clients’ exceptional performance expectations. The Project Quality Pledge is the process we use to ensure our clients’ exceptional performance expectations are met – every time.

This document provides guidance and links to examples for developing and executing a successful Project Quality Pledge. All Pledges will not be the same; what is important is that **your** Pledge makes sense to **your client and your team**. Project Quality Pledges can be very detailed ([PENREN](#)), or streamlined ([IAS](#)), depending on what works for your client and team. It can be a stand-alone document or incorporated into the Project Execution Plan or Project Instructions ([Fort Sam](#)).

The three most important aspects of the Project Quality Pledge are:

- Talk to your client frequently
- Understand your client’s exceptional performance expectations
- Communicate client expectations to your team

### [Talk to Your Client](#)

You cannot know your clients’ exceptional performance expectations without talking to them. We must initiate and sustain a dialog with our clients. The ‘client’ may include several stakeholders, so communication is essential.

- Focus on exceptional performance expectations in all project phases (proposal to completion).
- Hold regularly-scheduled discussions with the client to ask about Weston performance.
- Schedule client-Weston meetings if any key client contacts change.
- Review/revise quality goals if client expectations change.
- Document and address client issues or suggestions and share with your team.

### [Understand Your Clients’ Exceptional Performance Expectations](#)

At its very basic level, the Pledge should identify our overall commitment to the client, including a statement describing that commitment ([Surf City](#)). Ask yourself, what is the shared vision?

- Define the clients’ exceptional performance expectations. These expectations translate into one or more goals included in the Pledge ([EcoTourism](#)). Inquire about any sustainability goals the client may have and discuss how our project could incorporate these goals.
- Develop the Project Quality Pledge. The lead for this effort is typically the CSM or PM.
- Identify and link WESTON and client contacts to ensure zippered communication. These contacts can be recorded in the Pledge or elsewhere; the important point is to link Weston and client contacts ([Sherwin Williams](#)).

### [Communicate Client Expectations to Your Team](#)

In order to meet our client’s exceptional performance expectations, we must secure the project team’s commitment to those expectations. Each team member should not only understand the Project Quality Pledge, but should also be able to articulate it to others and identify his/her specific role in achieving it.

- Discuss the Pledge at the kickoff meeting & regularly scheduled project meetings.
- Ensure each team member understands the Pledge, and his/her specific role.
- Have team members sign the Pledge. The Pledge can define each person’s specific role along with their signature ([IAS](#)), or provide a signature page for the overall pledge ([EcoTourism](#)).

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## ATTACHMENTS

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<b>ATTACHMENT A</b>	Chemical Contaminants Data Sheets
<b>ATTACHMENT B</b>	Safety Data Sheets
<b>ATTACHMENT C</b>	Safety Procedures/Field Operating Procedures (FLD Ops)
<b>ATTACHMENT D</b>	Hazard Communication Program
<b>ATTACHMENT E</b>	Air Sampling Data Sheets
<b>ATTACHMENT F</b>	Incident Reporting
<b>ATTACHMENT G</b>	Traffic Control Plan
<b>ATTACHMENT H</b>	Environmental Health & Safety Inspection Checklist
<b>ATTACHMENT I</b>	Hazard Checklist (Single Page)
<b>ATTACHMENT J</b>	Audit and Other Forms

## **1. PERSONNEL ON SITE INFORMATION**

## 1.1 WESTON REPRESENTATIVES

Organization/Branch	Name/Title	Address	Telephone
START 4/Denver	Eric Sandusky	1435 Garrison St. Lakewood, CO	678-516-7299 (cell) 303-729-6132 (office)
START 4/Denver	Ellie Kastner	1435 Garrison St. Lakewood, CO	302-540-0099 (cell) 303-729-6158 (office)
START 4/Denver	Jeff Bryniarski	1435 Garrison St. Lakewood, CO	708-284-2490 (cell) 303-729-6106 (office)
START 4/Denver	John Lucotch	1435 Garrison St. Lakewood, CO	970-301-1416 (cell)
START 4/Denver	Jen Patureau	1435 Garrison St. Lakewood, CO	303-968-0361 (cell)
START 4/Denver	Dave Robinson	1435 Garrison St. Lakewood, CO	937-572-3630 (cell) 303-729-6181 (office)

**Roles and Responsibilities:**

Dave Robinson- Project Manager; Jeff Bryniarski- Project Team Lead; Ellie Kastner- Project Scientist; Eric Sandusky- Project Scientist; John Lucotch- GIS Management; Jen Patureau - Project Scientist / Treatability Study Support

## 1.2 WESTON SUBCONTRACTORS

Organization/Branch	Name/Title	Address	Telephone
	Name: Title:	Street: City: State, Zip:	
	Name: Title:	Street: City: State, Zip:	

**Roles and Responsibilities:**

### SITE-SPECIFIC HEALTH AND SAFETY PERSONNEL

The Site Field Safety Officer (FSO) for activities to be conducted at this site is: Jeff Bryniarski

The Site Manager has ultimate responsibility for ensuring that the provisions of this Site HASP are adequate and implemented in the field.

Changing field conditions may require decisions to be made concerning adequate protection programs. Therefore, the personnel assigned as FSOs must be experienced and meet the additional training requirements specified by OSHA in 29 CFR 1910.120.

**Qualifications:**

40 Hazwoper certification, 8hr SHSC/FSO Course, 8-hr refresher, First Aid / CPR, Bloodborne Pathogens

**Designated alternates include:** Ellie Kastner, Eric Sandusky

## 1.3 SITE PERSONNEL AND CERTIFICATION STATUS

### 1.3.1 WESTON Employee Certification

<b>Name:</b> Eric Sandusky <b>Title:</b> Field Operations <b>Task(s):</b> All <b>Certification Level or Description:</b> 40 Hour Hazwoper <input checked="" type="checkbox"/> Medical Current <input checked="" type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input checked="" type="checkbox"/> Fit Test Current (Quant.)	<b>Name:</b> Ellie Kastner <b>Title:</b> Field Operations <b>Task(s):</b> All <b>Certification Level or Description:</b> <input checked="" type="checkbox"/> Medical Current <input checked="" type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input checked="" type="checkbox"/> Fit Test Current (Quant.)
<b>Name:</b> Jeff Bryniarski <b>Title:</b> PTL / Field Operations <b>Task(s):</b> All <b>Certification Level or Description:</b> <input checked="" type="checkbox"/> Medical Current <input checked="" type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input checked="" type="checkbox"/> Fit Test Current (Quant.)	<b>Name:</b> <b>Title:</b> <b>Task(s):</b> <b>Certification Level or Description:</b> <input type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)
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**TRAINING CURRENT - Training:** All personnel, including visitors, entering the exclusion or contamination reduction zones must have certifications of completion of training in accordance with OSHA 29 CFR 1910, 29 CFR 1926, or 29 CFR 1910.120.

**FIT TEST CURRENT - Respirator Fit Testing:** All persons, including visitors, entering any area requiring the use or potential use of any tight-fitting respirator must have had, as a minimum, a qualitative fit test, administered in accordance with OSHA 29 CFR 1910.134 or ANSI, within the last 12 months. If site conditions require the use of a full-face, tight-fitting, air-purifying respirator for protection from asbestos or lead, employees must have had a quantitative fit test, administered according to OSHA 29 CFR 1910.1001 or .1025 or 29 CFR 1926.1101 or .62, within the last 12 months.

**MEDICAL CURRENT - Medical Monitoring Requirements:** All personnel, including visitors, entering the exclusion or contamination reduction zones must be certified as medically fit to work and able to wear a respirator, if appropriate, in accordance with 29 CFR 1910 or 29 CFR 1926 (substance-specific), or 29 CFR 1910.120 (HAZWOPER).

The Site Field Safety Officer is responsible for verifying all certifications and fit tests.

## SITE PERSONNEL AND CERTIFICATION STATUS

### 1.3.2 Subcontractor's Health and Safety Program Evaluation

**Name of Subcontractor:**

**Address:**

**Activities To Be Conducted by Subcontractor:**

#### Evaluation Criteria

Medical Program meets OSHA/WESTON criteria  <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable  Comments:	Personal Protective Equipment available  <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable  Comments:	On-site monitoring equipment available, calibrated, and operated properly  <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable  Comments:
Safe Working Procedures clearly specified  <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable  Comments:	Training meets OSHA/WESTON criteria  <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable  Comments:	Emergency Procedures  <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable  Comments:
Decontamination Procedures  <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable  Comments:	General Health and Safety Program evaluation  <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable  Comments:	Additional comments:  <input type="checkbox"/> Subcontractor has agreed to and will conform to the WESTON HASP for this project.  <input type="checkbox"/> Subcontractor will work under its own HASP, which has been accepted by Project PM.

**Evaluation Conducted by:**

**Date:**

**Evaluation Source (SubTrack, etc.):**

#### Subcontractor

Certifications for all subcontractor personnel will be added to the HASP prior to beginning work.

<p><b>Name:</b></p> <p><b>Title:</b></p> <p><b>Task(s):</b></p> <p><b>Certification Level or Description:</b></p> <input type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)	<p><b>Name:</b></p> <p><b>Title:</b></p> <p><b>Task(s):</b></p> <p><b>Certification Level or Description:</b></p> <input type="checkbox"/> Medical Current <input type="checkbox"/> Training Current <input type="checkbox"/> Fit Test Current (Qual.) <input type="checkbox"/> Fit Test Current (Quant.)
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## **2. HEALTH AND SAFETY EVALUATION**

## 2.1 HEALTH AND SAFETY EVALUATION

### 2.1.1 Task Hazard Assessment

Background Review:  Complete     Partial    If partial why? **Additional sites from same PRP being reviewed by OSC Merritt**

**Activities Covered Under This Plan:**

No.	Task/Subtask	Description	Schedule
1		<b>Collect site waste samples (including mobilization/demobilization)</b>	<b>10/13/14-10/16/14</b>
2		<b>XRF site soil and waste</b>	<b>10/13/14-10/16/14</b>

**Types of Hazards:**

Numbers refer to one of the following hazard evaluation forms. Complete hazard evaluation forms for each appropriate hazard class.

<p><b>Physiochemical 1</b></p> <input type="checkbox"/> Flammable <input type="checkbox"/> Explosive <input type="checkbox"/> Corrosive <input type="checkbox"/> Reactive <input type="checkbox"/> O <sub>2</sub> Rich <input type="checkbox"/> O <sub>2</sub> Deficient	<p><b>Chemically Toxic 1</b></p> <input type="checkbox"/> Inhalation <input type="checkbox"/> Carcinogen <input checked="" type="checkbox"/> Ingestion <input type="checkbox"/> Mutagen <input type="checkbox"/> Contact <input type="checkbox"/> Teratogen <input type="checkbox"/> Absorption <input type="checkbox"/> OSHA 1910.1000 Substance (Air Contaminants) <input type="checkbox"/> OSHA Specific Hazard Substance Standard (Refer to following page for listing)	<p><b>Radiation 3</b></p> <p>Ionizing:</p> <input type="checkbox"/> Internal exposure <input type="checkbox"/> External exposure  <p>Non-ionizing:</p> <input checked="" type="checkbox"/> UV <input type="checkbox"/> IR <input type="checkbox"/> RF <input type="checkbox"/> MicroW <input type="checkbox"/> Laser	<p><b>Biological 2</b></p> <input type="checkbox"/> Etiological Agent <input checked="" type="checkbox"/> Other (plant, insect, animal)  <p><input type="checkbox"/> <b>Physical Hazards 4</b></p> <input type="checkbox"/> Construction Activities
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**Source/Location of Contaminants and Hazardous Substances:**

<p><b>Directly Related to Tasks</b></p> <input type="checkbox"/> Air <input type="checkbox"/> Other Surface <input type="checkbox"/> Groundwater <input checked="" type="checkbox"/> Soil <input type="checkbox"/> Surface Water <input type="checkbox"/> Sanitary Wastewater <input type="checkbox"/> Process Wastewater <input checked="" type="checkbox"/> Other <b>Site Waste</b>	<p><b>Indirectly Related to Tasks — Nearby Process(es) That Could Affect Team Members:</b></p> <input type="checkbox"/> Client Facility/WESTON Work Location <input type="checkbox"/> Nearby Non-Client Facility <p>Describe:</p> <input checked="" type="checkbox"/> Have activities (task[s]) been coordinated with facility? <p>Comments:</p> <p><b>OSC Merritt has secured site access</b></p>
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## HEALTH AND SAFETY EVALUATION

### 2.1.2 Chemical Hazards of Concern

 N/A

Chemical Contaminants of Concern

Attach data sheets from an acceptable source such as NIOSH pocket guide, condensed chemical dictionary, ACGIH TLV booklet, Hazardous Substances Data base (HSDB), etc. List chemicals and concentrations below and locate data sheets in Attachment A of this HASP.

 N/A

Identify hazardous materials used or on-site and attach Safety Data Sheets (SDSs) for all reagent type chemicals, solutions, or other identified materials that in normal use in performing tasks related to this project could produce hazardous substances. Ensure that all subcontractors and other parties working nearby are informed of the presence of these chemicals and the location of the SDSs. Obtain from subcontractors and other parties, lists of the hazardous materials they use or have on-site and identify location of the SDSs here. List chemicals and quantities below and locate SDSs in Attachment B of this HASP.

Chemical Name	Concentration ( )	Chemical Name	Quantity
Lead	Unknown	Nitric Acid (10% v/v)	0.5 L
Other heavy metals	Unknown	Alconox	0.5 L

#### OSHA-SPECIFIC HAZARDOUS SUBSTANCES

<input type="checkbox"/> 1910.1001 Asbestos	<input type="checkbox"/> 1910.1002 Coal tar pitch volatiles	<input type="checkbox"/> 1910.1003 4-Nitrobiphenyl, etc.	<input type="checkbox"/> 1910.1004 alpha-Naphthylamine
<input type="checkbox"/> 1910.1005 [Reserved]	<input type="checkbox"/> 1910.1006 Methyl chloromethyl ether	<input type="checkbox"/> 1910.1007 3,3'-Dichlorobenzidine (and its salts)	<input type="checkbox"/> 1910.1008 bis-Chloromethyl ether
<input type="checkbox"/> 1910.1009 beta-Naphthylamine	<input type="checkbox"/> 1910.1010 Benzidine	<input type="checkbox"/> 1910.1011 4-Aminodiphenyl	<input type="checkbox"/> 1910.1012 Ethyleneimine
<input type="checkbox"/> 1910.1013 beta-Propiolactone	<input type="checkbox"/> 1910.1014 2-Acetylaminofluorene	<input type="checkbox"/> 1910.1015 4-Dimethylaminoazobenzene	<input type="checkbox"/> 1910.1016 N-Nitrosodimethylamine
<input type="checkbox"/> 1910.1017 Vinyl chloride	<input type="checkbox"/> 1910.1018 Inorganic arsenic	<input checked="" type="checkbox"/> 1910.1025 Lead (Att. FLD# 46)	<input type="checkbox"/> 1910.1026 Chromium VI (att. FLD 53)
<input checked="" type="checkbox"/> 1910.1027 Cadmium (Att. 50 FLD)	<input type="checkbox"/> 1910.1028 Benzene (Att. FLD# 54 or 61)	<input type="checkbox"/> 1910.1029 Coke oven emissions	<input type="checkbox"/> 1910.1043 Cotton dust
<input type="checkbox"/> 1910.1044 1,2-Dibromo-3-chloropropane	<input type="checkbox"/> 1910.1045 Acrylonitrile	<input type="checkbox"/> 1910.1047 Ethylene oxide	<input type="checkbox"/> 1910.1048 Formaldehyde
<input type="checkbox"/> 1910.1050 Methylenedianiline	<input type="checkbox"/> 1910.1051 1,3 Butadiene	<input type="checkbox"/> 1910.1052 Methylene chloride	<input type="checkbox"/> 1926.60 Methylenedianiline
<input checked="" type="checkbox"/> 1926.62 Lead	<input type="checkbox"/> 1926.1101 Asbestos (Att. FLD 52)	<input checked="" type="checkbox"/> 1926.1127 Cadmium	

## HEALTH AND SAFETY EVALUATION

### 2.1.3 Biological Hazards of Concern

**Poisonous Plants** (FLD 43-D)

Location/Task No(s) **All**

Source:  Known  Suspect  
 Route of Exposure:  Inhalation  Ingestion  
 Contact  Direct Penetration

Team Member(s) Allergic:  Yes  No  
 Immunization required:  Yes  No

**Insects** (FLD 43-B)

Location/Task No(s) **All**

Source:  Known  Suspect  
 Route of Exposure:  Inhalation  Ingestion  
 Contact  Direct Penetration

Team Member(s) Allergic:  Yes  No  
 Immunization required:  Yes  No

**Snakes, Reptiles** (FLD 43-A)

Location/Task No(s) **All**

Source:  Known  Suspect  
 Route of Exposure:  Inhalation  Ingestion  
 Contact  Direct Penetration

Team Member(s) Allergic:  Yes  No  
 Immunization required:  Yes  No

**Animals** (FLD 43-A)

Location/Task No(s) **All**

Source:  Known  Suspect  
 Route of Exposure:  Inhalation  Ingestion  
 Contact  Direct Penetration

Team Member(s) Allergic:  Yes  No  
 Immunization required:  Yes  No

FLD 43 — WESTON Biohazard Field Operating Procedures: Att. OP

**Sewage**

Location/Task No.(s):

Source:  Known  Suspect  
 Route of Exposure:  Inhalation  Ingestion  
 Contact  Direct Penetration

Team Member(s) Allergic:  Yes  No  
 Immunization required:  Yes  No

Tetanus Vaccination within Past 10 yrs:  Yes  No

**Etiologic Agents** (FLD -C)(List)

Location/Task No.(s):

Source:  Known  Suspect  
 Route of Exposure:  Inhalation  Ingestion  
 Contact  Direct Penetration

Team Member(s) Allergic:  Yes  No  
 Immunization required:  Yes  No

FLD 43-C — Mold and Fungus. Att. OP

FLD 44 — WESTON Bloodborne Pathogens Exposure Control Plan – First Aid Procedures: Att. OP

FLD 45 — WESTON Bloodborne Pathogens Exposure Control Plan – Working with Infectious Waste: Att. OP

## HEALTH AND SAFETY EVALUATION

### 2.1.4 Radiation Hazards of Concern

#### NONIONIZING RADIATION

Task No.	Type of Nonionizing Radiation	Source On-Site	TLV/PEL	Wavelength Range	Control Measures	Monitoring Instrument
All	Ultraviolet	Solar			Appropriate clothing/ sunscreen	None
	Infrared					
	Radio Frequency					
	Microwave					
	Laser					

#### IONIZING RADIATION

Task No.	Radionuclide	Major Radiations	Radioactive Half-Life (Years)	DAC ( $\mu\text{Ci}/\text{mL}$ )			Surface Contamination Limit	Monitoring Instrument
				D	W	Y		
2	N/A	X-rays (XRF Inst).						

## HEALTH AND SAFETY EVALUATION

### 2.1.5 Physical Hazards of Concern (Note: Check related RAVS-FLDs for Oil & Gas Clients)

Physical Hazard Condition	Physical Hazard	Attach OP	WESTON OP Titles
Loud noise	Hearing loss/disruption of communication	<input type="checkbox"/>	Section 7.0 - ECH&S Program Manual Occupational Noise & HC Program
Inclement weather	Rain/humidity/cold/ice/snow/lightning	<input checked="" type="checkbox"/>	FLD02 - Inclement Weather
Steam heat stress	Burns/displaced oxygen/wet working surfaces	<input type="checkbox"/>	FLD03 - Hot Process - Steam
Heat stress	Burns/hot surfaces/low pressure steam	<input type="checkbox"/>	FLD04 - Hot Process - LT3
Ambient heat stress	Heat rash/cramps/exhaustion/heat stroke	<input checked="" type="checkbox"/>	FLD05 - Heat Stress Prevention/Monitoring
Cold stress	Hypothermia/frostbite	<input checked="" type="checkbox"/>	FLD06 - Cold Stress
Cold/wet	Trench/paddy/immersion foot/edema	<input checked="" type="checkbox"/>	FLD02 - Inclement Weather
Confined spaces	Falls/burns/drowning/engulfment/electrocution	<input type="checkbox"/>	FLD08 - Confined Space Entry
Industrial Trucks	Fork Lift Truck Safety	<input type="checkbox"/>	FLD09 - Powered Industrial Trucks
Improper lifting	Back strain/abdomen/arm/leg muscle/joint injury	<input checked="" type="checkbox"/>	FLD10 - Manual Lifting/Handling Heavy Objects
Uneven surfaces	Vehicle accidents/slips/trips/falls	<input checked="" type="checkbox"/>	FLD11 - Rough Terrain
Poor housekeeping	Slips/trips/falls/punctures/cuts/fires	<input checked="" type="checkbox"/>	FLD12 - Housekeeping
Structural integrity	Crushing/overhead hazards/compromised floors	<input type="checkbox"/>	FLD13 - Structural Integrity
Improper cylinder. handling	Mechanical injury/fire/explosion/suffocation	<input type="checkbox"/>	FLD16 - Pressure Systems - Compressed Gases
Water hazards	Poor visibility/entanglement/drowning/cold stress	<input type="checkbox"/>	FLD17 - Diving
Water hazards	Drowning/heat/cold stress/hypothermia/falls	<input type="checkbox"/>	FLD18 - Operation and Use of Boats
Water hazards	Drowning/frostbite/hypothermia/falls/electrocution	<input type="checkbox"/>	FLD19 - Working Over Water
Vehicle hazards	Struck by vehicle/collision	<input checked="" type="checkbox"/>	FLD20 - Traffic
Explosions	Explosion/fire/thermal burns	<input type="checkbox"/>	FLD21 - Explosives
Moving mechanical parts	Crushing/pinch points/overhead hazards/electrocution	<input type="checkbox"/>	FLD22 - Earth Moving Equipment
Moving mech. parts	Overhead hazards/electrocution	<input type="checkbox"/>	FLD23 - Cranes, Rigging, and Slings
Working at elevation	Overhead hazards/falls/electrocution	<input type="checkbox"/>	FLD24 - Aerial Lifts/Man lifts
Working at elevation	Overhead hazards/falls/electrocution	<input type="checkbox"/>	FLD25 - Working at Elevation
Working at elevation	Overhead hazards/falls/electrocution/slips	<input type="checkbox"/>	FLD26 - Ladders
Working at elevation	Slips/trips/falls/overhead hazards	<input type="checkbox"/>	FLD27 - Scaffolding
Trench cave-in	Crushing/falling/overhead hazards/suffocation	<input type="checkbox"/>	FLD28 - Excavating/Trenching
Physiochemical	Explosions/fires from oxidizing, flam./corr. material	<input type="checkbox"/>	FLD30 - Hazardous Materials Use/Storage
Physiochemical	Fire and explosion	<input type="checkbox"/>	FLD31 - Fire Prevention/Response Plan Required
Physiochemical	Fire	<input type="checkbox"/>	FLD32 - Fire Extinguishers Required
Structural integrity	Overhead/electrocution/slips/trips/falls/fire	<input type="checkbox"/>	FLD33 - Demolition
Electrical	Electrocution/shock/thermal burns	<input type="checkbox"/>	FLD34 - Utilities
Electrical	Electrocution/shock/thermal burns	<input type="checkbox"/>	FLD35 - Electrical Safety
Burns/fires	Heat stress/fires/burns	<input type="checkbox"/>	FLD36 - Welding/Cutting/Brazing/Radiography
Impact/thermal	Thermal burns/high pressure impaction/heat stress	<input type="checkbox"/>	FLD37 - Pressure Washers/Sand Blasting
Impaction/electrical	Smashing body parts/pinching/cuts/electrocution	<input checked="" type="checkbox"/>	FLD38 - Hand and Power Tools
Poor visibility	Slips/trips/falls	<input type="checkbox"/>	FLD39 - Illumination
Fire/explosion	Burns/impaction	<input type="checkbox"/>	FLD40 - Storage Tank Removal/Decommissioning
Communications	Disruption of communications	<input type="checkbox"/>	FLD41 - Std. Hand/Emergency Signals
Energy/release	Unexpected release of energy	<input type="checkbox"/>	FLD42 - Lockout/Tag-out
Biological Hazards	Biological Hazards at site	<input type="checkbox"/>	FLD43 - Biological Hazards
Animals	Animals	<input checked="" type="checkbox"/>	FLD43A - Animals
Insects	Stinging and Biting Insects	<input checked="" type="checkbox"/>	FLD43B - Stinging and Biting Insects
Molds/Fungi	Molds and Fungi	<input type="checkbox"/>	FLD43C - Molds and Fungi
Hazardous Plants	Hazardous Plants	<input checked="" type="checkbox"/>	FLD43D - Hazardous Plants
Etiologic Agents	Etiologic Agents	<input type="checkbox"/>	FLD43E - Etiologic Agents

## 2.1.5 Physical Hazards of Concern (Continued)

Physical Hazard Condition	Physical Hazard	Attach OP	WESTON OP Titles
Biological Hazards/BBP	Biological Hazards/BBP at site/First Aid Providers	<input type="checkbox"/>	FLD44 - Biological Hazards – Bloodborne Pathogens Exposure Control Plan – First Aid Providers
Infectious Waste	Infectious Waste at site/BBP/ at site/Infectious Waste	<input type="checkbox"/>	FLD45 – Biological Hazards – Bloodborne Pathogens Exposure Control Plan – Work With Infectious Waste
Lead Contaminated sites	Lead poisoning	<input checked="" type="checkbox"/>	FLD46 - Control of Exposure to Lead
Puncture/cuts	Cuts/ dismemberment/gouges	<input type="checkbox"/>	FLD47 - Clearing, Grubbing and Logging Operations
Government Inspector	Disruption of Operations	<input type="checkbox"/>	FLD48 – Federal, State, Local Regulatory Agency Inspections
Unknown Chemicals	Exposure to hazardous materials/waste	<input type="checkbox"/>	FLD49 – Safe Storage of Samples
Cadmium	Exposure Control	<input checked="" type="checkbox"/>	FLD50 – Cadmium Exposure Control Plan
Process Safety Procedure	Safety Procedure	<input type="checkbox"/>	FLD51 – Process Safety Procedure
Asbestos	Asbestos Exposure	<input type="checkbox"/>	FLD52 – Asbestos Exposure Control Plan
Hexavalent Chromium	Exposure Control Plan	<input type="checkbox"/>	FLD53 – Hexavalent Chromium Exposure Control Plan
Benzene	Exposure Control Plan	<input type="checkbox"/>	FLD54 - <u>Benzene Exposure Control Plan</u>
Hydrofluoric acid	Working with HF	<input type="checkbox"/>	FLD55 – Working with Hydrofluoric Acid
Moving drill rig parts	Crushing/pinch points/overhead hazards/electrocution	<input type="checkbox"/>	FLD56 – Drilling Safety
Vehicles/driving	Accidents,/fatigue/cell phone use	<input checked="" type="checkbox"/>	FLD 57 – Motor Vehicle Safety
Improper material handling	Back injury/crushing from load shifts/equipment/tools	<input type="checkbox"/>	FLD 58 – Drum Handling Operations
COC decontamination	COCs/slip, trip, and falls/waste generation/environmental compliance/PPE	<input checked="" type="checkbox"/>	FLD59 - Decontamination
Drilling hazards	Electrocution/overhead hazards/pinch points	<input type="checkbox"/>	Environmental Remediation Drilling Safety Guideline - 2005
Fatigue	Long work hours	<input checked="" type="checkbox"/>	FLD60 – Employee Duty Schedule
Benzene/Gasoline	Benzene exposure	<input type="checkbox"/>	FLD61 – Gasoline Contaminant Exposure
Cardiac Arrest	Accident/Heart Attack	<input type="checkbox"/>	FLD62 – 2009 Automatic External Defibrillator (AED) Program Guidelines
Ionizing Radiation	Ionizing Radiation	<input checked="" type="checkbox"/>	FLD63 – Using Handheld X-Ray Fluorescence (XRF) Analyzers
Working Alone	Isolated Working Conditions	<input type="checkbox"/>	FLD64 – Employees Working Alone

### **3. SITE SECURITY**

### 3.1 SITE SECURITY ASSESSMENT FORM

DESCRIPTION	
<b>Site Name and Location:</b> Stone Castle Recycling Parowan, UT	<b>Number of Employees and Subcontractors on Site:</b> 3 STARTs
<b>Type of Work:</b> Sample collection and site documentation	
<b>Projected Start Date:</b> TBD	<b>Projected Completion Date:</b> TBD
<b>Are Chemicals Used or Stored That Meet DHS/CFATS Requirements?</b> <a href="http://www.dhs.gov/files/programs/gc_1185909570187.shtm">http://www.dhs.gov/files/programs/gc_1185909570187.shtm</a>	
<b>If Yes, Attach Plan and DHS Approvals to HASP.</b> <a href="http://www.dhs.gov/files/programs/gc_1169501486197.shtm">http://www.dhs.gov/files/programs/gc_1169501486197.shtm</a>	
<b>SURROUNDING AREA</b> ( <i>urban/suburban/rural; residential/commercial/industrial; traffic volume, population density, etc</i> ) Rural; residential	
<b>THREAT INDICATORS</b> ( <i>apparent social, economic, political, ethnic, criminal, gang related, and other risk factors</i> ) none	
<b>COUNTERMEASURES</b> ( <i>Current and projected risk mitigation factors</i> )	
<b>Security Systems</b> (Reference Site Security Checklist): NA	
<b>Security Procedures</b> (Reference Site Security Checklist): NA	
<b>Closest police station location and contact information:</b> Parowan City Police Department 5 S Main St Parowan, UT 84761 (435) 477-3331	
<b>Other relevant observations or information to factor into the Site Security Plan:</b> NA	
<b>OVERALL SECURITY ASSESSMENT</b> ( <i>Submit "Medium" and "High" risk assessments to Corporate Security for review</i> )	
<b>Risk Level:</b> <input checked="" type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High	<b>Date:</b> 10/8/14
<b>Site Safety Officer:</b> Jeff Bryniarski	<b>Office Safety Manager:</b> Dave Robinson
<b>USE ATTACHMENTS FOR ADDITIONAL COMMENTS, MAPS AND DIAGRAMS</b>	

## 3.2 WESTON SITE SECURITY CHECKLIST

*To be used for completing the Site Security Assessment Form required on all WESTON projects.  
Contact Corporate Security for guidance on any items that are "NEEDED" and "NOT IN PLACE".*

CONTROL MEASURES:	In-Place / Not In-Place	Needed / Not Needed
<b>1. Fencing, lockable gates, no holes (enter details below):</b> a. Chain Link material b. Other material (describe) c. Height (in feet and inches) d. Top cover (e.g., razor wire) e. Signage (e.g., No Trespassing)	<input type="checkbox"/> / <input checked="" type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>	<input type="checkbox"/> / <input checked="" type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>
<b>2. Guard service:</b> a. During working hours? b. During non-working hours? c. As a stationary post? d. As a roving patrol? e. Do they have written instructions? f. Do they have adequate training? g. Do they have adequate supervision? h. Do they have daily reports? i. Do they have daily inspections?	<input type="checkbox"/> / <input checked="" type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>	<input type="checkbox"/> / <input checked="" type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>
<b>3. ID badges displayed by:</b> a. Employees? b. Contractors? c. Visitors?	<input checked="" type="checkbox"/> / <input type="checkbox"/> <input checked="" type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>	<input checked="" type="checkbox"/> / <input type="checkbox"/> <input checked="" type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>
<b>4. Log books for:</b> a. Employee sign-in? b. Visitor sign-in? c. Vehicle sign-in? d. Incident reports? e. Property removal? f. Keys and access cards?	<input type="checkbox"/> / <input checked="" type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>	<input type="checkbox"/> / <input checked="" type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>
<b>5. Electronics and hardware options (enter details below):</b> a. Access card readers b. Adequate lighting c. Closed circuit TV d. Alarm system e. Other (describe)	<input type="checkbox"/> / <input checked="" type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>	<input type="checkbox"/> / <input checked="" type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>
<b>6. Procedures documented for:</b> a. Security training? b. Security instructions? c. Contingency plans? d. Opening and closing protocols? e. Other (describe)?	<input type="checkbox"/> / <input checked="" type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>	<input type="checkbox"/> / <input checked="" type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>
<b>7. Law enforcement liaison documented for:</b> a. Municipal police? b. County sheriff? c. State police? d. Federal agencies (specify)?	<input type="checkbox"/> / <input checked="" type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>	<input type="checkbox"/> / <input checked="" type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/>

## WESTON SITE SECURITY CHECKLIST (CONTINUED)

*To be used for completing the Site Security Assessment Form required on all WESTON projects.  
Contact Corporate Security for guidance on any items that are "NEEDED" and "NOT IN PLACE".*

CHAIN OF COMMAND:	Name	24/7 Contact Information
a. Site Security Coordinator	Jeff Bryniarski	708-284-2490
b. Site Supervisor	Jeff Bryniarski	708-284-2490
c. Project Manager	Dave Robinson	937-572-3630
d. PC Manager	John Glabach	303-885-1027

**REMARKS (use this section and supplemental pages to comment on details, exceptions or additional observations):**

## **4. TASK BY TASK ASSESSMENT**

## 4.1 TASK-BY-TASK RISK ASSESSMENT

### 4.1.1 Task 1 Description

**TASK 1: Collection of site waste samples and documentation- including site mobilization/demobilization**  
 (Driving is inherently dangerous. A team of three people will drive to the site and will communicate, take turns driving, and take breaks in order to reduce risks. The team will assess current weather conditions along the route and will allow extra time and take appropriate precautions if adverse weather is anticipated. All drivers and passengers will adhere to traffic laws, drive defensively, and wear seatbelts at all times vehicles are operated. Safe lifting practices will be utilized when loading and unloading equipment from vehicles.)

#### EQUIPMENT REQUIRED/USED

Hard Hat	Coolers	Alconox	Sledge Hammer	iPAD
Steel-toe boots	Sample Jars	Spray Bottles	5-gal Buckets	GPS
Leather Gloves	Scoops	DeCon Water	Zip-loc Bags	
Nitrile Gloves	Shovels	Nitric Acid		
Safety Glasses	Hang Auger			

#### POTENTIAL HAZARDS/RISKS

##### Chemical

Hazard Present                      Risk Level:  H             M             L

What justifies risk level?

**Site soils may be contaminated with heavy metals, primarily lead. Decontamination of the sampling equipment will be conducted outside or other locations where there is adequate ventilation. All handling of nitric acid solutions will be conducted with adequate hand and eye protection.**

##### Physical

Hazard Present                      Risk Level:  H             M             L

What justifies risk level?

**Walking on uneven terrain. Hazard will be mitigated by being cautious and refraining from documenting while walking. Use of hand auger for shallow soil sampling presents hazards from the sharp auger bucket edges and from overexertion. Team will utilize appropriate sturdy gloves for hand protection and will trade off augering duties to avoid overexertion.**

##### Biological

Hazard Present                      Risk Level:  H             M             L

What justifies risk level?

**There is a chance of encountering bees, bugs, aggressive pets, and poisonous plants. Hazard will be mitigated by taking caution and being observant.**

#### RADIOLOGICAL

Hazard Present                      Risk Level:  H             M             L

What justifies risk level?

**No radiological hazards involved with sampling and documentation.**

#### LEVELS OF PROTECTION/JUSTIFICATION

**Level D is acceptable since risks are primarily physical.**

#### SAFETY PROCEDURES REQUIRED AND/OR FIELD OPS UTILIZED

All work will be performed in accordance with the provisions of this HASP, OSHA guidelines, and WESTON Standard Operating Procedures.

## TASK-BY-TASK RISK ASSESSMENT (Continued)

### 4.1.2 Task 2 Description

**TASK 2: XRF analysis of site soil and waste**

#### EQUIPMENT REQUIRED/USED

Hard Hat	Coolers	Alconox	Sledge Hammer	iPAD
Steel-toe boots	Sample Jars	Spray Bottles	5-gal Buckets	GPS
Leather Gloves	Scoops	DeCon Water	Zip-loc Bags	
Nitrile Gloves	Shovels	Nitric Acid		
Safety Glasses	Hang Auger	InnovX XRF		

#### POTENTIAL HAZARDS/RISKS

##### Chemical

Hazard Present                      Risk Level:  H                       M                       L

What justifies risk level?

**Site soils may be contaminated with heavy metals, primarily lead. Team will utilize basic dust control during soil sampling – minimize dust creation by using hand augering. Soil concentrations are not expected to exceed that where observance of a visible airborne dust limit would be insufficient for respiratory protection. (1/2 of current TLV, or 1.5 mg/m<sup>3</sup>, during sampling, containerizing and decontamination procedures). Decontamination of the sampling equipment will be conducted outside or other locations where there is adequate ventilation. All handling of nitric acid solutions will be conducted with adequate hand and eye protection. All sample drying, sieving and analysis preparations will be conducted in an area with adequate ventilation.**

##### Physical

Hazard Present                      Risk Level:  H                       M                       L

What justifies risk level?

**Walking on uneven terrain. Hazard will be mitigated by being cautious and refraining from documenting while walking. Use of hand auger for shallow soil sampling presents hazards from the sharp auger bucket edges and from overexertion. Team will utilize appropriate sturdy gloves for hand protection and will trade off augering duties to avoid overexertion.**

##### Biological

Hazard Present                      Risk Level:  H                       M                       L

What justifies risk level?

**There is a chance of encountering bees, bugs, aggressive pets, and poisonous plants. Hazard will be mitigated by taking caution and being observant.**

#### RADIOLOGICAL

Hazard Present                      Risk Level:  H                       M                       L

What justifies risk level?

**The x-ray fluorescence analyzer poses a radiation risk. Operator has experience and training using the instrument and will operate it with caution. Team will utilize all appropriate manufacturer's safety procedures and equipment to minimize the risk of exposure to side scatter radiation (xrays).**

#### LEVELS OF PROTECTION/JUSTIFICATION

**Level D**

#### SAFETY PROCEDURES REQUIRED AND/OR FIELD OPS UTILIZED

All work will be performed in accordance with the provisions of this HASP, OSHA guidelines, and WESTON Standard Operating Procedures.

## 4.1 TASK-BY-TASK RISK ASSESSMENT (Continued)

### 4.1.3 Task 3 Description

**TASK 3:**

#### EQUIPMENT REQUIRED/USED

#### POTENTIAL HAZARDS/RISKS

##### Chemical

Hazard Present      Risk Level:  H     M     L  
What justifies risk level?

##### Physical

Hazard Present      Risk Level:  H     M     L  
What justifies risk level?

##### Biological

Hazard Present      Risk Level:  H     M     L  
What justifies risk level?

##### RADIOLOGICAL

Hazard Present      Risk Level:  H     M     L  
What justifies risk level?

#### LEVELS OF PROTECTION/JUSTIFICATION

#### SAFETY PROCEDURES REQUIRED AND/OR FIELD OPS UTILIZED

All work will be performed in accordance with the provisions of this HASP, OSHA guidelines, and WESTON Standard Operating Procedures.

## 4.1 TASK-BY-TASK RISK ASSESSMENT (Continued)

### 4.1.4 Task 4 Description

**TASK 4:**

#### EQUIPMENT REQUIRED/USED

#### POTENTIAL HAZARDS/RISKS

##### Chemical

Hazard Present      Risk Level:  H     M     L  
What justifies risk level?

##### Physical

Hazard Present      Risk Level:  H     M     L  
What justifies risk level?

##### Biological

Hazard Present      Risk Level:  H     M     L  
What justifies risk level?

##### RADIOLOGICAL

Hazard Present      Risk Level:  H     M     L  
What justifies risk level?

#### LEVELS OF PROTECTION/JUSTIFICATION

#### SAFETY PROCEDURES REQUIRED AND/OR FIELD OPS UTILIZED

All work will be performed in accordance with the provisions of this HASP, OSHA guidelines, and WESTON Standard Operating Procedures.

## 4.1 TASK-BY-TASK RISK ASSESSMENT (Continued)

### 4.1.5 Task 5 Description

**TASK 5:**

#### EQUIPMENT REQUIRED/USED

#### POTENTIAL HAZARDS/RISKS

##### Chemical

Hazard Present      Risk Level:  H     M     L  
What justifies risk level?

##### Physical

Hazard Present      Risk Level:  H     M     L  
What justifies risk level?

##### Biological

Hazard Present      Risk Level:  H     M     L  
What justifies risk level?

##### RADIOLOGICAL

Hazard Present      Risk Level:  H     M     L  
What justifies risk level?

#### LEVELS OF PROTECTION/JUSTIFICATION

#### SAFETY PROCEDURES REQUIRED AND/OR FIELD OPS UTILIZED

All work will be performed in accordance with the provisions of this HASP, OSHA guidelines, and WESTON Standard Operating Procedures.



### 4.3 DESCRIPTION OF LEVELS OF PROTECTION

Level C	Level B ( ) or Level A ( )
<p><b>Task(s):</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Head</li> <li><input type="checkbox"/> Eye and Face</li> <li><input type="checkbox"/> Hearing</li> <li><input type="checkbox"/> Arms and Legs Only</li> <li><input type="checkbox"/> Whole Body</li> <li><input type="checkbox"/> Apron</li> <li><input type="checkbox"/> Hand – Gloves</li> <li><input type="checkbox"/> Gloves</li> <li><input type="checkbox"/> Gloves</li> <li><input type="checkbox"/> Foot - Safety Boots</li> <li><input type="checkbox"/> Outer Boots</li> <li><input type="checkbox"/> Boots (Other)</li> <li><input type="checkbox"/> Half Face</li> <li><input type="checkbox"/> Cart./Canister</li> <li><input type="checkbox"/> Full Face</li> <li><input type="checkbox"/> Cart./Canister</li> <li><input type="checkbox"/> PAPR</li> <li><input type="checkbox"/> Cart./Canister</li> <li><input type="checkbox"/> Type C</li> <li><input type="checkbox"/> Fall Protection</li> <li><input type="checkbox"/> Flotation</li> <li><input type="checkbox"/> Other</li> </ul>	<p><b>Task(s):</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Head</li> <li><input type="checkbox"/> Eye and Face</li> <li><input type="checkbox"/> Hearing</li> <li><input type="checkbox"/> Arms and Legs Only</li> <li><input type="checkbox"/> Whole Body</li> <li><input type="checkbox"/> Apron</li> <li><input type="checkbox"/> Hand - Gloves</li> <li><input type="checkbox"/> Gloves</li> <li><input type="checkbox"/> Gloves</li> <li><input type="checkbox"/> Foot - Safety Boots</li> <li><input type="checkbox"/> Outer Boots</li> <li><input type="checkbox"/> Boots (Other)</li> <li><input type="checkbox"/> SAR - Airline</li> <li><input type="checkbox"/> SCBA</li> <li><input type="checkbox"/> Comb. Airline/SCBA</li> <li><input type="checkbox"/> Cascade System</li> <li><input type="checkbox"/> Compressor</li> <li><input type="checkbox"/> Fall Protection</li> <li><input type="checkbox"/> Flotation</li> <li><input type="checkbox"/> Other</li> </ul>

## **5. MONITORING PROGRAM**

## 5.1 SITE OR PROJECT HAZARD MONITORING PROGRAM

### 5.1.1 Air Monitoring Instruments

#### Instrument Selection and Initial Check Record

**Reporting Format:**     Field Notebook    Field Data Sheets\*    Air Monitoring Log    Trip Report    Other

Instrument	Task No.(s)	Number Required	Number Received	Checked Upon Receipt	Comment	Initials
<input type="checkbox"/> <b>RAD</b> <input type="checkbox"/> GM (Pancake) <input type="checkbox"/> NaI (Micro R) <input type="checkbox"/> ZnS (Alpha Scintillator) <input type="checkbox"/> Other _____				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> <b>PID</b> <input type="checkbox"/> MiniRAE <input type="checkbox"/> MultiRAE (LEL/O2/H2S/CO/PID) <input type="checkbox"/> TVA 1000 (PID/FID) <input type="checkbox"/> Other _____				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> <b>FID</b> <input type="checkbox"/> TVA 1000 (FID/PID) <input type="checkbox"/> Other _____				<input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> <b>PDR 1000 (Particulate)</b>				<input type="checkbox"/>		
<input type="checkbox"/> <b>Single Gas Meter (SGM)</b> Specify Chemical:				<input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> <b>Personal Sampling Pump</b> Specify Media:				<input type="checkbox"/> <input type="checkbox"/>		
<input type="checkbox"/> Bio-Aerosol Monitor				<input type="checkbox"/>		
<input type="checkbox"/> Tubes/type: _____						
<input type="checkbox"/> Tubes/type: _____						
<input type="checkbox"/> Tubes/type: _____						
<input type="checkbox"/> Tubes/type: _____						



## 5.2 SITE AIR MONITORING PROGRAM

### Action Levels

These Action Levels, if not defined by regulation, are some percent (usually 50%) of the applicable PEL/TLV/REL. That number must also be adjusted to account for instrument response factors.

	Tasks	Action Level		Action
<input type="checkbox"/> <b>Explosive or Flammable Atmosphere</b>		Ambient Air Concentration	Confined Space Concentration	
		<10% LEL	0 to 1% LEL	Work may continue. Consider toxicity potential.
		10 to 25% LEL	1 to 10% LEL	Work may continue. Increase monitoring frequency.
		>25% LEL	>10% LEL	Work must stop. Ventilate area before returning.
<input type="checkbox"/> <b>Oxygen</b>		Ambient Air Concentration	Confined Space Concentration	
		<19.5% O <sub>2</sub>	<19.5% O <sub>2</sub>	Leave area. Re-enter only with self-contained breathing apparatus.
		19.5% to 25% O <sub>2</sub>	19.5% to 23.5% O <sub>2</sub>	Work may continue. Investigate changes from 21%.
		>25% O <sub>2</sub>	>23.5% O <sub>2</sub>	Work must stop. Ventilate area before returning.
<input type="checkbox"/> <b>Radiation</b>		< 3 times background 3 times background to < 1 mR/hour		Continue work. Radiation above background levels (normally 0.01-0.02 mR/hr) signifies possible radiation source(s) present. Continue investigation with caution. Perform thorough monitoring. Consult with a Health Physicist.
		> 1 mrem/hour		Potential radiation hazard. Evacuate site. Continue investigation only upon the advice of Health Physicist.
<input type="checkbox"/> <b>Organic Gases and Vapors</b>				
<input checked="" type="checkbox"/> <b>Inorganic Gases, Vapors, and Particulates</b>	All	Visual dust action level of <1.5 mg/m <sup>3</sup> for protection against anticipated concentrations of metals in site soils.		Level D

### **5.3 ACTION LEVELS**

**NA**

## 6. HOSPITAL INFORMATION

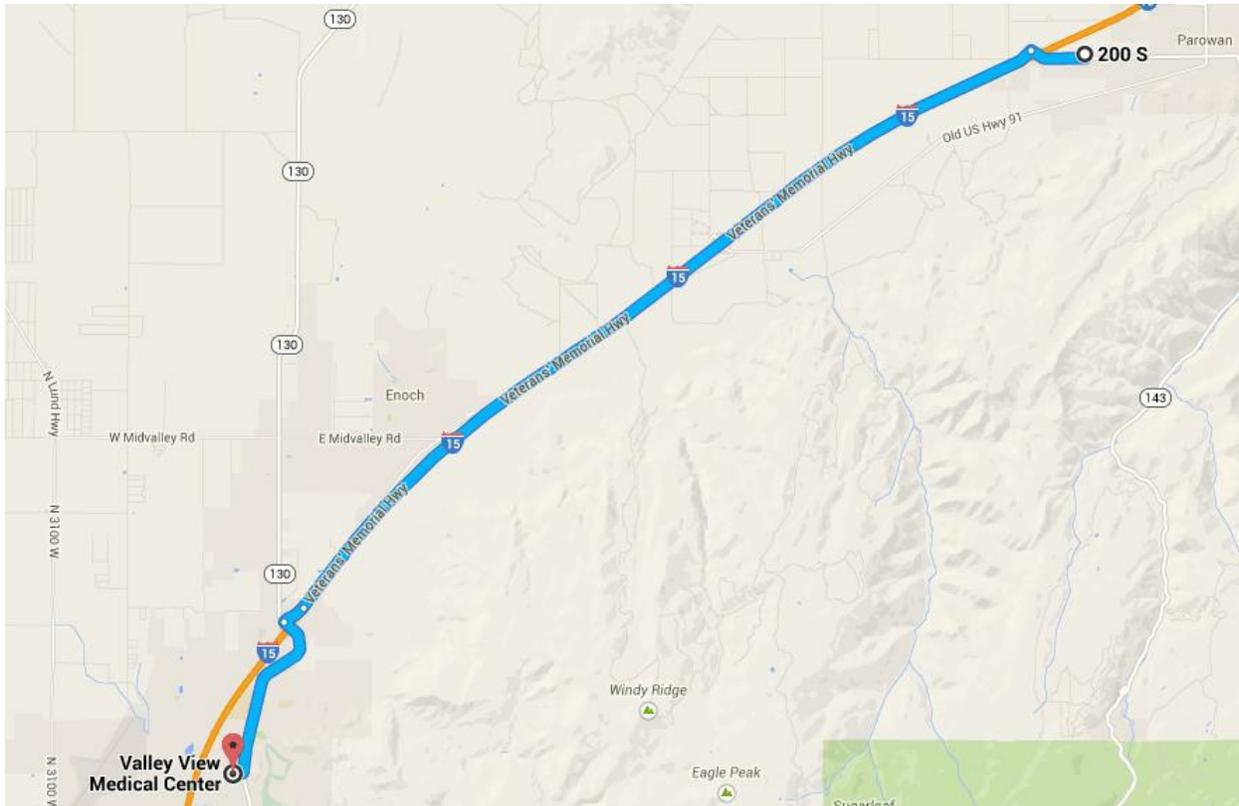
## 6.1 CONTINGENCIES

### 6.1.1 Emergency Contacts and Phone Numbers

Agency	Contact	Phone Number
WorkCare WESTON Medical Director WorkCare WESTON Program Administrator	Dr. Peter Greaney Heather Lind	<b>From 6 am to 4:30 pm Pacific Time</b> call 800-455-6155 and dial 0 for the Operator or ext. 475 for Heather Lind to request the on-call clinician.
After-Business Hours Contact (In Case of Emergency Only)		<b>4:31 p.m. – 5:59 a.m. Pacific Time, all day Saturday, Sunday, and Holidays</b> call 800-455-6155 Dial 3 to reach the after-hours answering service. Request that the service connect you with the on-call clinician or the on-call clinician will return your call within 30 minutes.
WESTON Corporate EHS Director	Jim Davis	334-319-0380 (office), 261-633-7536 *(mobile)
WESTON Medical Programs Manager	Jim Davis	334-319-0380 (office), 261-633-7536 *(mobile)
WESTON Health & Safety Division Safety Manager	Dave Robinson	937-572-3630 (mobile)
WESTON Health & Safety Local Safety Officer	Dave Robinson	937-572-3630 (mobile)
Parowan Fire Department	911	435-477-3331
Parowan City Police Department	911	435-477-3331
WESTON FSO Cell Phone	Jeff Bryniarski	708-284-2490
WESTON PM Cell Phone	Dave Robinson	937-572-3630
Client Site Phone	NA	--
Site Telephone	NA	--
Nearest Telephone	NA	--
Poison Control		(800) 222-1222
<b>Local Medical Emergency Facility(s) - LMF</b>		
Name of Hospital: Valley View Medical Center		
Address: 1303 North Main Street Cedar City, UT 84721		Phone No.: 435-868-5000
Name of Contact: ER		Phone No.: 911
<b>Type of Service:</b> <input type="checkbox"/> Physical trauma only <input type="checkbox"/> Chemical exposure only <input checked="" type="checkbox"/> Physical trauma and chemical exposure <input checked="" type="checkbox"/> Available 24 hours	<b>Route to Hospital:</b> <b>(See Attached)</b>	<b>Travel time from site:</b> 16 min  <b>Distance to hospital:</b> 15.9 miles <b>Name/no. of 24-hr ambulance service:</b> 911

---

## 6.1.2 Hospital Map



Begin: Parowan, UT 84761

Head west on UT-143 N/200 S toward Roni Continue to follow UT-143 N	0.8 mi
Turn left to merge onto I-15 S toward Cedar City	12.4 mi
Take exit 62 for UT-130 toward Cedar City/Enoch	0.3 mi
Turn left onto UT-130 S	
Destination will be on the right	2.4 mi

Arrive: Valley View Medical Center  
1303 N Main St, Cedar City, UT 84721

*This map is subject to Google's Terms of Service, and Google is the owner of rights therein.  
Portions of this image may have been removed for clarity.*

## 6.1 CONTINGENCIES

### 6.1.3 Response Plans

<p><b>Medical - General</b></p> <p>Provide first aid, if trained; assess and determine need for further medical assistance.</p> <p>Transport or arrange for transport after appropriate decontamination.</p> <p>LMF = Local Medical Facility</p>	<p>First Aid Kit:  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Blood Borne Pathogens Kit:  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><b>Type</b></p> <p>Appropriate sized ANSI-approved Type III Kit, plus BBP</p>	<p><b>Location</b></p> <p>In Vehicle</p>	<p>Special First-Aid Procedures:                  Cyanides on-site  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, contact LMF. Do they have antidote kit?  <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>Eyewash required  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p><b>Type</b></p>	<p><b>Location</b></p>	<p><b>HF on-site</b>  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, need neutralizing ointment for first-aid kit. Contact LMF.</p>
	<p>Shower required  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p><b>Type</b></p>	<p><b>Location</b></p>	
<p><b>Plan for Response to Spill/Release</b></p> <p>In the event of a spill or release, ensure safety, assess situation, and perform containment and control measures, as appropriate.</p>	<p>a. Cleanup per SDSs if small; or sound alarm, call for assistance, notify Emergency Coordinator</p> <p>b. Evacuate to pre-determined safe place</p> <p>c. Account for personnel</p> <p>d. Determine if team can respond safely</p> <p>e. Mobilize per Site Spill Response Plan</p>	<p><b>Plan for Response to Fire/Explosion</b></p> <p>In the event of a fire or explosion, ensure personal safety, assess situation, and perform containment and control measures, as appropriate:</p>	<p>a. Sound alarm and call for assistance, notify Emergency Coordinator</p> <p>b. Evacuate to predetermined safe place</p> <p>c. Account for personnel</p> <p>d. Use fire extinguisher <u>only if safe and trained</u> in its use</p> <p>e. Stand by to inform emergency responders of materials and conditions</p>	<p><b>Fire Extinguishers</b></p> <p>Type/Location</p> <p>_____</p> <p>/</p> <p>_____</p> <p>/</p> <p>_____</p> <p>/</p> <p>_____</p> <p>/</p> <p>_____</p> <p>/</p>
<p>Description of Spill Response Gear</p>	<p>Location</p>	<p>Description (Other Fire Response Equipment)</p>		<p>Location</p>
<p>Plan to Respond to Security Problems</p>				
<p>Avoid confrontation, call 911; notify PM, SO and USEPA OSC</p>				
<p> </p>				
<p> </p>				

## **7. DECONTAMINATION PLAN**

## 7.1 GENERAL DECONTAMINATION PLAN

### Personnel Decontamination

Consistent with the levels of protection required, step-by-step procedures for personnel decontamination for each level of protection are attached.

### Levels of Protection Required for Decontamination Personnel

The levels of protection required for personnel assisting with decontamination will be:

Level B

Level C

Level D

Modifications include:

### Disposition of Decontamination Wastes

Provide a description of waste disposition including identification of storage area, hauler, and final disposal site, if applicable

Contaminated gloves will be placed in the trash.

### Equipment Decontamination

A procedure for decontamination steps required for non-sampling equipment and heavy machinery follows:

NA

### Sampling Equipment Decontamination

Sampling equipment will be decontaminated in accordance with the following procedure:

Sampling equipment will be brushed and then washed withalconox and rinsed with deionized or distilled water.

## 7.2 LEVEL D DECONTAMINATION PLAN

Check indicated functions or add steps, as necessary:

Function	Description of Process, Solution, and Container
<input type="checkbox"/> Segregated equipment drop	
<input type="checkbox"/> Boot cover and glove wash	
<input type="checkbox"/> Boot cover and glove rinse	
<input type="checkbox"/> Tape removal - outer glove and boot	
<input type="checkbox"/> Boot cover removal	
<input checked="" type="checkbox"/> Outer glove removal	Place in trash bag

### HOTLINE

<input type="checkbox"/> Suit/safety boot wash	
<input type="checkbox"/> Suit/boot/glove rinse	
<input type="checkbox"/> Safety boot removal	
<input type="checkbox"/> Suit removal	
<input type="checkbox"/> Inner glove wash	
<input type="checkbox"/> Inner glove rinse	
<input checked="" type="checkbox"/> Inner glove removal	Place in trash bag
<input type="checkbox"/> Inner clothing removal	

### CONTAMINATION REDUCTION ZONE (CRZ)/SAFE ZONE BOUNDARY

<input type="checkbox"/> Field wash	
<input type="checkbox"/> Redress	

**Disposal Plan, End of Day:**  
Discard trash bag as solid waste.

**Disposal Plan, End of Week:**  
Discard trash bag as solid waste.

**Disposal Plan, End of Project:**  
Discard trash bag as solid waste.

### 7.3 LEVEL C DECONTAMINATION PLAN

Check indicated functions or add steps, as necessary:

Function	Description of Process, Solution, and Container
<input type="checkbox"/> Segregated equipment drop	
<input type="checkbox"/> Boot cover and glove wash	
<input type="checkbox"/> Boot cover and glove rinse	
<input type="checkbox"/> Tape removal - outer glove and boot	
<input type="checkbox"/> Boot cover removal	
<input type="checkbox"/> Outer glove removal	

#### HOTLINE

<input type="checkbox"/> Suit/safety boot wash	
<input type="checkbox"/> Suit/boot/glove rinse	
<input type="checkbox"/> Safety boot removal	
<input type="checkbox"/> Suit removal	
<input type="checkbox"/> Inner glove wash	
<input type="checkbox"/> Inner glove rinse	
<input type="checkbox"/> Facepiece removal	
<input type="checkbox"/> Inner glove removal	
<input type="checkbox"/> Inner clothing removal	

#### CONTAMINATION REDUCTION ZONE (CRZ)/SAFE ZONE BOUNDARY

<input type="checkbox"/> Field wash	
<input type="checkbox"/> Redress	

**Disposal Plan, End of Day:**

**Disposal Plan, End of Week:**

**Disposal Plan, End of Project:**

### 7.4 LEVEL B ( ) or Level A ( ) DECONTAMINATION PLAN

Check indicated functions or add steps, as necessary:

Function	Description of Process, Solution, and Container
<input type="checkbox"/> Segregated equipment drop	
<input type="checkbox"/> Boot cover and glove wash	
<input type="checkbox"/> Boot cover and glove rinse	
<input type="checkbox"/> Tape removal - outer glove and boot	
<input type="checkbox"/> Boot cover removal	
<input type="checkbox"/> Outer glove removal	

#### HOTLINE

<input type="checkbox"/> Suit/safety boot wash	
<input type="checkbox"/> Suit/SCBA/boot/glove rinse	
<input type="checkbox"/> Safety boot removal	
<input type="checkbox"/> Remove SCBA backpack without disconnecting	
<input type="checkbox"/> Splash suit removal	
<input type="checkbox"/> Inner glove wash	
<input type="checkbox"/> Inner glove rinse	
<input type="checkbox"/> SCBA disconnect and facepiece removal	
<input type="checkbox"/> Inner glove removal	
<input type="checkbox"/> Inner clothing removal	

#### CONTAMINATION REDUCTION ZONE (CRZ)/SAFE ZONE BOUNDARY

<input type="checkbox"/> Field wash	
<input type="checkbox"/> Redress	

**Disposal Plan, End of Day:**

**Disposal Plan, End of Week:**

**Disposal Plan, End of Project:**

## **8. TRAINING AND BRIEFING TOPICS/SIGN OFF SHEET**

## 8.1 TRAINING AND BRIEFING TOPICS

The following items will be covered at the site-specific training meeting, daily or periodically.

<input checked="" type="checkbox"/> Site characterization and analysis, Sec. 3.0, 29 CFR 1910.120 I	<input type="checkbox"/> Level A
<input checked="" type="checkbox"/> Physical hazards	<input type="checkbox"/> Level B
<input checked="" type="checkbox"/> Chemical hazards	<input type="checkbox"/> Level C
<input checked="" type="checkbox"/> Animal bites, stings, and poisonous plants	<input checked="" type="checkbox"/> Level D
<input type="checkbox"/> Etiologic (infectious) agents	<input type="checkbox"/> Monitoring, 29 CFR 1910.120 (h)
<input type="checkbox"/> Site control, 29 CFR 1910.120 d	<input checked="" type="checkbox"/> Decontamination, 29 CFR 1910.120 (k)
<input type="checkbox"/> Engineering controls and work practices, 29 CFR 1910.120 (g)	<input type="checkbox"/> Emergency response, 29 CFR 1910.120 (l)
<input type="checkbox"/> Heavy machinery	<input type="checkbox"/> Elements of an emergency response, 29 CFR 1910.120 (l)
<input type="checkbox"/> Forklift	<input type="checkbox"/> Procedures for handling site emergency incidents, 29 CFR 1910.120 (l)
<input type="checkbox"/> Backhoe	<input type="checkbox"/> Off-site emergency response, 29 CFR 1910.120 (l)
<input type="checkbox"/> Equipment	<input type="checkbox"/> Handling drums and containers, 29 CFR 1910.120 (j)
<input checked="" type="checkbox"/> Tools	<input type="checkbox"/> Opening drums and containers
<input type="checkbox"/> Ladder, 29 CFR 1910.25.26.26 + 29 CFR 1926.1053	<input type="checkbox"/> Electrical material handling equipment
<input type="checkbox"/> Overhead and underground utilities	<input type="checkbox"/> Radioactive waste
<input type="checkbox"/> Scaffolds	<input type="checkbox"/> Shock-sensitive waste
<input type="checkbox"/> Structural integrity	<input type="checkbox"/> Laboratory waste packs
<input type="checkbox"/> Unguarded openings - wall, floor, ceilings	<input type="checkbox"/> Sampling drums and containers
<input type="checkbox"/> Pressurized air cylinders	<input checked="" type="checkbox"/> Shipping and transport, 49 CFR 172.101, IATA
<input type="checkbox"/> Personal protective equipment, 29 CFR 1910.120 (g); 29 CFR 1910.134	<input type="checkbox"/> Tank and vault procedures
<input type="checkbox"/> Respiratory protection, 29 CFR 1910.120 (g); ANSI Z88.2	<input type="checkbox"/> Illumination, 29 CFR 1926.26
<input type="checkbox"/> Working over water FLD-19 <input type="checkbox"/>	<input type="checkbox"/> Sanitation, 29 CFR 1926.27
<input type="checkbox"/> Boating safety FLD-18	<input checked="" type="checkbox"/> Proper lifting techniques
<input checked="" type="checkbox"/> Heat Stress / Cold Stress	<input checked="" type="checkbox"/> Handling glass waste



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**ATTACHMENT A**  
**CHEMICAL CONTAMINANTS DATA SHEETS**

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Insert sheets on following page.

*July 2013*

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# NIOSH Pocket Guide to Chemical Hazards

<b>Lead</b>		CAS 7439-92-1	
<b>Pb</b>		RTECS <a href="#">OF7525000</a>	
<b>Synonyms &amp; Trade Names:</b> Lead metal, Plumbum		DOT ID & Guide	
<b>Exposure Limits</b>	NIOSH REL*: TWA 0.050 mg/m <sup>3</sup> <a href="#">See Appendix C</a> [*Note: The REL also applies to other lead compounds (as Pb) -- <a href="#">see Appendix C.</a> ]		
	OSHA PEL*: [1910.1025] TWA 0.050 mg/m <sup>3</sup> <a href="#">See Appendix C</a> [*Note: The PEL also applies to other lead compounds (as Pb) -- <a href="#">see Appendix C.</a> ]		
IDLH 100 mg/m <sup>3</sup> (as Pb) See: <a href="#">7439921</a>		<b>Conversion</b>	
<b>Physical Description</b> A heavy, ductile, soft, gray solid.			
MW: 207.2	BP: 3164°F	MLT: 621°F	Sol: Insoluble
VP: 0 mmHg (approx)	IP: NA		Sp.Gr: 11.34
Fl.P: NA	UEL: NA	LEL: NA	
Noncombustible Solid in bulk form.			
<b>Incompatibilities &amp; Reactivities:</b> Strong oxidizers, hydrogen peroxide, acids			
<b>Measurement Methods</b> NIOSH <a href="#">7082</a> , <a href="#">7105</a> , <a href="#">7300</a> , <a href="#">7301</a> , <a href="#">7303</a> , <a href="#">7700</a> , <a href="#">7701</a> , <a href="#">7702</a> , <a href="#">9100</a> , <a href="#">9102</a> , <a href="#">9105</a> ; OSHA <a href="#">ID121</a> , <a href="#">ID125G</a> , <a href="#">ID206</a> ; See: <a href="#">NMAM</a> or <a href="#">OSHA Methods</a>			
<b>Personal Protection &amp; Sanitation</b> ( <a href="#">See protection</a> ) Skin: Prevent skin contact Eyes: Prevent eye contact Wash skin: Daily Remove: When wet or contaminated Change: Daily		<b>First Aid</b> ( <a href="#">See procedures</a> ) Eye: Irrigate immediately Skin: Soap flush promptly Breathing: Respiratory support Swallow: Medical attention immediately	
<a href="#">Important additional information about respirator selection</a>			
<b>Respirator Recommendations</b> ( <a href="#">See Appendix E</a> ) NIOSH/OSHA			
<b>Up to 0.5 mg/m<sup>3</sup>:</b> (APF = 10) Any air-purifying respirator with an N100, R100, or P100 filter (including N100, R100, and P100 filtering facepieces) except quarter-mask respirators. <a href="#">Click here</a> for information on selection of N, R, or P filters. (APF = 10) Any supplied-air respirator			
<b>Up to 1.25 mg/m<sup>3</sup>:</b> (APF = 25) Any supplied-air respirator operated in a continuous-flow mode (APF = 25) Any powered, air-purifying respirator with a high-efficiency particulate filter			
<b>Up to 2.5 mg/m<sup>3</sup>:</b> (APF = 50) Any air-purifying, full-facepiece respirator with an N100, R100, or P100 filter. <a href="#">Click here</a> for information on selection of N, R, or P filters. (APF = 50) Any supplied-air respirator that has a tight-fitting facepiece and is operated in a continuous-flow mode (APF = 50) Any powered, air-purifying respirator with a tight-fitting facepiece and a high-efficiency particulate filter (APF = 50) Any self-contained breathing apparatus with a full facepiece (APF = 50) Any supplied-air respirator with a full facepiece			
<b>Up to 50 mg/m<sup>3</sup>:</b> (APF = 1000) Any supplied-air respirator operated in a pressure-demand or other positive-pressure mode			
<b>Up to 100 mg/m<sup>3</sup>:</b> (APF = 2000) Any supplied-air respirator that has a full facepiece and is operated in a pressure-demand or other positive-pressure mode			
<b>Emergency or planned entry into unknown concentrations or IDLH conditions:</b> (APF = 10,000) Any self-contained breathing apparatus that has a full facepiece and is operated in a pressure-demand or other positive-pressure mode (APF = 10,000) Any supplied-air respirator that has a full facepiece and is operated in a pressure-demand or other positive-pressure mode in combination with an auxiliary self-contained positive-pressure breathing apparatus			
<b>Escape:</b> (APF = 50) Any air-purifying, full-facepiece respirator with an N100, R100, or P100 filter. <a href="#">Click here</a> for information on selection of N, R, or P filters./Any appropriate escape-type, self-contained breathing apparatus			
<b>Exposure Routes</b> inhalation, ingestion, skin and/or eye contact			
<b>Symptoms</b> Lassitude (weakness, exhaustion), insomnia; facial pallor; anorexia, weight loss, malnutrition; constipation, abdominal pain, colic; anemia; gingival lead line; tremor; paralysis wrist, ankles; encephalopathy; kidney disease; irritation eyes; hypotension			
<b>Target Organs</b> Eyes, gastrointestinal tract, central nervous system, kidneys, blood, gingival tissue			

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**ATTACHMENT B**  
**SAFETY DATA SHEETS**  
**(ATTACH SDS)**

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Insert documents on following page.

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**Attach SDS Sheets for:**

Nitric Acid Solution  
Alconox

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## ATTACHMENT C

### **SAFETY PROCEDURES/FIELD OPERATING PROCEDURES (FLD OPS)**

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Insert documents on following page.

In lieu of attaching individual copies of FLDs, the site safety officer or his designee may elect to maintain an electronic copy of the WESTON Corporate Environmental Compliance, Health, and Safety Program Manual (including all FLDs) on site in an electronic format. The most recent version of the CEHS Program Manual and supporting documents are located at:

<http://portal/services/EHS/SitePages/CEHSProgramElements.aspx>

July 2013

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**ATTACHMENT D**  
**HAZARD COMMUNICATION PROGRAM**

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## SITE-SPECIFIC HAZARD COMMUNICATION PROGRAM

### ***Location-Specific Hazard Communication Program/Checklist***

To ensure an understanding of and compliance with the Hazard Communication Standard, WESTON will use this checklist/document (or similar document) in conjunction with the WESTON Written Hazard Communication Program as a means of meeting site- or location-specific requirements.

While responsibility for activities within this document reference the WESTON Safety Officer (SO), it is the responsibility of all personnel to ensure compliance. Responsibilities under various conditions can be found within the WESTON Written Hazard Communication Program.

To ensure that information about the dangers of all hazardous chemicals used by WESTON is known by all affected employees, the following Hazard Communication Program has been established. All affected personnel will participate in the Hazard Communication Program. This written program, as well as WESTON's Corporate Hazard Communication Program, will be available for review by any employee, employee representative, representative of OSHA, NIOSH, or any affected employer/employee on a multi-employer site.

- Site or other location name/address: Stone Castle Recycling- Parowan, UT
- Site/Project/Location Manager: Jeff Bryniarski / Dave Robinson / Bryniarski
- Site/Location Safety Officer: Jeff Bryniarski
- List of chemicals compiled, format:  HASP  Other: \_\_\_\_\_
- Location of SDS files: w/ HASP
- Training conducted by: Name: \_\_\_\_\_ Date: \_\_\_\_\_
- Indicate format of training documentation:  Field Log:  Other: \_\_\_\_\_
- Client briefing conducted regarding hazard communication: \_\_\_\_\_
- If multi-employer site (client, subcontractor, agency, etc.), indicate name of affected companies:  
\_\_\_\_\_
- Other employer(s) notified of chemicals, labeling, and SDS information: \_\_\_\_\_
- Has WESTON been notified of other employer's or client's hazard communication program(s), as necessary?  Yes  No

### ***List of Hazardous Chemicals***

A list of known hazardous chemicals used by WESTON personnel must be prepared and attached to this document or placed in a centrally identified location with the SDSs. Further information on each chemical may be obtained by reviewing the appropriate SDS. The list will be arranged to enable cross-reference with the SDS file and the label on the container. The SO or Location Manager is responsible for ensuring the chemical listing remains up-to-date.

### ***Container Labeling***

The WESTON SO will verify that all containers received from the chemical manufacturer, importer, or distributor for use on-site are clearly labeled.

The SO is responsible for ensuring that labels are placed where required and for comparing SDSs and other information with label information to ensure correctness.

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### ***Safety Data Sheets (SDSs)***

The SO is responsible for establishing and monitoring WESTON's SDS program for the location. The SO will ensure that procedures are developed to obtain the necessary SDSs and will review incoming SDSs for new or significant health and safety information. He/she will see that any new information is passed on to the affected employees. If an SDS is not received at the time of initial shipment, the SO will call the manufacturer and have an SDS delivered for that product in accordance with the requirements of WESTON's Written Hazard Communication Program.

A log for, and copies of, SDSs for all hazardous chemicals in use will be kept in the SDS folder at a location known to all site workers. SDSs will be readily available to all employees during each work shift. If an MSDS is not available, immediately contact the WESTON SO or the designated alternate. When a revised SDS is received, the SO will immediately replace the old SDS.

### ***Employee Training and Information***

The SO is responsible for the WESTON site-specific personnel training program. The SO will ensure that all program elements specified below are supplied to all affected employees.

At the time of initial assignment for employees to the work site, or whenever a new hazard is introduced into the work area, employees will attend a health and safety meeting or briefing that includes the information indicated below.

- Hazardous chemicals present at the work site.
- Physical and health risks of the hazardous chemicals.
- The signs and symptoms of overexposure.
- Procedures to follow if employees are overexposed to hazardous chemicals.
- Location of the SDS file and Written Hazard Communication Program.
- How to determine the presence or release of hazardous chemicals in the employee's work area.
- How to read labels and review SDSs to obtain hazard information.
- Steps WESTON has taken to reduce or prevent exposure to hazardous chemicals.
- How to reduce or prevent exposure to hazardous chemicals through the use of controls procedures, work practices, and personal protective equipment.
- Hazardous, non-routine tasks to be performed (if any).
- Chemicals within unlabeled piping (if any).

### ***Hazardous Non-routine Tasks***

When employees are required to perform hazardous non-routine tasks, the affected employee(s) will be given information by the SO about the hazardous chemicals he or she may use during such activity. This information will include specific chemical hazards, protective and safety measures the employee can use, and steps WESTON is using to reduce the hazards. These steps include, but are not limited to, ventilation, respirators, presence of another employee, and emergency procedures.

### ***Chemicals in Unlabeled Pipes***

Work activities may be performed by employees in areas where chemicals are transferred through unlabeled pipes. Prior to starting work in these areas, the employee will contact the SO, at which time information as to the chemical(s) in the pipes, potential hazards of the chemicals or the process involved, and the safety precautions that should be taken will be determined and presented.

### ***Multi-Employer Work Sites***

It is the responsibility of the SO to provide other employers with information about hazardous chemicals imported by WESTON to which their employees may be exposed, along with suggested safety precautions. It is also the responsibility of the SO and the Site Manager to obtain information about hazardous chemicals used by other employers to which WESTON employees may be exposed. WESTON's chemical listing will be made available to other employers, as requested. SDSs will be available for viewing, as necessary.

The location, format, and/or procedures for accessing SDS information must be relayed to affected employees.

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**ATTACHMENT E**  
**AIR SAMPLING DATA SHEETS**

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## SITE AIR MONITORING PROGRAM

### Field Data Sheets

**Location:**

% LEL	% O <sub>2</sub>	PID (units)	FID (units)	Aerosol Monitor (mg/m <sup>3</sup> )	GM: Shield Probe/ Thin Window		NaI (uR/hr)	ZnS (cpm)
					mR/hr	cpm		
Monitox (ppm)				Detector Tube(s)				
Sound Levels (dBA)		Illumination	pH	Other	Other	Other	Other	Other

**Location:**

% LEL	% O <sub>2</sub>	PID (units)	FID (units)	Aerosol Monitor (mg/m <sup>3</sup> )	GM: Shield Probe/ Thin Window		NaI (uR/hr)	ZnS (cpm)
					mR/hr	cpm		
Monitox (ppm)				Detector Tube(s)				
Sound Levels (dBA)		Illumination	pH	Other	Other	Other	Other	Other

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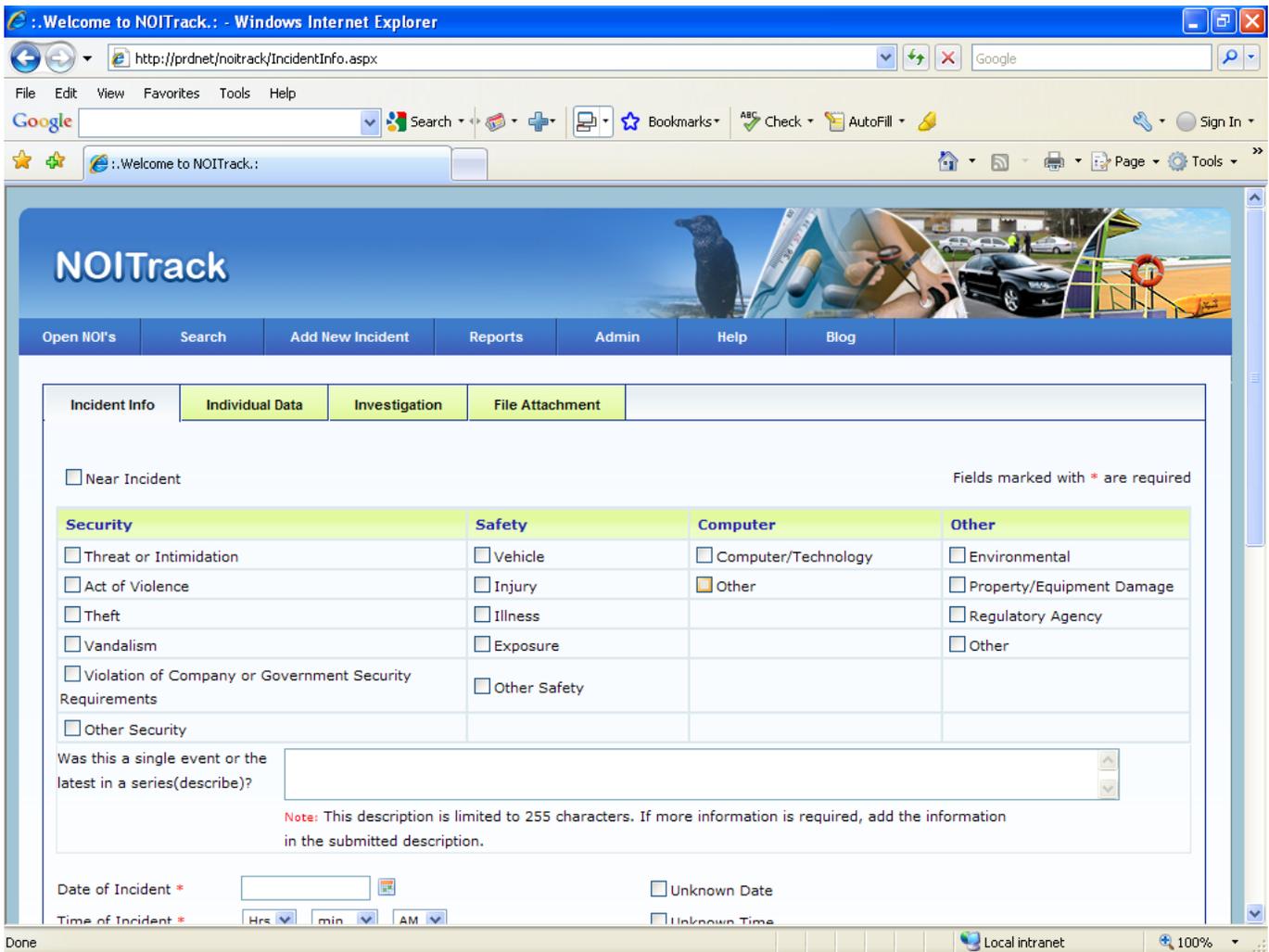
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**ATTACHMENT F  
INCIDENT REPORTING**

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Please go to NOITrack using the following link to complete incident reporting. If you are in the field and do not have access to NOITrack, please contact someone in your office to do the reporting for you.

<http://asweb/noitrack/IncidentInfo.aspx>

Questions can be directed to Susan Hipp-Ludwick at 610.701.3046.

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**ATTACHMENT G**  
**TRAFFIC CONTROL PLAN**

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Insert documents on following page.

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**ATTACHMENT H**  
**ENVIRONMENTAL HEALTH & SAFETY INSPECTION CHECKLIST**

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## ENVIRONMENTAL HEALTH AND SAFETY INSPECTION CHECKLIST

Project Name: \_\_\_\_\_

Inspector: \_\_\_\_\_

Submit to: \_\_\_\_\_

Date: \_\_\_\_\_

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### THE WESTON SITE APPEARANCE

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Is the site secured to prevent inadvertent, unnecessary, or unauthorized access? Are gates closed and locked at any time that the access point is not occupied or visible to site workers?	
<input type="checkbox"/>	<input type="checkbox"/>	Are access points posted with signs to indicate client and end-user client name, WESTON's name and logo, names of other contractors and sub-contractors, project name and location, and appropriate safety messages?	
<input type="checkbox"/>	<input type="checkbox"/>	Are required postings in place (e.g., Labor Poster, Emergency Phone Numbers, Site Map, etc.)?	
<input type="checkbox"/>	<input type="checkbox"/>	Are site trailers tied down per local code and provided with stairs that have a landing platform with guard and stair railings?	
<input type="checkbox"/>	<input type="checkbox"/>	Is a Site Safety file system established in the office to maintain records required by applicable safety regulations	
<input type="checkbox"/>	<input type="checkbox"/>	Is the Health and Safety Plan (HASP) or Accident Prevention Plan (APP) amended as scope of work changes, hazards are discovered or eliminated or if risk change?	
<input type="checkbox"/>	<input type="checkbox"/>	Is the Site Safety Plan and the Safety Officers Field Manual on site?	
<input type="checkbox"/>	<input type="checkbox"/>	Is new employee indoctrination provided?	
<input type="checkbox"/>	<input type="checkbox"/>	Have site Rules been provided, discussed and signed off on by all employees	
<input type="checkbox"/>	<input type="checkbox"/>	Incident Reporting procedure explained to all?	
<input type="checkbox"/>	<input type="checkbox"/>	Is site management trained in the WESTON (and client as applicable) Incident Reporting system?	
<input type="checkbox"/>	<input type="checkbox"/>	Are NOI and Supplemental Report forms and OSHA 300 Log available on site?	
<input type="checkbox"/>	<input type="checkbox"/>	Is Site Management aware of the Case Management and Incident Investigation Procedures?	
<input type="checkbox"/>	<input type="checkbox"/>	Is there a list of preferred provider medical facilities available?	
<input type="checkbox"/>	<input type="checkbox"/>	Has the "Inspection By A Regulatory Agency" procedure been reviewed by all site management?	
<input type="checkbox"/>	<input type="checkbox"/>	Will Competent Persons be required because of activities to be performed, equipment to be used or hazards to be encountered?	

### POLICIES

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Each individual employee is aware that he or she responsible for complying with applicable safety requirements, wearing prescribed safety equipment and preventing avoidable accidents.	
<input type="checkbox"/>	<input type="checkbox"/>	Do employees understand that they will wear clothing suitable for existing weather and work conditions and the minimum work uniform will include long pants, sleeved work shirts, protective footwear, hard hat, and safety glasses unless otherwise specified via the HASP.	
<input type="checkbox"/>	<input type="checkbox"/>	Are employees provided safety and health training to enable them to perform their work safely? Is all training documented to indicate the date of the session, topics covered, and names of participants?	
<input type="checkbox"/>	<input type="checkbox"/>	Safety meetings are conducted daily. The purpose of the meetings are to review past activities, review pertinent tailgate safety topics and establish safe working procedures for anticipated hazards encountered during the day.	
<input type="checkbox"/>	<input type="checkbox"/>	Training has been provided to all personnel regarding handling of emergency situations that may arise from the activity or use of equipment on the project.	
<input type="checkbox"/>	<input type="checkbox"/>	Employees/contractors are informed and understand that they may not be under the influence of alcohol, narcotics, intoxicants, or similar mind-altering substances at any time. Employees found under the influence of or consuming such substances will be immediately removed from the job site.	
<input type="checkbox"/>	<input type="checkbox"/>	Site workers and operators of any equipment or vehicles are able to read and understand the signs, signals, and operating instructions of their use.	
<input type="checkbox"/>	<input type="checkbox"/>	Have contractors performing work provided copies of relevant documentation (such as medical fit-for-duty, training certificates, fit-tests, etc.) prior to initiation of the project?	

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**SANITATION**  
**29 CFR 1926 Subparts C, D. EM 385-1-1, Section 2**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Is an adequate supply of drinking water provided? Is potable/drinking water labeled as such? Are there sufficient drinking cups provided?	
<input type="checkbox"/>	<input type="checkbox"/>	Are there a sufficient number of toilets?	
<input type="checkbox"/>	<input type="checkbox"/>	Are washing facilities readily available and appropriate for the cleaning needs?	
<input type="checkbox"/>	<input type="checkbox"/>	Are washing facilities kept sanitary with adequate cleansing and drying materials?	
<input type="checkbox"/>	<input type="checkbox"/>	Waste is secured so as not to attract rodents, insects, or other vermin?	
<input type="checkbox"/>	<input type="checkbox"/>	Is an effective housekeeping program established and implemented?	

**ACCIDENT PREVENTION SIGNS, TAGS, LABELS, SIGNALS, AND PIPING SYSTEM IDENTIFICATION**  
**29 CFR 1926 Subpart G. EM 385-1-1, Section 8**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Are signs, tags, and labels provided to give adequate warning and caution of hazards and instruction/directions to workers and the public?	
<input type="checkbox"/>	<input type="checkbox"/>	Are all employees informed as to the meaning of the various signs, tags, and labels used in the workplace and what special precautions are required?	
<input type="checkbox"/>	<input type="checkbox"/>	Are construction areas posted with legible traffic signs at points of hazard?	
<input type="checkbox"/>	<input type="checkbox"/>	Are signs required to be seen at night lighted or reflectorized?	
<input type="checkbox"/>	<input type="checkbox"/>	Tags contain a signal word ("danger" or "caution") and a major message to indicate the specific hazardous condition or the instruction to be communicated to the employee. Tags follow requirements as outlined in 29 CFR 1926.200.	

**MEDICAL SERVICES AND FIRST AID**  
**29 CFR 1926 Subparts C, D. EM 385-1-1, Section 3**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Is a local medical emergency facility (LMEF) identified in the HASP or APP?	
<input type="checkbox"/>	<input type="checkbox"/>	Has the LMEF been visited to verify the directions and establish contacts?	
<input type="checkbox"/>	<input type="checkbox"/>	Has site management reviewed WESTON's incident management procedures?	
<input type="checkbox"/>	<input type="checkbox"/>	Have clinics and specialists that will help WESTON manage injuries and illnesses been identified?	
<input type="checkbox"/>	<input type="checkbox"/>	Is there at least two (2) people certified in First Aid and CPR?	
<input type="checkbox"/>	<input type="checkbox"/>	Are first aid kits available at the command post and appropriate remote locations?	
<input type="checkbox"/>	<input type="checkbox"/>	Are first Aid Kits and Eyewash/Safety Showers inspected weekly?	
<input type="checkbox"/>	<input type="checkbox"/>	Are 15 minute eyewash/safety showers in place if required?	

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**FIRE PREVENTION AND PROTECTION  
29 CFR 1926 Subpart F. EM 385-1-1, Section 9**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Is an Emergency Response and Contingency Plan in place?	
<input type="checkbox"/>	<input type="checkbox"/>	Are emergency phone numbers posted?	
<input type="checkbox"/>	<input type="checkbox"/>	Are fire extinguishers selected and provided based on the types of materials and potential fire classes in each area?	
<input type="checkbox"/>	<input type="checkbox"/>	Are fire extinguishers provided in each administrative and storage trailer, within 50 ft but no closer than 25 ft of any fuel or flammable liquids storage, on welding and cutting equipment, on mechanical equipment?	
<input type="checkbox"/>	<input type="checkbox"/>	Are fire extinguishers checked daily and inspected monthly?	
<input type="checkbox"/>	<input type="checkbox"/>	Do site personnel know the location of fire extinguishers and how to use them?	
<input type="checkbox"/>	<input type="checkbox"/>	Are flammable and combustible liquids stored in approved containers?	
<input type="checkbox"/>	<input type="checkbox"/>	Safety cans are used for dispensing flammable or combustible liquids in 5 gallon or less volumes.	
<input type="checkbox"/>	<input type="checkbox"/>	Are flammable and combustible liquids stored in flammable storage cabinets or appropriate storage areas?	
<input type="checkbox"/>	<input type="checkbox"/>	Are flammable materials separated from oxidizers by at least 20 feet (or 5 foot tall, ½ -hour rated fire wall) when in storage?	
<input type="checkbox"/>	<input type="checkbox"/>	Are fuel storage tanks double walled or placed in a lined berm?	
<input type="checkbox"/>	<input type="checkbox"/>	Spills are cleaned up immediately and wastes are disposed of properly.	
<input type="checkbox"/>	<input type="checkbox"/>	Combustible scrap, debris, and waste material (oily rags) are stored in closed metal containers and disposed of promptly.	
<input type="checkbox"/>	<input type="checkbox"/>	Vehicle fueling tanks are grounded and bonding between the tank and vehicle being fueled is provided?	
<input type="checkbox"/>	<input type="checkbox"/>	LPG is stored, handled, and used according to OSHA regulations 29 CFR 1926.	
<input type="checkbox"/>	<input type="checkbox"/>	LPG cylinders are not stored indoors.	
<input type="checkbox"/>	<input type="checkbox"/>	Is a hot work permit program in place? See WESTON FLD-36	
<input type="checkbox"/>	<input type="checkbox"/>	Is smoking limited to specific areas, prohibited in flammable storage areas and are signs posted to this effect?	

**HAZARDOUS SUBSTANCES, AGENTS, AND ENVIRONMENTS  
29 CFR 1926 Subparts D, Z. EM 385-1-1, Sections 6, 28**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Are operations, materials and equipment evaluated to determine the presence of hazardous contaminants or if hazardous agents could be released in the work environment?	
<input type="checkbox"/>	<input type="checkbox"/>	Are SDS for substances made available at the work-site when any hazardous substance is procured, used, or stored?	
<input type="checkbox"/>	<input type="checkbox"/>	Are all containers and piping containing hazardous substances labeled appropriately?	
<input type="checkbox"/>	<input type="checkbox"/>	Is there an inventory of hazardous substances?	
<input type="checkbox"/>	<input type="checkbox"/>	Is there a site Specific Hazard Communication Program?	
<input type="checkbox"/>	<input type="checkbox"/>	Spill kits appropriate for the hazardous materials present are on site and their location is known to spill responders.	
<input type="checkbox"/>	<input type="checkbox"/>	Is disposal of excess hazardous chemicals performed according to WESTON's guidelines and RCRA regulations?	
<input type="checkbox"/>	<input type="checkbox"/>	Before initiation of activities where there is an identified asbestos or lead hazard, is there a written plan detailing compliance with OSHA and EPA asbestos or lead abatement requirements? Does the plan comply with state and local authority, and USACE requirements, as applicable?	
<input type="checkbox"/>	<input type="checkbox"/>	Are personnel trained and provided with protection against hazards from animals, poisonous plants, and insects?	

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**PERSONAL PROTECTIVE AND SAFETY EQUIPMENT, RESPIRATORY AND FALL PROTECTION  
29 CFR 1926 Subparts D, E, M. EM 385-1-1, Section 5**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Do employees understand that the minimum PPE is hard hat, safety glasses with side shields and safety shoes or boots and that long pants and a sleeved shirt are required?	
<input type="checkbox"/>	<input type="checkbox"/>	Has the SSHC reviewed the PPE requirements in the HASP against actual site conditions and certified that the PPE is appropriate? (see Field Manual, PPE Program)	
<input type="checkbox"/>	<input type="checkbox"/>	PPE is inspected, tested and maintained in serviceable and sanitary condition as recommended by the manufacturer. Is defective or damaged equipment taken out of service and repaired or replaced?	
<input type="checkbox"/>	<input type="checkbox"/>	Are workers trained in the use of the PPE required?	
<input type="checkbox"/>	<input type="checkbox"/>	Are personnel exposed to vehicular or equipment traffic, including signal persons, spotters or inspectors required to vests or apparel marked with a reflective or high visibility material?	
<input type="checkbox"/>	<input type="checkbox"/>	Is there a noise hazard? If yes, hearing protection will be required.	
<input type="checkbox"/>	<input type="checkbox"/>	Is there a splash or splatter hazard? Face shields or goggles will be required.	
<input type="checkbox"/>	<input type="checkbox"/>	Will personnel be working in or over water? Personnel Floatation devices will be required.	
<input type="checkbox"/>	<input type="checkbox"/>	Is there a welding hazard? Welding helmet and leathers will be required. Is there a cutting torch hazard? Goggles and protective clothing will be required.	
<input type="checkbox"/>	<input type="checkbox"/>	Is each person on a walking/working surface with an unprotected side or edge which is 6 feet (1.8 m) or more above a lower level protected from falling by the use of guardrail systems, safety net systems or personal fall arrest systems? See WESTON FLD 25 (Note General Industry standard is four feet).	
<input type="checkbox"/>	<input type="checkbox"/>	Guardrail systems are used as primary protection whenever feasible. Guardrail construction meets criteria in 29 CFR 1926.502(b).	
<input type="checkbox"/>	<input type="checkbox"/>	Personal fall arrest systems (PFAS) are inspected and appropriate for use.	
<input type="checkbox"/>	<input type="checkbox"/>	Ropes and straps (webbing) used in lanyards, lifelines, and strength components of body belts and body harnesses are from synthetic fibers.	
<input type="checkbox"/>	<input type="checkbox"/>	Safety nets and safety net installations are constructed, tested and used according to 29 CFR 1926.502.c	
<input type="checkbox"/>	<input type="checkbox"/>	Is respirator use required? See WESTON Respiratory Protection Program	
<input type="checkbox"/>	<input type="checkbox"/>	Persons using respiratory protection have been successfully medically cleared, trained, and fit tested.	
<input type="checkbox"/>	<input type="checkbox"/>	Respirators are used according to the manufacturer's instructions, regulatory requirements, selection criteria, and health and safety plan provisions.	
<input type="checkbox"/>	<input type="checkbox"/>	For Level C operations with organic vapor contamination, is the cartridge change-out schedule documented?	
<input type="checkbox"/>	<input type="checkbox"/>	Is breathing certified as Grade D, or better, and certification available on-site?	

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**MACHINERY AND MECHANIZED EQUIPMENT**  
**29 CFR 1926 Subparts N, O, CC and DD. EM 385-1-1, Sections 16, 17, 18**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Are inspections of machinery by a competent person established?	
<input type="checkbox"/>	<input type="checkbox"/>	Is equipment inspected daily before its next use?	
<input type="checkbox"/>	<input type="checkbox"/>	Equipment inspection reports are reviewed, followed-up on negative findings and records of inspections are maintained?	
<input type="checkbox"/>	<input type="checkbox"/>	Machinery or equipment found to be unsafe is taken out of service until the unsafe condition has been corrected.	
<input type="checkbox"/>	<input type="checkbox"/>	Is there a preventive maintenance program established?	
<input type="checkbox"/>	<input type="checkbox"/>	Are operators of equipment qualified and authorized to operate?	
<input type="checkbox"/>	<input type="checkbox"/>	Is all self-propelled construction and industrial equipment equipped with a reverse signal alarm?	
<input type="checkbox"/>	<input type="checkbox"/>	Are seats or equal protection provided for each person required to ride on equipment. Are seatbelts installed and worn on motor vehicles, as appropriate.	
<input type="checkbox"/>	<input type="checkbox"/>	All equipment with windshields is equipped with powered wipers. If fogging or frosting is possible, operable defogging or defrosting devices are required.	
<input type="checkbox"/>	<input type="checkbox"/>	Internal combustion engines are not operated in enclosed areas unless adequate ventilation is made. Air monitoring is conducted to assure safe working conditions.	
<input type="checkbox"/>	<input type="checkbox"/>	Is each bulldozer, scraper, dragline, crane, motor grader, front-end loader, mechanical shovel, backhoe, or similar equipment equipped with at least one dry chemical or carbon dioxide fire extinguisher with a minimum rating of 5-B:C?	
<input type="checkbox"/>	<input type="checkbox"/>	Will cranes or other lifting devices be used? If so, are the following documents available on site: 1) a copy of the operating manual, 2) load rating chart, 3) log book, 4) a copy of the last annual inspection and 5) the initial on-site inspection?	
<input type="checkbox"/>	<input type="checkbox"/>	Do operators have certificates of training to operate the type of crane(s) to be used?	
<input type="checkbox"/>	<input type="checkbox"/>	Is a signal person provided when the point of operation is not in full view of the vehicle, machine, or equipment operator? When manual (hand) signals are used, is only one person designated to give signals to the operator?	
<input type="checkbox"/>	<input type="checkbox"/>	Signal persons back one vehicle at a time. While under the control of a signal person, drivers do not back or maneuver until directed. Drivers stop if contact with the signal person is lost.	
<input type="checkbox"/>	<input type="checkbox"/>	Is a critical lift plan prepared by a competent person whenever: a lift is not routine, or a lift exceeds 75% of a crane's capacity, a lift results in the load being out of the operator's line of sight, or a lift involves more than one crane, a man basket is used, or the operator believes there is a need for a critical lift plan.	
<input type="checkbox"/>	<input type="checkbox"/>	Fork Lifts (Powered Industrial Trucks) - Will forklifts be used on site?	
<input type="checkbox"/>	<input type="checkbox"/>	All forklifts meet the requirements of design, construction, stability, inspection, testing, maintenance, and operation as indicated in ANSI/ASME B56.1 Safety Standards for Low Lift and High Lift Trucks.	
<input type="checkbox"/>	<input type="checkbox"/>	Do forklift operators have certificates of training?	
<input type="checkbox"/>	<input type="checkbox"/>	Are pile driving operations conducted according to EM 385-1-1, Section 16.L?	
<input type="checkbox"/>	<input type="checkbox"/>	Is drilling equipment operated, inspected, and maintained as specified in the manufacturer's operating manual? Is a copy of the manual available at the work-site? See also the Drilling Safety Guide in the Safety Officers Field Manual.	
<input type="checkbox"/>	<input type="checkbox"/>	Are flag persons provided when operations or equipment on or near a highway expose workers to traffic hazards? Do flag persons and persons working in proximity to a road wear high visibility vests? Are persons exposed to highway vehicle traffic protected by signs in all directions warning of the presence of the flag persons and the work? Do signs and distances from the work zone conform to federal and local regulations?	

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**MOTOR VEHICLES**  
**29 CFR 1926 Subpart O. EM 385-1-1, Section 18**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Motor vehicle operators have a valid permit, license, or certification of ability for the equipment being operated.	
<input type="checkbox"/>	<input type="checkbox"/>	Inspection, maintenance, and repair is according to manufacturer's requirements by qualified persons.	
<input type="checkbox"/>	<input type="checkbox"/>	Vehicles are inspected on a scheduled maintenance program.	
<input type="checkbox"/>	<input type="checkbox"/>	Vehicles not in safe operating condition are removed from service until defects are corrected.	
<input type="checkbox"/>	<input type="checkbox"/>	Glass in windshields, windows, and doors is safety glass. Any cracked or broken glass is replaced.	
<input type="checkbox"/>	<input type="checkbox"/>	Seatbelts are installed and worn.	
<input type="checkbox"/>	<input type="checkbox"/>	The number of passengers in passenger-type vehicles does not exceed the number which can be seated.	
<input type="checkbox"/>	<input type="checkbox"/>	Trucks used to transport personnel have securely anchored seating, a rear end gate, and a guardrail.	
<input type="checkbox"/>	<input type="checkbox"/>	No person is permitted to ride with arms or legs outside of a vehicle body; in a standing position on the body; on running boards; seated on side fenders, cabs, cab shields, rear of the truck or on the load.	
<input type="checkbox"/>	<input type="checkbox"/>	ATV operators possess a valid state driver's license, have completed an ATV training course prior to operation of the vehicle, and wear appropriate protective equipment such as helmets, boots, and gloves.	

**EXCAVATING AND TRENCHING**  
**29 CFR 1926 Subpart P. EM 385-1-1, Section 25**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Has the known or estimated location of utility installations such as sewer, telephone, fuel, electric, water lines, or any other underground installations that may be expected to be encountered during excavation been determined before excavation? Have utility locations been verified by designated state services according to state regulations? Has the client provided clearance where state jurisdiction doesn't apply?	
<input type="checkbox"/>	<input type="checkbox"/>	Have overhead utilities in excavation areas been identified and either de-energized, shielded or barricaded so excavating equipment will not come within 10 feet?	
<input type="checkbox"/>	<input type="checkbox"/>	Are inspections of the excavation, the adjacent areas, and protective systems made daily and as necessary by a competent person?	
<input type="checkbox"/>	<input type="checkbox"/>	Are Protective systems in place as prescribed by the competent person?	
<input type="checkbox"/>	<input type="checkbox"/>	Is material removed from excavations managed so it will not overwhelm the protective systems?	
<input type="checkbox"/>	<input type="checkbox"/>	Are barriers provided between excavations and walkways?	
<input type="checkbox"/>	<input type="checkbox"/>	Are excavations by roadways barricaded to warn vehicles of presence or to prevent them from falling in?	
<input type="checkbox"/>	<input type="checkbox"/>	Is there a means of exit from the excavation every 25 feet?	
<input type="checkbox"/>	<input type="checkbox"/>	Is air monitoring required? If yes, Is it performed?	

**CONFINED SPACES**  
**29 CFR 1910 Subpart J. EM 385-1-1, Section 6**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Is there a Confined Space Entry Program in place?	
<input type="checkbox"/>	<input type="checkbox"/>	Are the confined Spaces identified and labeled?	
<input type="checkbox"/>	<input type="checkbox"/>	Will the Confined Spaces be entered?	
<input type="checkbox"/>	<input type="checkbox"/>	Is appropriate entry documentation used and on-file?	

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**ELECTRICAL**  
**29 CFR 1926 Subpart K. EM 385-1-1, Section 11**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Are electrical installations made according to the National Electrical Code and applicable local codes?	
<input type="checkbox"/>	<input type="checkbox"/>	Qualified electricians make all connections and perform all work within 10 feet of live electric equipment.	
<input type="checkbox"/>	<input type="checkbox"/>	Location of underground, overhead, under floor, behind wall electrical lines is known and communicated. Lines are documented by qualified person as de-energized where necessary.	
<input type="checkbox"/>	<input type="checkbox"/>	Workers understand they must not work near live parts of electric circuits, unless they are qualified as required by OSHA or are protected by de-energizing and grounding the parts, guarding the parts by insulation, or other effective means?	
<input type="checkbox"/>	<input type="checkbox"/>	Employees who regularly work on or around energized electrical equipment or lines are instructed in the cardiopulmonary resuscitation (CPR) methods.	
<input type="checkbox"/>	<input type="checkbox"/>	Workers are prohibited from working alone on energized lines or equipment over 600 volts.	
<input type="checkbox"/>	<input type="checkbox"/>	Are Ground-fault circuit interrupters (GFCI's) or is ground fault circuit protection provided to protect employees from ground-fault hazards for all 115 – 120 Volt, 15 and 20 amp receptacle outlets which are not a part of the permanent wiring of a building or structure at construction sites?	
<input type="checkbox"/>	<input type="checkbox"/>	Circuit breakers are labeled.	
<input type="checkbox"/>	<input type="checkbox"/>	Circuit breaker and all cabinets with exposed electric conductors are kept tightly closed.	
<input type="checkbox"/>	<input type="checkbox"/>	Unused openings (including conduit knockouts) in electrical enclosures and fittings are closed with appropriate covers, plugs, or plates.	
<input type="checkbox"/>	<input type="checkbox"/>	Sufficient access and working space is provided and maintained about all electrical equipment to permit ready and safe operations and maintenance.	
<input type="checkbox"/>	<input type="checkbox"/>	Motors are located within sight of their controllers or controller disconnecting means are capable of being locked in the pen position or is a separate disconnecting means installed in the circuit within sight of the motor.	
<input type="checkbox"/>	<input type="checkbox"/>	Are visual inspections of extension cords and cord-and plug-connected equipment conducted daily? Is equipment found damaged or defective tagged and removed from service, and not used until repaired?	
<input type="checkbox"/>	<input type="checkbox"/>	Wet Areas - Is portable lighting used in wet or conductive locations, such as tanks or boilers operated at no more than 12 volts and protected by GFCIs.	
<input type="checkbox"/>	<input type="checkbox"/>	Are electrical installations in hazardous areas to NEC?	
<input type="checkbox"/>	<input type="checkbox"/>	Metal ladders and tools including tape measures or fabric with metal thread are prohibited where contact with energized electrically parts is possible.	
<input type="checkbox"/>	<input type="checkbox"/>	All extension cords are the three-wire type, designed and rated for hard or extra hard usage?	
<input type="checkbox"/>	<input type="checkbox"/>	Worn or frayed electrical cords or cables are taken out of service. Fastening with staples, hanging from nails or suspending extension cords by wire is prohibited.	
<input type="checkbox"/>	<input type="checkbox"/>	Electric wire/flexible cord passing through work areas is protected from damage such as foot traffic, vehicles, sharp corners, projections and pinching? Flexible cords and cables passing through holes are protected by bushings or fittings?	
<input type="checkbox"/>	<input type="checkbox"/>	Before an employee or contractor performs any service or maintenance on a system where the unexpected energizing, start up, or release of kinetic or stored energy could occur and cause injury or damage, the system is to be isolated. Only authorized persons may apply and remove lockouts and tags.	
<input type="checkbox"/>	<input type="checkbox"/>	Contractors planning to use hazardous energy control procedures submit their hazardous energy control plan to the WESTON site safety officer or designee before implementing lockout/tagout procedures.	
<input type="checkbox"/>	<input type="checkbox"/>	There is a site specific hazardous energy control plan that clearly and specifically outlines the scope, purpose, authorization, rules and techniques to be used for the control of hazardous energy.	
<input type="checkbox"/>	<input type="checkbox"/>	Workers possess the knowledge and skills required for the safe application, usage, and removal of energy controls.	

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**WELDING AND CUTTING**  
**29 CFR 1926 Subpart J. EM 385-1-1, Section 10**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Prior to performing welding, cutting or any other heat or spark producing activity, an assessment of the area is made by a competent person to identify combustible materials and potential sources of flammable atmospheres.	
<input type="checkbox"/>	<input type="checkbox"/>	Welders, cutters and their supervisors are trained in the safe operation of their equipment, safe welding and cutting practices, hot work permit requirements, and fire protection.	
<input type="checkbox"/>	<input type="checkbox"/>	Welding and cutting equipment is inspected daily before use. Unsafe equipment is taken out of use, replaced, or repaired.	
<input type="checkbox"/>	<input type="checkbox"/>	Workers and the public are shielded from welding rays, flashes, sparks, molten metal, and slag.	
<input type="checkbox"/>	<input type="checkbox"/>	Employees performing welding, cutting, or heating are protected by PPE appropriate for the hazards (e.g., respiratory, vision and skin protection).	
<input type="checkbox"/>	<input type="checkbox"/>	Compatible fire extinguishing equipment is provided in the immediate vicinity of welding or cutting operations.	
<input type="checkbox"/>	<input type="checkbox"/>	Drums, tanks, or other containers and equipment which have contained hazardous materials shall be thoroughly cleaned before welding or cutting. Cleaning shall be performed in accordance with NFPA 327, <u>Cleaning or Safeguarding Small Tanks and Containers, ANSI/AWS F4.1, Recommended Safe Practices for the Preparation for Welding and Cutting of Containers That Have Held Hazardous Substances</u> , and applicable health and safety plan requirements.	

**HAND AND POWER TOOL SAFETY**  
**29 CFR 1926 Subpart I. EM 385-1-1, Section 13**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Power tools are from a manufacturer listed by a nationally recognized testing laboratory for the specific application for which they are to be used.	
<input type="checkbox"/>	<input type="checkbox"/>	Hand & power tools are inspected, maintained, tested, and determined to be in safe operating condition before use.	
<input type="checkbox"/>	<input type="checkbox"/>	Tools found to be unsafe are not used, tagged and repaired or destroyed.	
<input type="checkbox"/>	<input type="checkbox"/>	Users of tools are trained in safe use.	
<input type="checkbox"/>	<input type="checkbox"/>	Electrical tools have cords and plug connections in good repair.	
<input type="checkbox"/>	<input type="checkbox"/>	Electrical tools are effectively grounded or approved double insulated.	
<input type="checkbox"/>	<input type="checkbox"/>	Reciprocating, rotating, and moving parts of equipment are guarded if they may be accessed by employees or they otherwise create a hazard.	
<input type="checkbox"/>	<input type="checkbox"/>	Safety clips/retainers are installed and maintained on pneumatic impact tool connections.	
<input type="checkbox"/>	<input type="checkbox"/>	Chain saws have an automatic chain brake or anti-kickback device.	
<input type="checkbox"/>	<input type="checkbox"/>	Pneumatic and hydraulic hoses and fittings are inspected regularly.	
<input type="checkbox"/>	<input type="checkbox"/>	Employees who operate powder actuated tools are trained and carry valid operator's cards.	
<input type="checkbox"/>	<input type="checkbox"/>	Powder activated tools are stored in individual locked containers, when not in use and are not loaded until ready to use.	
<input type="checkbox"/>	<input type="checkbox"/>	Powder actuated tools are inspected for obstructions or defects daily before use.	
<input type="checkbox"/>	<input type="checkbox"/>	Powder actuated tool operators have appropriate PPE.	

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**RIGGING**  
**29 CFR 1926 Subpart H. EM 385-1-1, Section 15**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Rigging equipment is inspected as specified by the manufacturer, by a qualified person, before use on each shift and as necessary to assure that it is safe.	
<input type="checkbox"/>	<input type="checkbox"/>	Defective equipment is removed from service.	
<input type="checkbox"/>	<input type="checkbox"/>	Rigging not in use is removed from the work area, properly stored, and maintained in good condition.	
<input type="checkbox"/>	<input type="checkbox"/>	Wire rope removed from service for defects is cut up or plainly marked as unfit for use as rigging.	
<input type="checkbox"/>	<input type="checkbox"/>	The number of saddle clips used to form eyes in wire rope conforms with Table H-20, are spaced evenly and the saddles are on the live side.	
<input type="checkbox"/>	<input type="checkbox"/>	Chain rigging has a tag clearly indicating load limits, is inspected before initial use, then weekly, and is of alloyed metal.	
<input type="checkbox"/>	<input type="checkbox"/>	Fiber rope rigging is not used if it is frozen or has been subject to acids or excessive heat.	
<input type="checkbox"/>	<input type="checkbox"/>	Slings and their fittings and fastenings are inspected before use on each shift and as needed during use.	
<input type="checkbox"/>	<input type="checkbox"/>	Drums, sheaves, and pulleys on rigging hardware are smooth and free of surface defects that can damage rigging.	

**MATERIAL HANDLING, STORAGE, AND DISPOSAL**  
**29 CFR 1926 Subpart H. EM 385-1-1, Section 14**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Employees are trained in and use safe lifting techniques.	
<input type="checkbox"/>	<input type="checkbox"/>	Materials are not moved or suspended over workers unless positive precautions have been taken to protect workers.	
<input type="checkbox"/>	<input type="checkbox"/>	Conveyors are constructed, inspected, & maintained by qualified persons according to manufacturer's recommendations.	
<input type="checkbox"/>	<input type="checkbox"/>	All conveyors are to be equipped with emergency stopping devices.	
<input type="checkbox"/>	<input type="checkbox"/>	Hazardous exposed moving machine parts are guarded mechanically, electrically or by location.	
<input type="checkbox"/>	<input type="checkbox"/>	Controls are clearly marked and/or labeled to indicate the function controlled.	
<input type="checkbox"/>	<input type="checkbox"/>	Taglines are used for suspended loads where the movement may be hazardous to persons.	
<input type="checkbox"/>	<input type="checkbox"/>	Material in storage is protected from falling or collapse by effective stacking, blocking, cribbing, etc.	
<input type="checkbox"/>	<input type="checkbox"/>	Walkways and aisles are to be kept clear.	
<input type="checkbox"/>	<input type="checkbox"/>	Materials are not stored on scaffolds or runways in excess of normal placement or in excess of safe load limits.	
<input type="checkbox"/>	<input type="checkbox"/>	Work areas and means of access are maintained safe and orderly.	
<input type="checkbox"/>	<input type="checkbox"/>	Tools, materials, extension cords, hoses or debris do not cause tripping or other hazards.	
<input type="checkbox"/>	<input type="checkbox"/>	Storage and construction sites are kept free from the accumulation of combustible materials.	
<input type="checkbox"/>	<input type="checkbox"/>	Waste materials and rubbish are placed in containers or, if appropriate, in piles. Waste materials are disposed of in accord with applicable local, state, or federal requirements.	

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**FLOATING PLANT AND MARINE ACTIVITIES  
29 CFR 1926 Subpart O. EM 385-1-1 Section 19**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Floating plants that are regulated by the USCG have current inspections and certificates.	
<input type="checkbox"/>	<input type="checkbox"/>	Before any floating plant is brought to the job site and placed in service it is inspected and determined to be in safe operating condition	
<input type="checkbox"/>	<input type="checkbox"/>	Periodic inspections are made such that safe operating conditions are maintained. Strict compliance with EM 385-1-1, Section 19 is expected.	
<input type="checkbox"/>	<input type="checkbox"/>	Plans are in place for removing or securing the plant and evacuation of personnel endangered by severe weather and other marine emergencies such as; fire, flooding, man overboard, hazardous materials incidents, etc.	
<input type="checkbox"/>	<input type="checkbox"/>	Means of access are properly secured, guarded, and maintained free of slipping and tripping hazards.	
<input type="checkbox"/>	<input type="checkbox"/>	Dredging operations follow guidelines as established in EM 385-1-1, Section 19.D.	

**PRESSURIZED EQUIPMENT AND SYSTEMS  
29 CFR 1926 Subparts I, F. EM 385-1-1, Section 20**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Pressurized equipment and systems are inspected before being placed into service.	
<input type="checkbox"/>	<input type="checkbox"/>	Pressurized equipment or systems found to be unsafe are tagged "Out of Service-Do Not Use".	
<input type="checkbox"/>	<input type="checkbox"/>	Systems and equipment are operated, inspected, and maintained by qualified, designated personnel.	
<input type="checkbox"/>	<input type="checkbox"/>	Safe clearance, lockout/tagout procedures are followed as appropriate during maintenance or repair.	
<input type="checkbox"/>	<input type="checkbox"/>	Air hose, pipes, fittings are pressure-rated for the activity. Defective hoses are removed from service.	
<input type="checkbox"/>	<input type="checkbox"/>	Hoses aren't laid over ladders, steps, scaffolds, or walkways in a manner that creates a tripping hazard.	
<input type="checkbox"/>	<input type="checkbox"/>	The use of compressed air for personal cleaning is prohibited. The use of compressed air for other cleaning is restricted to less than 30 psig.	
<input type="checkbox"/>	<input type="checkbox"/>	Compressed gas cylinders are stored in well-ventilated locations.	
<input type="checkbox"/>	<input type="checkbox"/>	Cylinders in storage are separated from flammable or combustible liquids and from easily ignitable materials by at least 40 feet or by a minimum five feet tall, ½ -hour fire resistive partition.	
<input type="checkbox"/>	<input type="checkbox"/>	Stored cylinders containing oxidizing gases are separated from fuel gas cylinders by at least 20 feet or by a minimum five feet tall, ½ -hour fire resistive partition.	
<input type="checkbox"/>	<input type="checkbox"/>	Cylinder valve caps are in place when cylinders are in storage, in transit, or a regulator is not in place.	
<input type="checkbox"/>	<input type="checkbox"/>	Compressed gas cylinders in service are secured in substantial fixed or portable racks or hand trucks.	
<input type="checkbox"/>	<input type="checkbox"/>	Oxygen cylinders and fittings are kept away from, and free from oil and grease.	
<input type="checkbox"/>	<input type="checkbox"/>	Cylinder Storage areas are posted with the names of the gases in storage and with signs indicating "No Smoking or Open Flame".	
<input type="checkbox"/>	<input type="checkbox"/>	Cylinders are to be stored such that mechanical and corrosion damage is avoided. Cylinders are not to be stored in areas required as an egress path.	
<input type="checkbox"/>	<input type="checkbox"/>	Cylinders may be stored in the open outdoors, however, they must be protected from the ground to prevent corrosion and must be protected from temperatures that may exceed 125 degrees F.	

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**WORK PLATFORMS/SCAFFOLDS**  
**29 CFR 1926 Subparts L, M, N. EM 385-1-1 Sections 21, 22**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Work platforms are erected, used, inspected, tested, maintained and repaired according to manufacturer's requirements.	
<input type="checkbox"/>	<input type="checkbox"/>	Construction, inspection, and disassembly of scaffolds is under the direction of a competent person.	
<input type="checkbox"/>	<input type="checkbox"/>	Workers on scaffolding have been trained by a qualified person.	
<input type="checkbox"/>	<input type="checkbox"/>	Scaffolds are erected on a firm and level surface and are square and plumb.	
<input type="checkbox"/>	<input type="checkbox"/>	Scaffolds are not loaded in excess of rated capacity.	
<input type="checkbox"/>	<input type="checkbox"/>	Working levels of work platforms are fully planked or decked.	
<input type="checkbox"/>	<input type="checkbox"/>	Planks are in good condition and free from obvious defects.	
<input type="checkbox"/>	<input type="checkbox"/>	Fabricated frame scaffolding four times higher than the base width is secured to building/structure according to manufacturer's instruction and/or OSHA requirements.	
<input type="checkbox"/>	<input type="checkbox"/>	Working platforms of scaffolding over ten feet in height have guard rails meeting OSHA specifications. Fall protection is suggested at four feet or greater.	
<input type="checkbox"/>	<input type="checkbox"/>	Scaffolding/work platforms are accessed by means of a properly secured ladder or equivalent. Built on ladders conform to scaffold ladder requirements. Climbing of braces is not allowed.	
<input type="checkbox"/>	<input type="checkbox"/>	Crane supported work platforms are designed and used in accordance with OSHA standards.	
<input type="checkbox"/>	<input type="checkbox"/>	Elevating work platforms are operated, inspected, and maintained according to the equipment operations manual.	
<input type="checkbox"/>	<input type="checkbox"/>	Employees working in aerial lifts remain firmly on the floor of the basket. Employees use fall protection while in an aerial lift basket.	

**WALKING AND WORKING SURFACES AND STAIRS**  
**29 CFR 1926 Subparts L, M, X. EM 385-1-1, Sections 21, 22, 24**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Work areas are clean, sanitary, and orderly	
<input type="checkbox"/>	<input type="checkbox"/>	Work surfaces are kept dry or appropriate means are taken to assure the surfaces are slip-resistant	
<input type="checkbox"/>	<input type="checkbox"/>	Accumulations of combustible dust are routinely removed.	
<input type="checkbox"/>	<input type="checkbox"/>	Aisles and passageways are kept clear and marked as appropriate.	
<input type="checkbox"/>	<input type="checkbox"/>	There is safe clearance for walking in aisles where motorized or mechanical handling equipment is operating.	
<input type="checkbox"/>	<input type="checkbox"/>	Materials or equipment is stored in such a way that sharp projections will not interfere with the walkway.	
<input type="checkbox"/>	<input type="checkbox"/>	Changes of direction or elevation are readily identifiable.	
<input type="checkbox"/>	<input type="checkbox"/>	Aisles or walkways that pass near moving or operating machinery, welding operations or similar operations are arranged so employees will not be subjected to potential hazards.	
<input type="checkbox"/>	<input type="checkbox"/>	Standard guardrails are provided wherever aisle or walkway surfaces are elevated more than 30 inches above any adjacent floor or the ground and bridges provided where workers must cross over conveyors and similar hazards.	
<input type="checkbox"/>	<input type="checkbox"/>	There are standard stair rails or handrails on all stairways having four or more risers or with an elevation of 30 or more inches.	
<input type="checkbox"/>	<input type="checkbox"/>	Stairways are at least 22 inches wide. (General Industry Standard)	
<input type="checkbox"/>	<input type="checkbox"/>	Stairs angle no more than 50 and no less than 30 degrees, risers are uniform from top to bottom (plus or minus 1/4 inch) and are provided with a surface that renders them slip resistant.	

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<input type="checkbox"/>	<input type="checkbox"/>	Stairway handrails are not less than 36 inches above the leading edge of stair treads and have at least 3 inches of clearance between the handrails and the wall or surface they are mounted on.	
<input type="checkbox"/>	<input type="checkbox"/>	Where doors or gates open directly on a stairway, there is a platform provided so the swing of the door does not reduce the width of the platform to less than 20 inches.	
<input type="checkbox"/>	<input type="checkbox"/>	Where stairs or stairways exit directly into any area where vehicles may be operated, there are adequate barriers and warnings provided to prevent employees stepping into the path of traffic.	
<input type="checkbox"/>	<input type="checkbox"/>	Signs are posted showing the load capacity of elevated storage areas.	
<input type="checkbox"/>	<input type="checkbox"/>	An appropriate means of access and egress is provided for surfaces with 19 or more inches of elevation change.	
		Material on elevated surfaces is minimized, with that necessary for immediate work requirements piled, stacked, or racked in a manner to prevent it from tipping, falling, collapsing, rolling, or spreading.	

**FLOOR AND WALL HOLES AND OPENINGS**  
**29 CFR 1926 Subpart M. EM 385-1-1, Section 24**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Floor and roof openings that persons can walk into or fall through are guarded by a physical barrier or covered.	
<input type="checkbox"/>	<input type="checkbox"/>	Holes (defined as equal to or greater than 2 inches in least dimension) where person could trip must be covered/protected.	
<input type="checkbox"/>	<input type="checkbox"/>	Unprotected sides and edges on a walking/working surface six feet or more (note four feet in General Industry) are protected by guardrail system, safety net, or Personal Fall Arrest System (PFAS).	
<input type="checkbox"/>	<input type="checkbox"/>	Unused portions of service pits and pits not actually in use are either covered or protected by guardrails or equivalent.	
<input type="checkbox"/>	<input type="checkbox"/>	Coverings for holes or other openings must be constructed of sufficient strength to support any anticipated load, must be secured in place to prevent accidental removal or displacement, and must be marked indicating purpose (e.g., stenciled "Hole" or painted contrasting color to surroundings).	

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### LADDERS

#### 29 CFR 1926 Subpart X. EM 385-1-1, Section 21

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Portable ladders are used for their designed purpose only.	
<input type="checkbox"/>	<input type="checkbox"/>	Portable ladders are examined for defects prior to, and after use.	
<input type="checkbox"/>	<input type="checkbox"/>	Ladders found to be defective are clearly tagged to indicate "DO NOT USE" if repairable, or destroyed immediately if no repair is possible.	
<input type="checkbox"/>	<input type="checkbox"/>	Workers are trained in hazards associated with ladder use and how to inspect ladders.	
<input type="checkbox"/>	<input type="checkbox"/>	Ladders have secure footing provided by a combination of safety feet, top of ladder tie-offs and mud cills or a person holding the ladder to prevent slipping.	
<input type="checkbox"/>	<input type="checkbox"/>	The handrails of a straight ladder used to get from one level to another extend at least 36 inches above the landing.	
<input type="checkbox"/>	<input type="checkbox"/>	Ladders conform to construction criteria of ANSI Standards A-14.1 and A-14.2.	
<input type="checkbox"/>	<input type="checkbox"/>	Wooden ladders are not painted with an opaque covering such that signs of flaws, cracks, or drying are obscured.	
<input type="checkbox"/>	<input type="checkbox"/>	Fixed ladders are constructed and used according to OSHA Standards, 29 CFR 1910.27 and ANSI A-14.3.	
<input type="checkbox"/>	<input type="checkbox"/>	Rungs, cleats or steps, and side rails that may be used for handholds when climbing, offer adequate gripping surface and are free of splinters, splivers or burrs, and substances that could cause slipping.	
<input type="checkbox"/>	<input type="checkbox"/>	Fixed ladders of greater than 24 feet have cages or other approved fall protection devices. (Note General Industry is 20 feet).	
<input type="checkbox"/>	<input type="checkbox"/>	Where fall protection is provided by ladder safety systems (body belts or harnesses, lanyards and braking devices with safety lines or rails), systems meet the requirements of and are used in accordance with WESTON Fall Protection Standard Practices and are compatible with construction of the ladder system.	

### DEMOLITION

#### 29 CFR 1926 Subpart T. EM 385-1-1, Section 23

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Prior to initiating demolition activities an engineering survey (by a competent person) and a demolition plan (by a competent person) is completed.	
<input type="checkbox"/>	<input type="checkbox"/>	All employees engaged in demolition activities are instructed in the demolition plan.	
<input type="checkbox"/>	<input type="checkbox"/>	It has been determined through the engineering survey and outlined in the plan, if any hazardous materials or conditions (e.g., asbestos, lead, utility connections, etc.) exist. Such hazards are controlled or eliminated before demolition is started.	
<input type="checkbox"/>	<input type="checkbox"/>	Continued inspections, by a competent person, are conducted to ensure safe employee working conditions.	

### TREE MAINTENANCE AND REMOVAL

#### 29 CFR 1910 Subpart R. EM 385-1-1, Section 31

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Tree maintenance or removal is done is under the direction of a qualified person.	
<input type="checkbox"/>	<input type="checkbox"/>	Tree work, in the vicinity of charged electric lines, is by trained persons qualified to work with electricity and tree work. Appropriate distances are maintained for all workers who are not qualified.	
<input type="checkbox"/>	<input type="checkbox"/>	Equipment is inspected, maintained, repaired, and used in accordance with the manufacturer's directions.	
<input type="checkbox"/>	<input type="checkbox"/>	Prior to felling actions are planned to include clearing of the area to permit safe working conditions and escape.	
<input type="checkbox"/>	<input type="checkbox"/>	Employees must be trained in the safe operation of all equipment.	
<input type="checkbox"/>	<input type="checkbox"/>	All equipment and machinery is inspected and determined safe prior to use.	

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<input type="checkbox"/>	<input type="checkbox"/>	Work is performed under requirements of FLD 43.	
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**BLASTING**

**29 CFR 1926 Subpart U. EM 385-1-1, Section 29**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	A blasting safety plan is developed prior to bringing explosives on-site.	
<input type="checkbox"/>	<input type="checkbox"/>	The transportation, handling, storage, and use of explosives, blasting agents, and blasting equipment must be directed and supervised by a person with proven experience and ability in blasting operations. Licensing of person is verified.	
<input type="checkbox"/>	<input type="checkbox"/>	Blasting operations in or adjacent to cofferdams, piers, underwater structures, buildings, structures, or other facilities must be carefully planned with full consideration to potential vibration and damage.	

**HAZARDOUS, TOXIC, AND RADIOACTIVE WASTE AND UNDERGROUND STORAGE TANK (UST) ACTIVITIES**

**29 CFR 1926 Subpart D. EM 385-1-1, Section 28**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	All construction activities performed with known or potential exposure to hazardous waste are conducted in accordance with Hazardous Waste Operations and Emergency Response requirements.	

**CONCRETE and MASONRY CONSTRUCTION**

**29 CFR 1926 Subpart Q. EM 385-1-1, Section 27**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Construction loads are not placed on a concrete or masonry structure or portion of a concrete or masonry structure unless the employer determines, based on information from a person who is qualified in structural design, that the structure or portion of the structure is capable of supporting the loads.	
<input type="checkbox"/>	<input type="checkbox"/>	Employees are not permitted to work above or in positions exposed to protruding reinforcing steel or other impalement hazards unless provisions have been made to control the hazard.	
<input type="checkbox"/>	<input type="checkbox"/>	Sections of concrete conveyances and airlines under pressure are secured with wire rope (or equivalent material) in addition to the regular couplings or connections.	
<input type="checkbox"/>	<input type="checkbox"/>	Structural and reinforcing steel for walls, piers, columns, and similar vertical structures is supported and/or guyed to prevent overturning or collapse	
<input type="checkbox"/>	<input type="checkbox"/>	All form-work, shoring, and bracing is designed, fabricated, erected, supported, braced, and maintained so it will safely support all vertical and lateral loads that may be applied until the loads can be supported by the structure.	
<input type="checkbox"/>	<input type="checkbox"/>	Shoring equipment is inspected prior to erection to determine that it is specified in the shoring design. Any equipment found to be damaged is not used.	
<input type="checkbox"/>	<input type="checkbox"/>	Erected shoring equipment is inspected immediately prior to, during, and immediately after the placement of concrete. Any shoring equipment that is found to be damaged, displaced, or weakened is immediately reinforced or re-shored.	
<input type="checkbox"/>	<input type="checkbox"/>	Shoring, vertical slip forms and jacks conform with requirements of Section 27.B.08-13 of USACE EM 385-1-1.	
<input type="checkbox"/>	<input type="checkbox"/>	Forms and shores (except those on slab or grade and slip forms) are not removed until the individual responsible for forming and/or shoring determines that the concrete has gained sufficient strength to support its weight and all superimposed loads.	
<input type="checkbox"/>	<input type="checkbox"/>	Precast concrete members are adequately supported to prevent overturning or collapse until permanent connections are complete	
<input type="checkbox"/>	<input type="checkbox"/>	No one is permitted under pre-cast concrete members being lifted or tilted into position except employees required for the erection of those members.	
<input type="checkbox"/>	<input type="checkbox"/>	Lift slab operations are planned and designed by a registered engineer or architect.	
<input type="checkbox"/>	<input type="checkbox"/>	Hydraulic jacks used in lift slab construction have a safety device that causes the jacks to support the load in any position if the jack malfunctions	
<input type="checkbox"/>	<input type="checkbox"/>	No one is permitted under the slab during jacking operations.	

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<input type="checkbox"/>	<input type="checkbox"/>	A limited access zone is established whenever a masonry wall is being constructed.	
<input type="checkbox"/>	<input type="checkbox"/>	Fall protection is provided to masonry workers exposed to falls of 6 feet or more.	

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**STEEL ERECTION**  
**29 CFR 1926 Subpart R. EM 385-1-1, Section 27**

YES	NO		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	Impact wrenches have a locking device for retaining the socket. Containers shall be provided for storing or carrying rivets, bolts, and drift pins, and secured against accidental displacement when aloft.	
<input type="checkbox"/>	<input type="checkbox"/>	Structural and reinforcing steel for walls, piers, columns, and similar vertical structures shall be guyed and supported to prevent collapse	
<input type="checkbox"/>	<input type="checkbox"/>	No loading is placed upon steel joists until all bridging is completely and permanently installed.	
<input type="checkbox"/>	<input type="checkbox"/>	Workers are provided fall protection whenever they are exposed to falls of 1.8 m (6 ft) or more (EM 385-1-1).	
<input type="checkbox"/>	<input type="checkbox"/>	Temporary flooring in skeleton steel erection conforms with Section 27.F of USACE 385-1-1	

**ROOFING**  
**29 CFR 1926 Subpart M. EM 385-1-1, Sections 21, 22, 24, 27**

Yes	No		COMMENT
<input type="checkbox"/>	<input type="checkbox"/>	In the construction, maintenance, repair, and demolition, of roofs, fall protection systems is provided that will prevent personnel from slipping and falling from the roof and prevent personnel on lower levels from being struck by falling objects	
<input type="checkbox"/>	<input type="checkbox"/>	On all roofs greater than 4.8 m (16 ft) in height, a hoisting device, stairways, or progressive platforms are furnished for supplying materials and equipment.	
<input type="checkbox"/>	<input type="checkbox"/>	Roofing materials and accessories that could be moved by the wind, including metal roofing panels, that are on the roof and unattached are secured when wind speeds are greater than, or are anticipated to exceed, 10 mph.	
<input type="checkbox"/>	<input type="checkbox"/>	Level, guarded platforms are provided at the landing area on the roof.	
<input type="checkbox"/>	<input type="checkbox"/>	When their use is permitted, warning line systems comply with USACE Section 27.07 of EM 385-1-1.	
<input type="checkbox"/>	<input type="checkbox"/>	Workers involved in roof-edge materials handling or working in a storage area located on a roof with a slope $\neq$ to four vertical to twelve horizontal and with <u>edges 6 ft or more above</u> lower levels are protected by the use of a guardrail, safety net, or personal fall arrest system along all unprotected roof sides and edges of the area.	

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### ENVIRONMENTAL COMPLIANCE

Yes	No		Comments
<input type="checkbox"/>	<input type="checkbox"/>	Environmental Compliance and Waste Management Plan on file.	
<input type="checkbox"/>	<input type="checkbox"/>	Waste Determination Made.	
<input type="checkbox"/>	<input type="checkbox"/>	Manifest and/or Shipping Papers prepared and filed.	
<input type="checkbox"/>	<input type="checkbox"/>	Manifest Exception Reports Prepared, as necessary. Procedures to track manifests in place.	
<input type="checkbox"/>	<input type="checkbox"/>	State Annual and EPA Biennial Reporting Information Available.	
<input type="checkbox"/>	<input type="checkbox"/>	RCRA Personnel Training Records on file.	
<input type="checkbox"/>	<input type="checkbox"/>	CAA Permits on file.	
<input type="checkbox"/>	<input type="checkbox"/>	CWA Permits on file.	
<input type="checkbox"/>	<input type="checkbox"/>	RCRA Permits on file.	
<input type="checkbox"/>	<input type="checkbox"/>	State and/or Local Permits on file.	
<input type="checkbox"/>	<input type="checkbox"/>	RCRA Inspections conducted and Documentation on file.	
<input type="checkbox"/>	<input type="checkbox"/>	Transporter and TSD compliance information on file.	
<input type="checkbox"/>	<input type="checkbox"/>	Waste Accumulation Areas Managed Properly.	
<input type="checkbox"/>	<input type="checkbox"/>	Wetlands Areas Identified and Protected.	
<input type="checkbox"/>	<input type="checkbox"/>	Endangered, Threatened, or Special Concern Species or Areas Identified and Protective Methods Determined.	
<input type="checkbox"/>	<input type="checkbox"/>	Run-on and Runoff Concerns Identified and Managed.	
<input type="checkbox"/>	<input type="checkbox"/>	Adjacent Land Areas Protected as Necessary.	
<input type="checkbox"/>	<input type="checkbox"/>	Non-Hazardous Solid Wastes Managed Properly.	

### MISCELLANEOUS REGULATORY and POLICY COMPLIANCE

Yes	No		Comments
<input type="checkbox"/>	<input type="checkbox"/>	Personnel Training Records for DOT Materials Handling on file.	
<input type="checkbox"/>	<input type="checkbox"/>	Noise Control Issues Addressed and Managed.	
<input type="checkbox"/>	<input type="checkbox"/>	Site Security Issues Identified and Managed.	
<input type="checkbox"/>	<input type="checkbox"/>	Known Historical, Archeological, and Cultural Resources Identified and Managed.	
<input type="checkbox"/>	<input type="checkbox"/>	WESTON EHS Analysis Checklist In Use.	
<input type="checkbox"/>	<input type="checkbox"/>	Safety Observation and Recognition Program in place.	
<input type="checkbox"/>	<input type="checkbox"/>	Weekly EHS Report Card System in place.	
<input type="checkbox"/>	<input type="checkbox"/>	Federal, State, and Local Required Postings in place.	
<input type="checkbox"/>	<input type="checkbox"/>	Site specific Lockout/Tagout Program is in place.	
<input type="checkbox"/>	<input type="checkbox"/>	Site-specific Confined Space Program is in place.	
<input type="checkbox"/>	<input type="checkbox"/>	Site Safety Officer filing system is in place and up to date.	

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**ATTACHMENT I  
HAZARD CHECKLIST**

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*July 2013*

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### EHS REVIEW CHECKLIST-WESTON FIELD OPERATIONS

This form is to be completed prior to performing an EHS review of a Field Project to what hazards have been anticipated and determine which elements of the BBS EHS Field Review Checklist apply and capture positive observations and Corrective Action items. The BBS EHS Field Review Checklist elements will serve as a guide for the review.

Site Manager/EHS Officer: Date: Location:				SOW:				Team (name or reference via daily sign-in sheet) Weston Team Contractors					
<b>HAZARDS IDENTIFIED (check those applicable)</b>				I am confident hazard is identified and controls identified in HASP				Y = Under control +; N = needs work -					
	<u>Chemical</u>	Y	N	<u>Radiological</u>			Mobile Const. Equipment			Utilities			- Permits needed
	Flammable/combustible			Ultra-Violet			Materials handling/Conveyors			<b>Falls at same level</b>			
	Corrosive			Sunlight			Cranes/ Pile Driving/Dredge			Slippery surface Wet/Ice/Snow			Water - CWA
	Oxidizer			Infrared			Compressed Gases			<b>Ergonomic</b>			Storm Water
	Reactive			Lasers			Traffic			Manual Lifting			SDA
	Toxic			XRF			High Pressure Washers			Pushing/pulling			NPDES
	OSHA Specific Std			Density Gauges			Hand and Power Tools			Repetitive motion			Waste - RCRA/TSCA
	Asbestos			Isotopes			Drilling & Boring			Rough Terrain			Other Solid
	Lead			<u>Physical</u>			Low Illumination			<b>Other Hazards</b>			
	Welding/Cutting/Burning			<b>Motor Vehicle Operation</b>			<b>Caught-in/Caught between</b>			Heat			Land - CERCLA
	UXO/OE/ CWM			Highway - Passenger			Excavation			Cold			
	Process Safety			Highway – Pickup			Confined Spaces			Incllement Weather			Other Environmental
	Other			Special – ATV/Utility			Machinery			Hot Surfaces/Materials			
	Other:			<b>Working at elevation</b>			Operation/Use of Boats			Fire - Hot Work			Client/Stakeholder
	<u>Biological</u>			Falls from elevation			Working Over Water			Noise			
	Insects			Ladders			<b>Electrical</b>			Diving			Team Contractor
	Animals			Scaffolding			Electricity (>600V)			Site Security			
	Plants			Aerial lifts			Electricity (> 50V)			Remote Areas			DG Shipping
	Mold/Fungus			<b>Striking against/Struck-by</b>			Electricity (50V or less)			<b>Environmental Risk</b>			Air Ship
	Viral/Bacterial			Demolition			Stored Hazardous Energy			Air - Emission Source			Bulk surface ship
<b>REQUIRED CONTROLS/PROTECTION (check as applicable)</b>													
				I am confident hazard is identified Protection/controls are implemented and effective				Y = Under control +; N = needs work -					
	BBS			Engineering Controls			Work Permit			Welding Mask			Welding Leathers
	BBS orientation			Guard Rails			Dig Safe Permit			Cutting Glasses			Diving/SCUBA
	Safety Vision Comm.			Machine Guards			Contingency Plan			Cotton Coverall			Diving/Surface Supplied
	Client has BBS			Sound Barriers			Critical Lift Plans			Tyvek Coveralls			<b>Contingency</b>
	HASP Posted			Enclosure			Equip. Inspection Sheets			Coated Coveralls			Emergency Plan Known
	HASP Indoctrination			Elevation			PPE			Fire Resistant clothing			Eye wash/shower Location
	Daily EHS Meetings			Isolation			Air Supplying Respirator			Arc flash			First Aid Kit Location
	Meetings Interactive			GFCI			SCBA			Level A			Fire Extinguisher Location

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### EHS REVIEW CHECKLIST-WESTON FIELD OPERATIONS

This form is to be completed prior to performing an EHS review of a Field Project to what hazards have been anticipated and determine which elements of the BBS EHS Field Review Checklist apply and capture positive observations and Corrective Action items. The BBS EHS Field Review Checklist elements will serve as a guide for the review.

	<b>EHS Observations used</b>		Assured Ground Program		Air Purifying Respirator		CWM		Spill Kit Location
	<b>Recognition/Celebration</b>		Apply Anti-slip/skid Mat		Hard Hat		Safety Shoes/Boots		Severe weather shelter
	Feedback welcome		<b>Administrative Control</b>		Ear Plugs		Rubber Boots		Evacuation Routes
	Coaching is positive		Competent Person Use		Ear Muffs		Gloves		
	Coaching is accepted		Qualified for task		Safety Glasses		Cooling Suits/ Ice Vests		<b>ERMP</b>
	Buddy system for SSE		Trained/Certified		Goggles		Radiant heat Suits		ERM Tool Relevant
	Actively caring evident		Hot Work Permit		Chemical Goggles		Fall Arrest		ERM Plan Exists
	<b>Hierarchy of Controls</b>		CSE Permit		Face Shield		PFD		ERM Plan Communicated
	Elimination/substitution		Lockout/Tag Out		Thermal Shield		Electrical insulation		ERM Plan Implementation

<b>ADDITIONAL HAZARDS IDENTIFIED (List)</b>			I am confident hazard is identified and controls identified in HASP			Y = Under control +; N = needs work -			
	<u>Chemical</u>		<u>Biological/Radiological</u>		<u>Physical</u>		<u>Physical</u>		<u>Environmental</u>

<b>ADDITIONAL REQUIRED CONTROLS/PROTECTION IDENTIFIED</b>			I am confident protection/controls are implemented and effective			Y = Under control +; N = needs work -			
	<u>BBS</u>		<u>Hierarchy</u>		<u>Engineering</u>		<u>Administrative</u>		<u>PPE</u>

<b>Transfer Items needing work to this section</b>						
<b>Items needing work</b>		Regulatory or FLD Reference	Corrective Action	Correct by	Corrected	Person Responsible for Correction

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**EHS REVIEW CHECKLIST-WESTON FIELD OPERATIONS**

This form is to be completed prior to performing an EHS review of a Field Project to what hazards have been anticipated and determine which elements of the BBS EHS Field Review Checklist apply and capture positive observations and Corrective Action items. The BBS EHS Field Review Checklist elements will serve as a guide for the review.


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**ATTACHMENT J**  
**AUDIT AND OTHER FORMS**

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## **Attachment F**



# ANALYTICAL REPORT

Report Date: December 12, 2014

Megan Adamczyk  
Weston Solutions  
1435 Garrison Street  
Suite 100  
Denver, CO 80215

Phone: (914) 204-1044

E-mail: [megan.adamczyk@westonsolutions.com](mailto:megan.adamczyk@westonsolutions.com)

Workorder: **34-1434502**

Project ID: Weston Solutions

Purchase Order: NA

Client Sample ID	Lab ID	Collect Date	Receive Date	Sampling Site
SCOU1W05	1434502001	12/10/14	12/10/14	
SCOU1W06	1434502002	12/10/14	12/10/14	
SCOU1W07	1434502003	12/10/14	12/10/14	
SCOU1W06	1434502004	12/10/14	12/10/14	
SCOU1W07	1434502005	12/10/14	12/10/14	



# ANALYTICAL REPORT

Workorder: **34-1434502**

Client: Weston Solutions

Project Manager: Kevin W. Griffiths

## Analytical Results

Sample ID: <b>SCOU1W05</b>	Sampling Site: NA	Collected: 12/10/2014
Lab ID: 1434502001	Media: 8 oz Amber Glass Jar	Received: 12/10/2014
Matrix: Soil/Solid/Sediment	Sampling Parameter: NA	

### Analysis Method - SW 6010C

Preparation: EPA 3015 SPLP/TCLP, Prep Batch: EIPX/5230 (HBN: 140311) Prepared: 12/12/2014	<u>Weight/Volume</u> Initial: 45 mL Final: 50 mL	Analysis: SW 6010C SPLP/TCLP, Water Batch: EICP/4830 (HBN: 140338) Analyzed: 12/12/2014 12:02	Instrument ID: ICP08 Percent Solid: 91.8 Report Basis: Wet
---	--	---	--

Analyte	mg/L	Reg. Limit (mg/L)	RL (mg/L)	Dilution	Qual.
Arsenic	ND	5.0	0.30	1	
Barium	2.37	100	0.020	1	
Cadmium	0.0514	1.0	0.010	1	
Chromium	ND	5.0	0.020	1	
Lead	7.88	5.0	0.10	1	
Selenium	ND	1.0	0.30	1	
Silver	ND	5.0	0.020	1	

### Analysis Method - SW 6020

Preparation: EPA 3050, ICP-MS Soil Prep Batch: EMS/3949 (HBN: 140301) Prepared: 12/11/2014	<u>Weight/Volume</u> Initial: 0.5045 grams Final: 0.05 L	Analysis: SW 6020A, Soil Batch: EMS/3950 (HBN: 140313) Analyzed: 12/11/2014 21:42	Instrument ID: ICPM02 Percent Solid: 91.8 Report Basis: Dry
--	--	---	---

Analyte	ug/g	MDL (ug/g)	RL (ug/g)	Dilution	Qual.
Aluminum	1900	3.2	11	1	
Arsenic	2.7	0.17	0.54	1	
Beryllium	0.22	0.16	0.54	1	J
Calcium	37000	16	54	1	
Cadmium	13	0.16	0.54	1	
Cobalt	4.9	0.16	0.54	1	
Chromium	8.3	0.32	1.1	1	
Copper	180	0.32	1.1	1	
Iron	7700	8.1	27	1	
Magnesium	7300	0.81	13	1	
Manganese	290	0.16	0.54	1	
Nickel	47	0.16	0.54	1	
Lead	820	0.16	0.54	1	
Selenium	ND	0.81	2.7	1	U
Silver	0.98	0.16	0.54	1	
Sodium	240	16	54	1	
Thallium	ND	0.16	0.54	1	U
Vanadium	5.3	0.32	1.1	1	
Zinc	410	0.38	1.1	1	
Antimony	69	0.32	1.1	1	
Potassium	820	16	54	1	
Barium	130	0.81	2.7	1	

Results Continued on Next Page



# ANALYTICAL REPORT

Workorder: **34-1434502**

Client: Weston Solutions

Project Manager: Kevin W. Griffiths

## Analytical Results

Sample ID: <b>SCOU1W05</b>	Sampling Site: NA	Collected: 12/10/2014
Lab ID: 1434502001	Media: 8 oz Amber Glass Jar	Received: 12/10/2014
Matrix: Soil/Solid/Sediment	Sampling Parameter: NA	

### Analysis Method - SW 7470

Preparation: SW 7470A SPLP/TCLP, Water Prep	<u>Weight/Volume</u>	Analysis: SW 7470A SPLP/TCLP, Water	Instrument ID: AACV02
Batch: EHG/5646 (HBN: 140316)	Initial: 25 mL	Batch: EHG/5647 (HBN: 140352)	Percent Solid: 91.8
Prepared: 12/12/2014	Final: 50 mL	Analyzed: 12/12/2014 14:44	Report Basis: Wet

Analyte	mg/L	Reg. Limit (mg/L)	RL (mg/L)	Dilution	Qual.
Mercury	ND	0.20	0.00020	1	

Sample ID: <b>SCOU1W06</b>	Sampling Site: NA	Collected: 12/10/2014
Lab ID: 1434502002	Media: 8 oz Amber Glass Jar	Received: 12/10/2014
Matrix: Soil/Solid/Sediment	Sampling Parameter: NA	

### Analysis Method - SW 6010C

Preparation: EPA 3015 SPLP/TCLP, Prep	<u>Weight/Volume</u>	Analysis: SW 6010C SPLP/TCLP, Water	Instrument ID: ICP08
Batch: EIPX/5230 (HBN: 140311)	Initial: 22.5 mL	Batch: EICP/4830 (HBN: 140338)	Percent Solid: 87.3
Prepared: 12/12/2014	Final: 50 mL	Analyzed: 12/12/2014 12:27	Report Basis: Wet

Analyte	mg/L	Reg. Limit (mg/L)	RL (mg/L)	Dilution	Qual.
Arsenic	ND	5.0	0.60	1	
Barium	0.516	100	0.040	1	
Cadmium	0.422	1.0	0.020	1	
Chromium	0.0442	5.0	0.040	1	
Lead	1.33	5.0	0.20	1	
Selenium	ND	1.0	0.60	1	
Silver	ND	5.0	0.040	1	

### Analysis Method - SW 7470

Preparation: SW 7470A SPLP/TCLP, Water Prep	<u>Weight/Volume</u>	Analysis: SW 7470A SPLP/TCLP, Water	Instrument ID: AACV02
Batch: EHG/5646 (HBN: 140316)	Initial: 25 mL	Batch: EHG/5647 (HBN: 140352)	Percent Solid: 87.3
Prepared: 12/12/2014	Final: 50 mL	Analyzed: 12/12/2014 14:49	Report Basis: Wet

Analyte	mg/L	Reg. Limit (mg/L)	RL (mg/L)	Dilution	Qual.
Mercury	0.00033	0.20	0.00020	1	

Sample ID: <b>SCOU1W07</b>	Sampling Site: NA	Collected: 12/10/2014
Lab ID: 1434502003	Media: 8 oz Amber Glass Jar	Received: 12/10/2014
Matrix: Soil/Solid/Sediment	Sampling Parameter: NA	

### Analysis Method - SW 6010C

Preparation: EPA 3015 SPLP/TCLP, Prep	<u>Weight/Volume</u>	Analysis: SW 6010C SPLP/TCLP, Water	Instrument ID: ICP08
Batch: EIPX/5230 (HBN: 140311)	Initial: 45 mL	Batch: EICP/4830 (HBN: 140338)	Percent Solid: 79.9
Prepared: 12/12/2014	Final: 50 mL	Analyzed: 12/12/2014 12:30	Report Basis: Wet

Analyte	mg/L	Reg. Limit (mg/L)	RL (mg/L)	Dilution	Qual.
Arsenic	ND	5.0	0.30	1	

Results Continued on Next Page



# ANALYTICAL REPORT

Workorder: **34-1434502**

Client: Weston Solutions

Project Manager: Kevin W. Griffiths

## Analytical Results

Sample ID: <b>SCOU1W07</b>	Sampling Site: NA	Collected: 12/10/2014
Lab ID: 1434502003	Media: 8 oz Amber Glass Jar	Received: 12/10/2014
Matrix: Soil/Solid/Sediment	Sampling Parameter: NA	

### Analysis Method - SW 6010C

Preparation: EPA 3015 SPLP/TCLP, Prep Batch: EIPX/5230 (HBN: 140311) Prepared: 12/12/2014	<u>Weight/Volume</u> Initial: 45 mL Final: 50 mL	Analysis: SW 6010C SPLP/TCLP, Water Batch: EICP/4830 (HBN: 140338) Analyzed: 12/12/2014 12:30	Instrument ID: ICP08 Percent Solid: 79.9 Report Basis: Wet
---	--	---	--

Analyte	mg/L	Reg. Limit (mg/L)	RL (mg/L)	Dilution	Qual.
Barium	0.0542	100	0.020	1	
Cadmium	ND	1.0	0.010	1	
Chromium	ND	5.0	0.020	1	
Lead	ND	5.0	0.10	1	
Selenium	ND	1.0	0.30	1	
Silver	ND	5.0	0.020	1	

### Analysis Method - SW 7470

Preparation: SW 7470A SPLP/TCLP, Water Prep Batch: EHG/5646 (HBN: 140316) Prepared: 12/12/2014	<u>Weight/Volume</u> Initial: 25 mL Final: 50 mL	Analysis: SW 7470A SPLP/TCLP, Water Batch: EHG/5647 (HBN: 140352) Analyzed: 12/12/2014 14:50	Instrument ID: AACV02 Percent Solid: 79.9 Report Basis: Wet
--	--	--	---

Analyte	mg/L	Reg. Limit (mg/L)	RL (mg/L)	Dilution	Qual.
Mercury	ND	0.20	0.00020	1	

## Comments

### Quality Control: SW 6020 - (HBN: 140313)

ICP-MS: Matrix spike not within control limits for cadmium, copper, nickel, antimony and barium. Matrix duplicate within control limits for aluminum, cadmium, cobalt, copper, iron, manganese, nickel, lead, zinc, potassium and barium. Suspect matrix not homogeneous.

### Quality Control: SW 7470 - (HBN: 140316)

TCLP extracts for mercury analysis were diluted 2-fold prior to sample digestion by taking 25mL initial sample volume to 50mL final volume with ASTM Type II water. This was done in order to reduce potential matrix effects. The mercury reporting limit was also raised by the dilution factor.

## Report Authorization (/S/ is an electronic signature that complies with 21 CFR Part 11)

Method	Analyst	Peer Review
SW 6010C	/S/ Neil A. Edwards 12/12/2014 13:12	/S/ John T Kershnik 12/12/2014 14:12
SW 6020	/S/ John T Kershnik 12/12/2014 08:12	/S/ Kristie F. Bitner 12/12/2014 10:12
SW 7470	/S/ Christopher R. Hansen 12/12/2014 15:12	/S/ Kristie F. Bitner 12/12/2014 15:12
Solids/Moisture Determination	/S/ Ilse J. Ovalle 12/11/2014 14:12	/S/ Joseph Gress 12/11/2014 15:12



# ANALYTICAL REPORT

Workorder: **34-1434502**

Client: Weston Solutions

Project Manager: Kevin W. Griffiths

## Laboratory Contact Information

ALS Environmental  
960 W Levoe Drive  
Salt Lake City, Utah 84123

Phone: (801) 266-7700  
Email: als@alst.com  
Web: www.alst.com

## General Lab Comments

The results provided in this report relate only to the items tested.  
Samples were received in acceptable condition unless otherwise noted.  
Samples have not been blank corrected unless otherwise noted.  
This test report shall not be reproduced, except in full, without written approval of ALS.

ALS provides professional analytical services for all samples submitted. ALS is not in a position to interpret the data and assumes no responsibility for the quality of the samples submitted.

All quality control samples processed with the samples in this report yielded acceptable results unless otherwise noted.

ALS is accredited for specific fields of testing (scopes) in the following testing sectors. The quality system implemented at ALS conforms to accreditation requirements and is applied to all analytical testing performed by ALS. The following table lists testing sector, accreditation body, accreditation number and website. Please contact these accrediting bodies or your ALS project manager for the current scope of accreditation that applies to your analytical testing.

Testing Sector	Accreditation Body (Standard)	Certificate Number	Website
Environmental	ACCLASS (DoD ELAP)	ADE-1420	<a href="http://www.aiclasscorp.com">http://www.aiclasscorp.com</a>
	Utah (NELAC)	DATA1	<a href="http://health.utah.gov/lab/labimp/">http://health.utah.gov/lab/labimp/</a>
	Nevada	UT00009	<a href="http://ndep.nv.gov/bsdwlabservice.htm">http://ndep.nv.gov/bsdwlabservice.htm</a>
	Oklahoma	UT00009	<a href="http://www.deq.state.ok.us/CSDnew/">http://www.deq.state.ok.us/CSDnew/</a>
	Iowa	IA# 376	<a href="http://www.iowadnr.gov/InsideDNR/RegulatoryWater.aspx">http://www.iowadnr.gov/InsideDNR/RegulatoryWater.aspx</a>
	Florida (TNI)	E871067	<a href="http://www.dep.state.fl.us/labs/bars/sas/qa/">http://www.dep.state.fl.us/labs/bars/sas/qa/</a>
	Texas (TNI)	T104704456-11-1	<a href="http://www.tceq.texas.gov/field/qa/lab_accred_certif.html">http://www.tceq.texas.gov/field/qa/lab_accred_certif.html</a>
Industrial Hygiene	AIHA (ISO 17025 & AIHA IHLAP/ELLAP)	101574	<a href="http://www.aihaaccreditedlabs.org">http://www.aihaaccreditedlabs.org</a>
Lead Testing:			
CPSC	ACCLASS (ISO 17025, CPSC)	ADE-1420	<a href="http://www.aiclasscorp.com">http://www.aiclasscorp.com</a>
Soil, Dust, Paint ,Air	AIHA (ISO 17025, AIHA ELLAP and NLLAP)	101574	<a href="http://www.aihaaccreditedlabs.org">http://www.aihaaccreditedlabs.org</a>
Dietary Supplements	ACCLASS (ISO 17025)	ADE-1420	<a href="http://www.aiclasscorp.com">http://www.aiclasscorp.com</a>



## ANALYTICAL REPORT

Workorder: **34-1434502**

Client: Weston Solutions

Project Manager: Kevin W. Griffiths

### Result Symbol Definitions

MDL = Method Detection Limit, a statistical estimate of method/media/instrument sensitivity.

RL = Reporting Limit, a verified value of method/media/instrument sensitivity.

CRDL = Contract Required Detection Limit

Reg. Limit = Regulatory Limit.

ND = Not Detected, testing result not detected above the MDL or RL.

< This testing result is less than the numerical value.

\*\* No result could be reported, see sample comments for details.

### Qualifier Symbol Definitions

U = Qualifier indicates that the analyte was not detected above the MDL.

J = Qualifier Indicates that the analyte value is between the MDL and the RL. It is also used to indicate an estimated value for tentatively identified compounds in mass spectrometry where a 1:1 response is assumed.

B = Qualifier indicates that the analyte was detected in the blank.

E = Qualifier indicates that the analyte result exceeds calibration range.

P = Qualifier indicates that the RPD between the two columns is greater than 40%.



# ANALYTICAL REPORT

Report Date: December 16, 2014

Megan Adamczyk  
Weston Solutions  
1435 Garrison Street  
Suite 100  
Denver, CO 80215

Phone: (914) 204-1044

E-mail: [megan.adamczyk@westonsolutions.com](mailto:megan.adamczyk@westonsolutions.com)

Workorder: **34-1434506**

Client Project ID: Weston Solutions  
Purchase Order: NA  
Project Manager: Kevin Griffiths

## Analytical Results

Sample ID: <b>SCOU1A01</b>		Collected: 12/09/2014	
Lab ID: 1434506001		Received: 12/10/2014	
Method: NIOSH 7300 Mod.		Media: MCE Filter	Prepared: 12/11/2014
		Sampling Parameter: Air Volume 960 L	Analyzed: 12/12/2014
Analyte	ug/sample	mg/m <sup>3</sup>	RL (ug/sample)
Arsenic	<2.5	<0.0026	2.5
Lead	<1.3	<0.0013	1.3

Sample ID: <b>SCOU1A02</b>		Collected: 12/09/2014	
Lab ID: 1434506002		Received: 12/10/2014	
Method: NIOSH 7300 Mod.		Media: MCE Filter	Prepared: 12/11/2014
		Sampling Parameter: Air Volume 960 L	Analyzed: 12/12/2014
Analyte	ug/sample	mg/m <sup>3</sup>	RL (ug/sample)
Arsenic	<2.5	<0.0026	2.5
Lead	<1.3	<0.0013	1.3

Sample ID: <b>SCOU1A03</b>		Collected: 12/09/2014	
Lab ID: 1434506003		Received: 12/10/2014	
Method: NIOSH 7300 Mod.		Media: MCE Filter	Prepared: 12/11/2014
		Sampling Parameter: Air Volume 960 L	Analyzed: 12/12/2014
Analyte	ug/sample	mg/m <sup>3</sup>	RL (ug/sample)
Arsenic	<2.5	<0.0026	2.5
Lead	<1.3	<0.0013	1.3

Sample ID: <b>SCOU1A04</b>		Collected: 12/09/2014	
Lab ID: 1434506004		Received: 12/10/2014	
Method: NIOSH 7300 Mod.		Media: MCE Filter	Prepared: 12/11/2014
		Sampling Parameter: Air Volume 960 L	Analyzed: 12/12/2014
Analyte	ug/sample	mg/m <sup>3</sup>	RL (ug/sample)
Arsenic	<2.5	<0.0026	2.5

Results Continued on Next Page

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# ANALYTICAL REPORT

Workorder: **34-1434506**  
 Client Project ID: Weston Solutions  
 Purchase Order: NA  
 Project Manager: Kevin Griffiths

## Analytical Results

Sample ID: <b>SCOU1A04</b>	Collected: 12/09/2014		
Lab ID: 1434506004	Received: 12/10/2014		
Method: NIOSH 7300 Mod.	Media: MCE Filter		
	Prepared: 12/11/2014		
	Analyzed: 12/12/2014		
	Sampling Parameter: Air Volume 960 L		
Analyte	ug/sample	mg/m <sup>3</sup>	RL (ug/sample)
Lead	<1.3	<0.0013	1.3

## Report Authorization (/S/ is an electronic signature that complies with 21 CFR Part 11)

Method	Analyst	Peer Review
NIOSH 7300 Mod.	/S/ Penny A. Foote 12/16/2014 08:12	/S/ Peter P. Steen 12/16/2014 10:12

## Laboratory Contact Information

ALS Environmental  
 960 W Levoy Drive  
 Salt Lake City, Utah 84123

Phone: (801) 266-7700  
 Email: als.lt.lab@ALSGlobal.com  
 Web: www.alssl.com

## General Lab Comments

The results provided in this report relate only to the items tested.  
 Samples were received in acceptable condition unless otherwise noted.  
 Samples have not been blank corrected unless otherwise noted.  
 This test report shall not be reproduced, except in full, without written approval of ALS.

ALS provides professional analytical services for all samples submitted. ALS is not in a position to interpret the data and assumes no responsibility for the quality of the samples submitted.

All quality control samples processed with the samples in this report yielded acceptable results unless otherwise noted.

ALS is accredited for specific fields of testing (scopes) in the following testing sectors. The quality system implemented at ALS conforms to accreditation requirements and is applied to all analytical testing performed by ALS. The following table lists testing sector, accreditation body, accreditation number and website. Please contact these accrediting bodies or your ALS project manager for the current scope of accreditation that applies to your analytical testing.

Testing Sector	Accreditation Body (Standard)	Certificate Number	Website
Environmental	ACCLASS (DoD ELAP)	ADE-1420	<a href="http://www.aiclasscorp.com">http://www.aiclasscorp.com</a>
	Utah (NELAC)	DATA1	<a href="http://health.utah.gov/lab/labimp/">http://health.utah.gov/lab/labimp/</a>
	Nevada	UT00009	<a href="http://ndep.nv.gov/bsdwlabservice.htm">http://ndep.nv.gov/bsdwlabservice.htm</a>
	Oklahoma	UT00009	<a href="http://www.deq.state.ok.us/CSDnew/">http://www.deq.state.ok.us/CSDnew/</a>
	Iowa	IA# 376	<a href="http://www.iowadnr.gov/InsideDNR/RegulatoryWater.aspx">http://www.iowadnr.gov/InsideDNR/RegulatoryWater.aspx</a>
	Florida (TNI)	E871067	<a href="http://www.dep.state.fl.us/labs/bars/sas/qa/">http://www.dep.state.fl.us/labs/bars/sas/qa/</a>
	Texas (TNI)	T104704456-11-1	<a href="http://www.tceq.texas.gov/field/qa/lab_accred_certif.html">http://www.tceq.texas.gov/field/qa/lab_accred_certif.html</a>
Industrial Hygiene	AIHA (ISO 17025 & AIHA IHLAP/ELLAP)	101574	<a href="http://www.aihaaccreditedlabs.org">http://www.aihaaccreditedlabs.org</a>
Lead Testing:			
CPSC	ACCLASS (ISO 17025, CPSC)	ADE-1420	<a href="http://www.aiclasscorp.com">http://www.aiclasscorp.com</a>
Soil, Dust, Paint ,Air	AIHA (ISO 17025, AIHA ELLAP and NLLAP)	101574	<a href="http://www.aihaaccreditedlabs.org">http://www.aihaaccreditedlabs.org</a>
Dietary Supplements	ACCLASS (ISO 17025)	ADE-1420	<a href="http://www.aiclasscorp.com">http://www.aiclasscorp.com</a>



## ANALYTICAL REPORT

Workorder: **34-1434506**  
Client Project ID: Weston Solutions  
Purchase Order: NA  
Project Manager: Kevin Griffiths

### Definitions

LOD = Limit of Detection = MDL = Method Detection Limit, A statistical estimate of method/media/instrument sensitivity.

LOQ = Limit of Quantitation = RL = Reporting Limit, A verified value of method/media/instrument sensitivity.

ND = Not Detected, Testing result not detected above the LOD or LOQ.

NA = Not Applicable.

\*\* No result could be reported, see sample comments for details.

< This testing result is less than the numerical value.

() This testing result is between the LOD and LOQ and has higher analytical uncertainty than values at or above the LOQ.



## ANALYTICAL REPORT

Report Date: December 17, 2014

Megan Adamczyk  
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Suite 100  
Denver, CO 80215

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E-mail: [megan.adamczyk@westonsolutions.com](mailto:megan.adamczyk@westonsolutions.com)

Workorder: **34-1434902**

Project ID: Stone Castle RV

Purchase Order: Stone Castle RV

Client Sample ID	Lab ID	Collect Date	Receive Date	Sampling Site
SCOU1W08	1434902001	12/12/14	12/13/14	Stone Castle RV



# ANALYTICAL REPORT

Workorder: **34-1434902**

Client: Weston Solutions

Project Manager: Kevin W. Griffiths

## Analytical Results

Sample ID: <b>SCOU1W08</b>	Sampling Site: Stone Castle RV	Collected: 12/12/2014
Lab ID: 1434902001	Media: 8 oz Amber Glass Jar	Received: 12/13/2014
Matrix: Soil/Solid/Sediment	Sampling Parameter: NA	

### Analysis Method - SW 6010C

Preparation: EPA 3010 SPLP/TCLP, Prep	<u>Weight/Volume</u>	Analysis: SW 6010C SPLP/TCLP, Water	Instrument ID: ICP08
Batch: EIPX/5236 (HBN: 140519)	Initial: 50 mL	Batch: EICP/4835 (HBN: 140595)	Percent Solid: 82.1
Prepared: 12/16/2014	Final: 50 mL	Analyzed: 12/16/2014 15:28	Report Basis: Wet

Analyte	mg/L	Reg. Limit (mg/L)	RL (mg/L)	Dilution	Qual.
Arsenic	ND	5.0	0.30	1	
Barium	0.145	100	0.020	1	
Cadmium	0.0134	1.0	0.010	1	
Chromium	ND	5.0	0.020	1	
Lead	ND	5.0	0.10	1	
Selenium	ND	1.0	0.30	1	
Silver	ND	5.0	0.020	1	

### Analysis Method - SW 7470

Preparation: SW 7470A SPLP/TCLP, Water Prep	<u>Weight/Volume</u>	Analysis: SW 7470A SPLP/TCLP, Water	Instrument ID: AACV02
Batch: EHG/5650 (HBN: 140541)	Initial: 25 mL	Batch: EHG/5652 (HBN: 140627)	Percent Solid: 82.1
Prepared: 12/16/2014	Final: 50 mL	Analyzed: 12/17/2014 10:25	Report Basis: Wet

Analyte	mg/L	Reg. Limit (mg/L)	RL (mg/L)	Dilution	Qual.
Mercury	ND	0.20	0.00020	1	

## Comments

### Quality Control: SW 7470 - (HBN: 140627)

TCLP extracts for mercury analysis were diluted 2-fold prior to sample digestion by taking 25mL initial sample volume to 50mL final volume with ASTM Type II water. This was done in order to reduce potential matrix effects. The mercury reporting limit was also raised by the dilution factor.

## Report Authorization (/S/ is an electronic signature that complies with 21 CFR Part 11)

Method	Analyst	Peer Review
SW 6010C	/S/ Neil A. Edwards 12/16/2014 17:12	/S/ Kristie F. Bitner 12/17/2014 10:12
SW 7470	/S/ Christopher R. Hansen 12/17/2014 12:12	/S/ Lauren Jones 12/17/2014 14:12
Solids/Moisture Determination	/S/ Ilse J. Ovalle 12/17/2014 06:12	/S/ Read A. Fritts 12/17/2014 07:12

## Laboratory Contact Information

ALS Environmental  
960 W Levoy Drive  
Salt Lake City, Utah 84123

Phone: (801) 266-7700  
Email: als@alst.com  
Web: www.alst.com



# ANALYTICAL REPORT

Workorder: **34-1434902**

Client: Weston Solutions

Project Manager: Kevin W. Griffiths

## General Lab Comments

The results provided in this report relate only to the items tested.  
Samples were received in acceptable condition unless otherwise noted.  
Samples have not been blank corrected unless otherwise noted.  
This test report shall not be reproduced, except in full, without written approval of ALS.

ALS provides professional analytical services for all samples submitted. ALS is not in a position to interpret the data and assumes no responsibility for the quality of the samples submitted.

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Testing Sector	Accreditation Body (Standard)	Certificate Number	Website
Environmental	ACLASS (DoD ELAP)	ADE-1420	<a href="http://www.aiclasscorp.com">http://www.aiclasscorp.com</a>
	Utah (NELAC)	DATA1	<a href="http://health.utah.gov/lab/labimp/">http://health.utah.gov/lab/labimp/</a>
	Nevada	UT00009	<a href="http://ndep.nv.gov/bsdwlabservice.htm">http://ndep.nv.gov/bsdwlabservice.htm</a>
	Oklahoma	UT00009	<a href="http://www.deq.state.ok.us/CSDnew/">http://www.deq.state.ok.us/CSDnew/</a>
	Iowa	IA# 376	<a href="http://www.iowadnr.gov/InsideDNR/RegulatoryWater.aspx">http://www.iowadnr.gov/InsideDNR/RegulatoryWater.aspx</a>
	Florida (TNI)	E871067	<a href="http://www.dep.state.fl.us/labs/bars/sas/qa/">http://www.dep.state.fl.us/labs/bars/sas/qa/</a>
	Texas (TNI)	T104704456-11-1	<a href="http://www.tceq.texas.gov/field/qa/lab_accred_certif.html">http://www.tceq.texas.gov/field/qa/lab_accred_certif.html</a>
Industrial Hygiene	AIHA (ISO 17025 & AIHA IHLAP/ELLAP)	101574	<a href="http://www.aihaaccreditedlabs.org">http://www.aihaaccreditedlabs.org</a>
Lead Testing:			
CPSC	ACLASS (ISO 17025, CPSC)	ADE-1420	<a href="http://www.aiclasscorp.com">http://www.aiclasscorp.com</a>
Soil, Dust, Paint ,Air	AIHA (ISO 17025, AIHA ELLAP and NLLAP)	101574	<a href="http://www.aihaaccreditedlabs.org">http://www.aihaaccreditedlabs.org</a>
Dietary Supplements	ACLASS (ISO 17025)	ADE-1420	<a href="http://www.aiclasscorp.com">http://www.aiclasscorp.com</a>

## Result Symbol Definitions

MDL = Method Detection Limit, a statistical estimate of method/media/instrument sensitivity.  
RL = Reporting Limit, a verified value of method/media/instrument sensitivity.  
CRDL = Contract Required Detection Limit  
Reg. Limit = Regulatory Limit.  
ND = Not Detected, testing result not detected above the MDL or RL.  
< This testing result is less than the numerical value.  
\*\* No result could be reported, see sample comments for details.

## Qualifier Symbol Definitions

U = Qualifier indicates that the analyte was not detected above the MDL.  
J = Qualifier Indicates that the analyte value is between the MDL and the RL. It is also used to indicate an estimated value for tentatively identified compounds in mass spectrometry where a 1:1 response is assumed.  
B = Qualifier indicates that the analyte was detected in the blank.  
E = Qualifier indicates that the analyte result exceeds calibration range.  
P = Qualifier indicates that the RPD between the two columns is greater than 40%.

**DATA VERIFICATION REPORT  
FOR  
STONE CASTLE RECYCLING SITE- REMOVAL  
PAROWAN, IRON COUNTY, UTAH**

**Date:** 1/22/2015

**Laboratory:** ALS Environmental Laboratory, Salt Lake City, UT

**Laboratory Job #:** 34-1434502

**Data Validation Performed By:** Moira Pryhoda, Weston Solutions, Inc. (WESTON) Superfund Technical Assessment and Response Team (START)

**Weston Work Order # / TDD Number:** 20408.012.001.0201.00 / 0001-1411-06

This data verification report has been prepared by WESTON START under the START IV Region 8 contract. This report documents the data validation for four air samples and four solid samples collected for the Stone Castle Recycling Site that were analyzed for the following parameters and U.S. Environmental Protection Agency (EPA) methods:

- Lead and Arsenic by Modified NIOSH Method 7300 [Inductively Coupled Plasma – Atomic Emission Spectroscopy (ICP-AES)]
- Metals by SW 846 Method 6020A [Inductively Coupled Plasma – Mass Spectroscopy (ICP-MS)]
- Mercury in Liquid Waste by SW 846 Method 7470A [Cold Vapor Atomic Absorption]
- Trace Elements by SW 846 Method 6010C [Inductively Coupled Plasma – Atomic Emission Spectroscopy (ICP-AES)]

A Level 2 data package was received from ALS Environmental Laboratory. A Stage 1 Data Verification Report has been prepared by Weston Solutions, Inc. for the EPA. The data verification was conducted in general accordance with the EPA Guidance for Labeling Externally Validated Laboratory Analytical Data for Superfund Use in conjunction with the Contract Laboratory Program National Functional Guidelines (NFG) for Data Review.

**LEAD AND ARSENIC BY MODIFIED NIOSH METHOD 7300 (ICP-AES)**

The following table summarizes the samples for which this data validation is being conducted.

Sample	Lab ID	Matrix	Date Collected	Date Analyzed
SCOU1A01	1434506001	Air	12/9/2014	12/12/2014
SCOU1A02	1434506002	Air	12/9/2014	12/12/2014
SCOU1A03	1434506003	Air	12/9/2014	12/12/2014
SCOU1A04	1434506004	Air	12/9/2014	12/12/2014

**1. Data Verification Check**

A data verification and completeness check was performed for 100% of the data in accordance with the Stage 1 verification checks outlined in EPA “Guidance for Labeling Externally Validated Laboratory Analytical Data for Superfund Use” dated January 13, 2009. The following table details this check.

**Recommended Minimum Baseline Checks Used in the Stages of Laboratory Analytical Data Verification and Validation**

<b>Matrix:</b>	Air	
<b>Method:</b>	NIOSH 7300 Lead and Arsenic by ICP-AES	
<b>Check* (Y/N)</b>	<b>Stage 1</b>	<b>Details</b>
Y	Laboratory receiving and conducting analyses is identified	
Y	Proper documentation for all samples submitted by the project/requestor	
Y	Requested analytical methods were performed	
Y	Analysis dates are present	
Y	Requested target analyte results are reported	
Y	Original laboratory data qualifiers and data qualifier definitions for each reported result (and uncertainty / type of uncertainty, if required) are included	
Y	Requested target analyte result units are reported (and uncertainty units if required)	
Y	Requested reporting limits for all samples are present	
Y	Results at and below the requested/required reporting limits are clearly identified (including sample detection limits if required)	
Y	Sampling dates (and times if needed) are documented	
Y	Date and time of laboratory receipt of samples is documented	
Y	Sample conditions upon receipt at the laboratory	Sample conditions are noted as

	(including preservation, pH and temperature) are documented	acceptable. Details are not given.
	<b>RADIOCHEMICAL ANALYSIS ONLY:</b>	
N/A	Sample specific critical values (critical level / decision level / detection threshold) are reported	
N/A	Sample specific minimum detectable value, activity or concentration for all samples are reported	
N/A	Results at and below the requested/required critical values are clearly identified	
N/A	Chemical yield (if applicable to method) is reported for all samples	
N/A	Reference date and time (especially for short lived isotopes) is reported for all samples	

Notes:

\*A “Y” in the check column indicates completeness of the validation step.

\*An “N” in the check column indicates a problem with the validation step as described in details.

**2. Overall Assessment**

The lead and arsenic data are acceptable for use based on the information received.

**METALS BY SW 846 METHOD 6020A (ICP-MS)**

The following table summarizes the samples for which this data validation is being conducted.

Sample	Lab ID	Matrix	Date Collected	Date Analyzed
SCOU1W05	1434502001	Waste	12/10/2014	12/11/2014

**1. Data Verification Check**

A data verification and completeness check was performed for 100% of the data in accordance with the Stage 1 verification checks outlined in EPA “Guidance for Labeling Externally Validated Laboratory Analytical Data for Superfund Use” dated January 13, 2009. The following table details this check.

**Recommended Minimum Baseline Checks Used in the Stages of Laboratory Analytical Data Verification and Validation**

<b>Matrix:</b>	Waste	
<b>Method:</b>	6020A Metals by ICP-MS	
<b>Check* (Y/N)</b>	<b>Stage 1</b>	<b>Details</b>
Y	Laboratory receiving and conducting analyses is identified	
Y	Proper documentation for all samples submitted by the project/requestor	
Y	Requested analytical methods were performed	
Y	Analysis dates are present	
Y	Requested target analyte results are reported	
Y	Original laboratory data qualifiers and data qualifier definitions for each reported result (and uncertainty / type of uncertainty, if required) are included	
Y	Requested target analyte result units are reported (and uncertainty units if required)	
Y	Requested reporting limits for all samples are present	
Y	Results at and below the requested/required reporting limits are clearly identified (including sample detection limits if required)	
Y	Sampling dates (and times if needed) are documented	
Y	Date and time of laboratory receipt of samples is documented	
Y	Sample conditions upon receipt at the laboratory (including preservation, pH and temperature) are documented	Sample conditions are noted as acceptable. Details are not given.

	<b>RADIOCHEMICAL ANALYSIS ONLY:</b>	
N/A	Sample specific critical values (critical level / decision level / detection threshold) are reported	
N/A	Sample specific minimum detectable value, activity or concentration for all samples are reported	
N/A	Results at and below the requested/required critical values are clearly identified	
N/A	Chemical yield (if applicable to method) is reported for all samples	
N/A	Reference date and time (especially for short lived isotopes) is reported for all samples	

Notes:

\*A "Y" in the check column indicates completeness of the validation step.

\*An "N" in the check column indicates a problem with the validation step as described in details.

## **2. Overall Assessment**

The metals data are acceptable for use based on the information received.

**MERCURY IN LIQUID WASTE BY SW 846 METHOD 7470A (COLD VAPOR ATOMIC ABSORPTION)**

The following table summarizes the samples for which this data validation is being conducted.

Sample	Lab ID	Matrix	Date Collected	Date Analyzed
SCOU1W05	1434502001	Waste	12/10/2014	12/12/2014
SCOU1W06	1434502002	Solid	12/10/2014	12/12/2014
SCOU1W07	1434502003	Solid	12/10/2014	12/12/2014
SCOU1W08	1434902001	Solid	12/12/2014	12/17/2014

**1. Data Verification Check**

A data verification and completeness check was performed for 100% of the data in accordance with the Stage 1 verification checks outlined in EPA “Guidance for Labeling Externally Validated Laboratory Analytical Data for Superfund Use” dated January 13, 2009. The following table details this check.

**Recommended Minimum Baseline Checks Used in the Stages of Laboratory Analytical Data Verification and Validation**

<b>Matrix:</b>	Solid or Waste	
<b>Method:</b>	7470a Mercury by Cold Vapor Atomic Absorption	
<b>Check* (Y/N)</b>	<b>Stage 1</b>	<b>Details</b>
Y	Laboratory receiving and conducting analyses is identified	
Y	Proper documentation for all samples submitted by the project/requestor	
Y	Requested analytical methods were performed	
Y	Analysis dates are present	
Y	Requested target analyte results are reported	
Y	Original laboratory data qualifiers and data qualifier definitions for each reported result (and uncertainty / type of uncertainty, if required) are included	
Y	Requested target analyte result units are reported (and uncertainty units if required)	
Y	Requested reporting limits for all samples are present	
Y	Results at and below the requested/required reporting limits are clearly identified (including sample detection limits if required)	
Y	Sampling dates (and times if needed) are documented	

Y	Date and time of laboratory receipt of samples is documented	
Y	Sample conditions upon receipt at the laboratory (including preservation, pH and temperature) are documented	Sample conditions are noted as acceptable. Details are not given.
<b>RADIOCHEMICAL ANALYSIS ONLY:</b>		
N/A	Sample specific critical values (critical level / decision level / detection threshold) are reported	
N/A	Sample specific minimum detectable value, activity or concentration for all samples are reported	
N/A	Results at and below the requested/required critical values are clearly identified	
N/A	Chemical yield (if applicable to method) is reported for all samples	
N/A	Reference date and time (especially for short lived isotopes) is reported for all samples	

Notes:

\*A "Y" in the check column indicates completeness of the validation step.

\*An "N" in the check column indicates a problem with the validation step as described in details.

**2. Overall Assessment**

Mercury data are acceptable for use based on the information received.

**TRACE ELEMENTS BY SW 846 METHOD 6010C (ICP-AES)**

The following table summarizes the samples for which this data validation is being conducted.

Sample	Lab ID	Matrix	Date Collected	Date Analyzed
SCOU1W05	1434502001	Waste	12/10/2014	12/12/2014
SCOU1W06	1434502002	Solid	12/10/2014	12/12/2014
SCOU1W07	1434502003	Solid	12/10/2014	12/12/2014
SCOU1W08	1434902001	Solid	12/12/2014	12/16/2014

**1. Data Verification Check**

A data verification and completeness check was performed for 100% of the data in accordance with the Stage 1 verification checks outlined in EPA “Guidance for Labeling Externally Validated Laboratory Analytical Data for Superfund Use” dated January 13, 2009. The following table details this check.

**Recommended Minimum Baseline Checks Used in the Stages of Laboratory Analytical Data Verification and Validation**

<b>Matrix:</b>	Solid or Waste	
<b>Method:</b>	6010C Trace Elements by ICP-AES	
<b>Check* (Y/N)</b>	<b>Stage 1</b>	<b>Details</b>
Y	Laboratory receiving and conducting analyses is identified	
Y	Proper documentation for all samples submitted by the project/requestor	
Y	Requested analytical methods were performed	
Y	Analysis dates are present	
Y	Requested target analyte results are reported	
Y	Original laboratory data qualifiers and data qualifier definitions for each reported result (and uncertainty / type of uncertainty, if required) are included	
Y	Requested target analyte result units are reported (and uncertainty units if required)	
Y	Requested reporting limits for all samples are present	
Y	Results at and below the requested/required reporting limits are clearly identified (including sample detection limits if required)	
Y	Sampling dates (and times if needed) are documented	
Y	Date and time of laboratory receipt of samples is documented	

Y	Sample conditions upon receipt at the laboratory (including preservation, pH and temperature) are documented	Sample conditions are noted as acceptable. Details are not given.
<b>RADIOCHEMICAL ANALYSIS ONLY:</b>		
N/A	Sample specific critical values (critical level / decision level / detection threshold) are reported	
N/A	Sample specific minimum detectable value, activity or concentration for all samples are reported	
N/A	Results at and below the requested/required critical values are clearly identified	
N/A	Chemical yield (if applicable to method) is reported for all samples	
N/A	Reference date and time (especially for short lived isotopes) is reported for all samples	

Notes:

\*A "Y" in the check column indicates completeness of the validation step.

\*An "N" in the check column indicates a problem with the validation step as described in details.

**2. Overall Assessment**

Data for trace metals are acceptable for use based on the information received.

# **Attachment G**

**(Electronic Backup Files Only)**

## **Attachment H**



*Rite in the Rain*

ALL-WEATHER

**JOURNAL**

Nº 391

STONE CASTLE

RECYCLING

12/2/14 STONE CASTLE (OU1) RV  
 0730 START BRYN-ARBY ON SITE -  
 OSC MERRITT & EPLS ALSO ON SITE -  
 BEGIN UNLOADING EQUIPMENT - EPLS  
 HAS WAREHOUSE BUILDING OPEN - POWER  
 EXPECTED TO BE HOOKED UP TODAY  
 0750 START UNLOADS EQUIPMENT &  
 SUPPLIES INTO MIDDLE ROOM & STORAGE  
 ROOM - JB

0815 OSC MERRITT REVIEWS THE SITE HISTORY  
 0825 SITE SAFETY MEETING WITH EPLS,  
 OSC & START - EPLS WILL BEGIN  
 WORK IN LEVEL C UNTIL AIR SAMPLING  
 RESULTS INDICATE OTHERWISE JB LEVEL  
 D PRE IS APPROPRIATE - OUT BUILDING  
 HAS RESIDENT WHO WORKS IN IT PART  
 TIME - OSC WILL REQUEST THAT HE  
 MOVE SOME SNOWMOBILES/VEHICLES -  
 EPLS EXPECT GRINDER DELIVERED ON  
 THURSDAY & FOU-OFF BOXES BE DELIVERED  
 NEXT WEEK - EPLS PLAN TO NAT LINE  
 FOU-OFFS & THEN DEAN AT END OF  
 SITE WORK - EPLS WILL GET LOCKS  
 TO DO LOCK-OUT/TAG-OUT IF GRINDER  
 GETS JAMMED - MEDIA EXPECTED  
 ON SITE ON THURSDAY FOR OSC INTERVIEW

STONE CASTLE (OU1) RV 12/2/14  
 EPLS WILL WORK TO LOCATE SEPTIC CLEAN-  
 OUT TODAY - JB  
 1000 EPLS GET POWER TURNED ON IN  
 THE BUILDING & FRONT-LOADER & EXCAVATOR  
 DELIVERED TO THE SITE - JB  
 1100 START BEGINS AIR MONITORING WITH  
 DATA RAMS - DR 495 AT LOCATION  
 NEAR BUILDING (ON TRIP) & DR 601  
 AT LOCATION ON UTILITY POLE ON WEST  
 EDGE OF THE SITE - JB  
 1130 START OFF SITE (LUNCH) - JB  
 1200 START ON SITE - EPLS WORK TO  
 SEPARATE WOOD PAWETS & CARD BOARD FROM  
 BURNED DEBRIS - JB  
 1400 START CONDUCTS SITE WALK & TAKES  
 PHOTOS OF EPLS PROGRESS - EPLS ALSO  
 5 TB USE A WATER HOSE FOR DUST SUPPRESSION  
 SUPPRESSION - JB  
 1630 WIND SHIFTS (TOWARDS NE) SO START  
 MOVES DR 601 TO NE CORNER OF THE  
 SITE - JB  
 1650 RAIN BEGINS TO FALL SO START  
 CONCLUDES AIR MONITORING FOR THE DAY  
 & SAVES DATA FILES FROM DATA RAMS  
 TO LAP TOP - JB

12/2/14 STONE CASTLE RV

1700 START PLACES AN EQUIPMENT ON  
 CHARGE - OSC REQUESTS START RUN DATA  
 RANTS WITH VIPER TOMORROW — JB  
 1730 START OFF SITE

STONE CASTLE RV 12/3/14

0720 START BRYNIAWSKI ON SITE -  
 WATCHTEL TODAY: 35°/50° F CLOUDY.  
 0730 ERS SAFETY MEETING - ERLS  
 WHILE CONTINUE TO GET SUPPLIES &  
 SORT THROUGH WASTE TODAY — JB  
 0745 START ZEROS DATA RAMS (3) & BEGINS  
 TO SET-UP VIPER RUN & HOST LAPTOP  
 0850 START HAS UNITS RUNNING BUT  
 FINDS LINK 233 HAS LOW SIGNAL STRENGTH  
 SO SWITCHES UNIT LOCATIONS — JB  
 0915 START HAS THE VIPER NETWORK  
 FULLY OPERATIONAL & RECEIVES A  
 CONFIRMATION EMAIL FROM ERT  
 (NEW JERSEY) THAT THEY ARE RECEIVING  
 THE DATA ON THEIR SERVERS —  
 LINK ID DATA RAM # LOCATION  
 229 DR 661 — NW SITE CENTER  
 230 DR 495 — WEST UTILITY PANE  
 233 DR 662 — NW BUILDING CORNER  
 1100 START CONDUCTS SITE WALK - ERS  
 CONTINUE CONTINUE WASTE SEGREGATION  
 - ALL 3 DATA RAM UNITS RUNNING — JB  
 START TAKES PAPERDS — JB  
 1400 GETS START OFF SITE (FUEL) — JB  
 1420 START ON SITE - ERS CONTINUE

*Return to Room*

12/3/14 STONE CASTLE RN

SORTING WOOD PALLETS & CARDBOARD FROM  
E-WASTE DEBRIS — JB

1500 START CONDUCTS SITE WALK — ALL  
DATA RAMS CONTINUE TO FUNCTION

1610 ERPS BEGIN DELIVERY OF THE  
HORIZONTAL CRUSHER/SHEEDER & PARK  
IT NEAR THE NORTH SITE PERIMETER

1700 ERPS BEGIN DAILY SITE SHUT-DOWN TASKS &  
START SUSPENDS AIR MONITORING FOR THE  
DAY — JB

1730 START OFF SITE

17  
STONE CASTLE RN 12/4/14

0725 START BRYN-ARSKI ON SITE — WEATHER  
TODAY: 37°/50° F CLOUDY WIND 0-5 N/NW

0730 ERPS SAFETY MEETING — TODAY  
CONTINUE WASTE SORTING & BEGIN

SIZE REDUCTION/GRINDING OF WASTE  
— HEARING PROTECTION REQUIRED

WHEN WORKING NEAR GRINDER

0745 START PREPS DATA RAMS & VIPEL FOR  
DAILY SITE PARTICULATE MONITORING —

ALSO OSC MERRITT REQUESTS THAT

START MAKE 2 EDITS TO THE SITE

VIEWER — START BRYNARSKI EMAIL START  
LUCOTCH THE REQUEST — JB

0815 START HAS VIPEL NETWORK RUNNING:

LINK ID DATA-RAM LOCATION

229 DR 601 — NW SITE CORNER

230 DR 495 — WEST UTILITY POLE

233 DR 602 — NW BUILDING CORNER

0820 START PREPS NOISE METER FOR USE

DURING CRUSHING WORK TO MEASURE THE  
SOUND/NOISE LEVELS ON SITE

0915 ERPS REPOSITION GRINDER TO

POINT INPUT END TOWARDS FIELD

0930 ERPS BEGINS SIZE REDUCING IN THE  
WOODEN PALLETS & CARDBOARD — START

*Return on Rain*

2/1/14 STONE CASTLE RN

TAKES PHOTOS & MEASURES NOISE WITH SOUND METER: 85 DBA AT END OF NORTH WING OF GARAGE BUILDING - START PAGES P.M. FILES - ANYONE PASST THIS POINT NEEDS TO WEAR HEARING PROTECTION - JB  
 1000 Local NEWS CAMERA MAN ON SITE TO INTERVIEW OSC MERRITT  
 1100 START CONDUCTS SITE WALK - ELLS CONTINUE CRUSHING E-WASTE/DEBRIS - START TAKES PHOTOS & DOES ADDITIONAL NOISE MONITORING AT THE SITE PARAMETERS - JB  
 1200 CAMERAMAN DEPARTS THE SITE & ELLS BREAK FOR LUNCH - JB  
 1230 OSC MERRITT & START DISCUSS THE APPROACH TO MIXING THE WASTE & TREATMENT PRODUCTS - JB  
 1340 DISCUSS MIXING APPROACH WITH OSC, ELLS RM & START - OSC REQUESTS THAT START PURCHASE A SMALL SCALE TO FIGURE THE WEIGHT/VOLUME OF THE TREATMENT PRODUCTS & WASTE - JB  
 1345 START OFF SITE (SUPPLIES) - JB  
 1430 START ON SITE - ELLS CONTINUE

STONE CASTLE RN 12/1/14

TO CRUSH/SHRED E-WASTE DEBRIS & START MEASURES THE WEIGHT/VOLUME OF THE MIXTURE COMPONENTS:  
 WASTE (3-4" SCREEN SIZE) IS 4.5 LBS/GAL  
 PHOSPHATE FERTILIZER IS 8.0 LBS/GAL  
 PORTLAND CEMENT IS 10.5 LBS/GAL  
 EX. BUCKET IS 1 YD<sup>3</sup> VOLUME &  
 FRONT-END LOADER IS 3 YD<sup>3</sup> VOLUME  
 1600 START CONDUCTS SITE WALK - ELLS CONTINUE TO GRIND E-WASTE DEBRIS - START TAKES PHOTOS OF SITE PROGRESS  
 1700 START SUSPENDS THE AIR MONITORING FOR THE DAY & PAGES THE EQUIPMENT ON CHARGE - JB  
 1730 AN RESSAMBLE OFF SITE

2/1/14

12/5/14 Stone Castle RN

0720 Start Bryniarski at the site -  
 weather today: 28°/47° F partly cloudy  
 0730 ERS safety meeting - ERS will  
 continue grinding e-waste debris  
 - hearing protection mandatory when  
 working near the grinder - JB  
 0745 Start deploys Viper network data  
 rams in the following configuration  
 LINE ID DATA RAM LOCATION  
 229 DA 061 NE SITE CORNER  
 230 JR 495 West Utility Pole  
 233 DR 662 NW BUILDING CORNER  
 OSC MERRITT REQUESTS THAT ERS  
 REGRIND A SMALL AMOUNT OF WASTE WITH  
 NO GRL OF FERTILIZER - ERS START.  
 UP AND THE GRINDER BUT NOTICE ISSUES  
 WITH THE UNIT - ERS SHUT-DOWN THE  
 GRINDER TO INVESTIGATE THE PROBLEM  
 0830 ERS DETERMINE THAT PART OF THE  
 GRINDER SCREEN (BOTTOM) IS DAMAGED  
 1100 REM JB ERS REMOVE BOTH GRINDER  
 SCREENS - START TAKES PHOTOS - JB  
 1130 START OFF SITE (LUNCH) - JB  
 1215 START ON SITE - ERS WILL TRY  
 TO SWITCH THE POSITION OF THE SCREENS

STONE CASTLE RN 12/5/14

SO THAT THE DAMAGED PART IS AT  
 THE TOP AWAY FROM THE DRUM IMPACT  
 1400 ERS HAS THE SCREENS REPOSITIONED  
 & BEGINS TESTING THE GRINDER - JB  
 1430 ERS RESUMES GRINDING E-WASTE  
 DEBRIS - JB  
 BACKNOTE HAS OSC MERRITT REQUESTS THAT  
 START SHIP A HAZ CLASS KIT FROM EPA  
 WAREHOUSE TO SITE TO HAZ CLASS THE  
 3 DRUMS FOUND BEHIND THE TOWNHOMES  
 - START BRYNIARSKI PLACES JB BONES START  
 ROBINSON TO REPLY ORDER - JB  
 1600 ERS SUSPEND GRINDING OF E-WASTE  
 DEBRIS DUE TO ISSUE WITH UNIT - SCREEN  
 HAS BROKEN (2ND SCREEN) - ERS  
 REMOVE SCREEN - START TAKES PHOTOS  
 17 JB 1645 START SUSPENDS AIR MONITORING  
 FOR THE DAY PLACES THE UNITS ON CHARGE  
 1700 START, OSC & ERS DISCUSS THE  
 PROJECT SCHEDULE - JB  
 1720 START OFF SITE

Jeff JB 12/5/14

12/16/14 STONE CASTLE RV

0720 START BRN.MARKS AT THE SITE -  
 WEATHER TODAY 25°/53°F PARTLY CLOUDY  
 0730 ERS SAFETY MEETING - TODAY ERS  
 WILL COMB THEN THE STAGING AREA  
 TO REMOVE ANY REMAINING PIECES OF GUMBS  
 - ALSO THE PUG-MILL WILL BE DELIVERED  
 TODAY - JB

0745 START DEPLOYS THE VIPER NETWORK  
 WITH THE DATA RAMS - SEE BELOW:

LINK ID	DATA RAM	LOCATION
229	DR 601	NE SITE CORNER
230	DR 495	WEST UTILITY POLE
233	DR 602	NW BUILDING CORNER

0800 ERS BEGIN SCRAPING 3-6"  
 AREA WHERE E-WASTE WAS STORED - JB  
 0930 ERS RECEIVE DELIVERY OF PUG-MILL  
 & PLACE IT ON THE NORTHEAST CORNER  
 OF THE SITE - TECA WILL BE ON SITE  
 MONDAY TO COMPLETE THE SET-UP  
 1000 START CONDUCTS SITE WALK - ERS  
 PICK THROUGH SOIL TO REMOVE ANY  
 LARGE PIECES OF GUMBS - JB

1200 SIMS SUSPENDS AIR MONITORING  
 FOR THE DAY & DEPARTS SITE

*[Signature]* 12/16/14

STONE CASTLE RV 12/18/14

15:00 START BRN.MARKS ON SITE -  
 ERS ON SITE - CONTINUE TO PICK -  
 THROUGH THE E-WASTE DEBRIS TO REMOVE  
 ANY LARGE MOTORS OR ALTERNATORS THAT  
 WOULD BE AN ISSUE FOR THE GRINDER  
 15:15 SITE WALK WITH ERS, COAST GUARD  
 & OSC WAY - JB  
 16:30 START OFF SITE

*[Signature]* 12/18/14

12/14 STONE CASTLE RV

0720 START BREAKFAST ON SITE —  
 WEATHER TODAY: 37°/56°F MOSTLY SUNNY  
 0730 ERPS SAFETY MEETING: CONTINUE  
 TO GRIND E. WASTE DEBRIS — TECH ON SITE  
 TO REPLACE BROKEN SCREENS — START TO  
 COLLECT AIR SAMPLES TODAY (INSIDE THE  
 DATA RAMS — ERPS WILL ALSO COLLECT  
 AIR SAMPLES ON THEIR WORKERS INSIDE  
 THE HOT ZONE ————— JB

0745 START SETS THE AIR MAINTENANCE/  
 SAMPLING OUT — SEE TABLE BELOW

LINK ID DATA RAM SAMPLE ID LOCATION  
 230 DR495 SCOUT A03 WEST UTILITY  
 229 DR601 SCOUT A02 NE GENER  
 233 DR662 SCOUT A01 NW BUILDING

ALL UNITS SET AT 24/MIN FLOW ————— JB  
 0815 ERPS HAS TECH INSTALLING NEW SCREENS  
 IN GRINDER & ALSO SETTING UP THE  
 PUG-MILL ————— JB

1000 START OSC WAY & ERPS RM HAUTMAN  
 MEET TO DISCUSS THE LOGISTICS OF THE  
 MIXING/TREATMENT AGENT ADDITIONS  
 1100 START & ERPS MEASURE OUT A  
 INITIAL BATCH OF E. WASTE DEBRIS  
 FOR FERTILIZER TREATMENT —

STONE CASTLE RV 12/14/14

START MEASURES 67-80 YDS SO FOR  
 3% (BY WEIGHT) MIX, ERPS NEED  
 1,400 — 2,000 LBS. OF FERTILIZER —  
 ERPS ADD 1 SUPERSACK (~2,000 LBS)  
 - START TAKES PHOTOS — ERPS MIXES  
 THE PILE WITH THE EXCAVATOR

1200 START OFF SITE (LUNCH) ————— JB

1230 START ON SITE — ERPS PREP TO  
 GRIND BATCH OF WASTE ————— JB

1300 START DISCUSSES WITH ERPS  
 THE PROCESS FOR FERTILIZER ADDITION

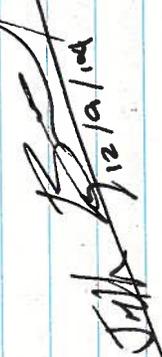
FOR REMAINING PILE (3-4" SEASON GRIND)  
 - ERPS WILL LAY OUT ~ 3-4 BY<sup>3</sup> WITH  
 FRONT-LOADER & HAND ROCK OUT ANY  
 LARGE METAL PIECES & THEN ADD  
 8-9 GAL OF FERTILIZER (~3% MIX)  
 & THEN PUSH TOWARDS THE EXCAVATOR  
 FOR FINAL GRIND — START TAKES  
 PHOTOS ————— JB

1400 ERPS BEGIN 2ND GRIND OF WASTE  
 - START TAKES PHOTOS & VIDEOS  
 (PER REQUEST OF OSC WAY) ————— JB

1430 ERPS CONTINUE GRINDING WASTE &  
 BRING A GRIZZLER/GRAVEL/SCREEN ON  
 SITE TO REMOVE LARGER METAL PIECES

12/19/14 STONE CASTLE RN

START TAKES RATIOS - ALSO ERRS  
 PUSH 2ND GRIND MATERIAL TOWARD  
 THE PUG-MIN - ERRS WILL BEGIN  
 PROCESSING WITH THE PUG-MIN TOMORROW  
 - ERRS WILL GET A SKY-JACK TO LIFT  
 BAGS/SUPER SACKS OF CEMENT INTO  
 THE PUG-MIN SILO - ALSO THE UNIT  
 HAS AN 800 GAL WATER TANK FOR  
 WATER ADDITION TO THE MIX - START  
 WITH WORK WITH ERRS & THE PUG-  
 MIN TECH TO GET THE FINAL MIX  
 TO ~10% MOISTURE \_\_\_\_\_ JB  
 1530 ERRS CONTINUE TO GRIND (2ND RUN) &  
 WASTE DEBRIS & MIX FERTILIZER AND WASTE  
 1600 ERRS RECEIVE SKY-JACK & TEST THE  
 BOOM TO MAKE SURE IT WILL REACT THE  
 SILO HATCH ~40 FT HIGH \_\_\_\_\_ JB  
 1650 ERRS SUSPENDS GRINDING WORK FOR THE  
 DAY & START SUSPENDS AIR MONITORING  
 1725 START OFF SITE


 12/19/14

STONE CASTLE

12/10/14

0715 START BRNYIARSKI ON SITE - WEATHER  
 TODAY: 23°/54° F, wind 0-6 mph out of  
 SOUTH/SW CLEAR \_\_\_\_\_ JB  
 0730 ERRS SAFETY MEETING - CONTINUE  
 GRINDING OPERATIONS TODAY - BEGIN  
 GRINDING 1 SHORT AIR HOEN BLAST (3  
 AIR HOEN BLASTS - EMERGENCY & DEPART AREA) \_\_\_\_\_ JB  
 - BEGIN PUG-MIN MIXING TODAY \_\_\_\_\_ JB  
 0740 START BEGINS TO SET-UP THE ACH  
 MONITORING FOR THE DAY \_\_\_\_\_ JB  
 - BERNARTE OSC WAY REQUESTS THAT SOFT  
 CALCULATE THE WASTE NEEDED TO BE  
 TREATED (TO USE UP REMAINING PHOSPHATE  
 ON SITE) & ALSO TOTAL WASTE FOR  
 CEMENT VOLUME/WEIGHT NEEDED FOR TREATMENT  
 (DO NOT WANT TO BE WANT TO OVERFILL THE  
 SILO OF THE PUG-MILL) \_\_\_\_\_ JB  
 0810 START ESTIMATES REMAINING WASTE  
 VOLUME & TOTAL WASTE VOLUME \_\_\_\_\_ JB  
 0900 OSC WAY & ERRS RM HARDMAN MEET  
 WITH START TO DISCUSS THE MIXING RATIOS  
 FOR THE WASTE - OSC WAY REQUESTS THAT  
 THE MIXTURE BE CHANGED TO INCLUDE 9.5%  
 PHOSPHATE/FERTILIZER & 9.5% CEMENT - ERRS  
 HAS EXTRA MATERIALS ON SITE DUE TO

*Rite in the Rain*

12/10/14 Stone Castle RV

OVER ESTIMATION OF VOLUME (WASTE)

1010 ERS WAS DRIVING THE SKY-JACK INTO THE WAREHOUSE BAY OF THE BUILDING & STRUCK THE WEST SIDE (NORTH OF SOUTH SIDE) (SOUTH FACE OF BUILDING) - START TAKING PHOTOS - NO INJURIES SOME DAMAGE TO CINDER BLOCKS & SOME VERMICULITE SPILLS - JB

1030 START INFORMS ~~ERS~~ THE LAB OF THE SAMPLE DELIVERY TODAY - JB

1045 START COLLECTS SAMPLE ID:

SCOUT WOPS FROM 3/8 3" SCREEN (1)  
GRIND E-WASTE DEBRIS (NO TREATMENT FRAGMENTS) & 3/8 SIEVE TO RUN FOR TOTAL METALS, TCLP METALS & PERCENT MOISTURE - JB

1100 START COLLECTS SAMPLE ID:

SCOUT WOPS FROM 2" SCREEN (2) GRIND E-WASTE DEBRIS WITH 3/8 (BY WEIGHT) PERCENT MAP TREATMENT (NO CEMENT) - JB

1215 START OFF SITE TO BUY ICE FOR SAMPLES - JB

1230 START ON SITE ~~FOR~~ ERS PREP TO RUN PUG-MIN & TREAT WASTE WITH CEMENT - JB

13:10 ERS & TECH HAVE PUG-MIN RUNNING TO TREAT WASTE WITH CEMENT - JB

Stone Castle RV 12/10/14

18:30 START PULS SAMPLE ID:

SCOUT WOPS FROM WASTE AFTER PROCESS WITH CEMENT (FOR TCLP METALS AND PERCENT MOISTURE) - JB

13:50 START DEPARTS SITE - JB

17:00 START AT LAB - AUS (SALT LAKE CITY, UT) - JB

21:45 START AT HOTEL (CEDAR CITY, UT)

*[Signature]*  
12/10/14

12/11/14 STONE CASTLE RN

0715 STAFF TRAINING ON SITE —

WEATHER TODAY: 75°/60°F cloudy

0730 ERS SAFETY MEETING — ERS

WIN WORK TODAY & TRY & GET ALL

WASTE SHREDDED DOWN TO 2" SCREEN

SIZE & ALSO TREAT SOME OF THE

WASTE WITH CEMENT — ERS ONLY

WANT THE SKID-STEER TO BRING

MATERIAL IN/OUT OF THE WAREHOUSE

AREA (INCIDENT YESTERDAY WITH

SKY JACK) — JB

07:45 STAFF DEPLOYS AIR MONITORING —

VIPER DATA RANS IN SAME FORMATION

AS PREVIOUS — JB

0830 CAPT GUARD JT WINSTON (YESTERDAY) CREATED

AN EXCEL FILE TO TRACK/CALCULATE SITE

TREATMENT AGENT — STAFF REVIEWS — STAFF

& CG WINSTON CHECK WEIGHT/VOLUME OF

3-4" SCREEN GRID PILE ⇒ 7.5 lbs/gal

0930 STAFF CONDUCTS SITE WALK — ERS

CONTINUE TO CONTINUE WORK GRINDING THE

REMAINING WASTE WITH 3-4" SCREEN

1015 STAFF WORKS ON RN TDD REMS

COST TRACKING — JB

1120 STAFF SENDS RCMS COST TRACKING TO

STONE CASTLE RN 12/11/14

OSC MELLITT FOR THE RN TDD — JB

1120 STAFF CONDUCTS SITE WALK — ERS

WORK TO PREP/MOVE MATERIAL/TREAT

MATERIAL WITH PHOSPHATE PRIOR TO

2ND GRINDING WITH 2" SCREEN — JB

1145 OSC WALK, CG, STAFF & ERS RM

DISCUSS SITE TABLES FOR THE NEXT

2 DAYS — RAIN/SNOW EXPECTED ON

SATURDAY — JB

1300 OSC WALK REQUESTS THAT STAFF

REVIEW THE 2" GRIND WASTE &

GET WEIGHT RATIOS — JB

1330 STAFF TAKES 5-gal OF 2" GRIND

WASTE & SIEVES THRU 3/8" SIEVE:

TOTAL: 35 LBS PASS: 2.5 LBS FAIL: 10 LBS

0% PASS: 71.43% FAIL: 28.57%

1400 STAFF EMAILS OSC MELLITT THE #S

1500 STAFF PULLS ALL HHW FROM CABINETS

IN WAREHOUSE/BAY & SORTS BY WASTE

STREAM — AN REGULAR WASTE/HHW

1500 STAFF CHECKS DRUMS BEHIND THE

BUILDING — ALL OK JB BUT 2 ARE EMPTY

DRO1 CONTAINS ONLY ANTI-FREEZE & WATER

DRO2 CONTAINS ONLY OIL — STAFF

WIN CHECK THE FLASH POINT TOMORROW

*Return on Rain*

12/11/14 STONE CASTLE RN

1010 START CONDUCTS A SITE WALK -  
 ELLS COMPLETE GRINDING MIX & -  
 WASTE DEBRIS & NOW BEGAN A SOIL  
 SCRAPE OF THE WASTE STAGING AREA  
 & RUN SOIL/WASTE MIX THRU THE GRINDER  
 1045 START SUSPENDS AIR MONITORING  
 FOR THE DAY & PLACES UNITS ON CHARGE  
 1720 START OFF SITE

~~12/11/14~~

STONE CASTLE RN 12/12/14

0700 START BREAKDOWN ON SITE - WEATHER  
 TODAY: 45°/60°F, WINDS: 16-28 MPH  
 OUT OF THE SOUTH - JB

0730 ELLS SAFETY MEETING TODAY:

ELLS WILL DECON THE GRINDER, SCRAPE  
 SOME SOIL AROUND FOOTPRINT OF GRINDER  
 & TREAT THE REMAINING WASTE THRU  
 THE PUG-MIX WITH CEMENT - JB

0745 OSC WAY REQUESTS THAT THE SITE  
 AIR MONITORING BE DISCONTINUED TODAY

0800 START PREPS TO FIELD SCREEN THE  
 SITE SOIL WITH THE NITON - JB

0900 START FIELD SCREENS 24 PANTS  
 - HIGHEST VALUE 476 PPM - ELLS WALK

TO DECON THE GRINDER & SCRAPE SOIL

1000 START INFORMS OSC WAY & ELLS RM

HARTMAN OF THE NITON SOIL SCREENING VALUES  
 1130 START OFF SITE (HOME DEPT - SUPPLIES)

1230 START ON SITE - ELLS BEG TO TREAT  
 REMAINING WASTE WITH PUG-MIX CEMENT VIA THE  
 PUG-MIX - JB

1300 START CONDUCTS SITE WALK - ELLS

TREAT WASTE - START TAKES PICTURES

1350 START CONDUCTS SAMPLE ID:

SCOUT WQOB FOR TELP METALS & % MOISTURE

*Rain in PM*

12/12/14 Stone Castle RV

1600 STAFF EMAILS LAB (AUS SLC) TO GET RESULTS FROM PREVIOUS WASTE SAMPLING

1630 STAFF PICKS UP AN EQUIPMENT

1700 STAFF DEPARTS THE SITE

1830 STAFF RECEIVES LAB RESULTS & FORWARDS THEM TO OSC MERRITT & RM HARTMAN

1900 STAFF PLANS TO DEMOBE FROM AREA TOMORROW & DELIVER FINAL SAMPLE TO ALC SLC @ 09:00

~~12/12/14~~  
~~SLC~~

773

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number: N/A  
2. Page 1 of 1  
3. Emergency Response Phone: 888-814-7477  
4. Waste Tracking Number: 868-01

5. Generator's Name and Mailing Address: USEPA REGION 8, 1595 WYNKOOP ST, DENVER, CO 80202  
Generator's Site Address (if different than mailing address): USEPA REGION 8, 1338 WEST 200 SOUTH, PAROWAN, UT 84761  
Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name: MP ENVIRONMENTAL SERVICES, INC.  
U.S. EPA ID Number: CAT000624247

7. Transporter 2 Company Name: \_\_\_\_\_  
U.S. EPA ID Number: \_\_\_\_\_

8. Designated Facility Name and Site Address: ECDC ENVIRONMENTAL, 1111 WEST HIGHWAY 123, PO BOX 69, EAST CARBON, UT 84520  
Facility's Phone: (800) 444-4521  
U.S. EPA ID Number: N/A

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
	No.	Type			
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS	001	CM	21	CY	
2.					
3.					
4.					

13. Special Handling Instructions and Additional Information: APPROVAL# 40411421139  
SC8-88, STONE CASTLE RECYCLING Bm # 4774

14. 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.

Generator's/Offeror's Printed/Typed Name: STEVEN B. MERRITT, U.S. EPA  
Signature: [Signature]  
Month: 12, Day: 15, Year: 14

15. International Shipments:  Import to U.S.  Export from U.S.  
Port of entry/exit: \_\_\_\_\_  
Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: Maverick Lattimore  
Signature: [Signature]  
Month: 12, Day: 15, Year: 14  
Transporter 2 Printed/Typed Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Month: \_\_\_\_\_, Day: \_\_\_\_\_, Year: \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space:  Quantity  Type  Residue  Partial Rejection  Full Rejection  
Manifest Reference Number: \_\_\_\_\_

17b. Alternate Facility (or Generator)  
Facility's Phone: \_\_\_\_\_  
U.S. EPA ID Number: \_\_\_\_\_

17c. Signature of Alternate Facility (or Generator)  
Month: \_\_\_\_\_, Day: \_\_\_\_\_, Year: \_\_\_\_\_

18. Designated Facility Owner or Operator Certification of receipt of materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: [Signature]  
Signature: [Signature]  
Month: 12, Day: 16, Year: 14

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

709

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
N/A

2. Page 1 of 1

3. Emergency Response Phone  
888-814-7477

4. Waste Tracking Number  
868-02

5. Generator's Name and Mailing Address  
USEPA REGION 8  
1595 WYNKOOP ST  
DENVER, CO 80202

Generator's Site Address (if different than mailing address)  
USEPA REGION 8  
1338 WEST 200 SOUTH  
PAROWAN, UT 84761

Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name  
MP ENVIRONMENTAL SERVICES, INC.

U.S. EPA ID Number  
CAT000624247

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

ECDC ENVIRONMENTAL  
1111 WEST HIGHWAY 123, PO BOX 69  
EAST CARBON, UT 84520

U.S. EPA ID Number

N/A

Facility's Phone: (800) 444-4521

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS

001

CM

21

yd

2.

3.

4.

13. Special Handling Instructions and Additional Information

APPROVAL# 40411421139

Bin # 5046

SC8-68, STONE CASTLE RECYCLING

14. 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.

Generator's/Offeror's Printed/Typed Name

Signature

Month Day Year  
12 15 14

STEVEN B MERRITT, U.S. EPA

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year  
12 15 14

Glen T Wright

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year  
12 16 14

770

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
N/A

2. Page 1 of 1

3. Emergency Response Phone  
888-814-7477

4. Waste Tracking Number  
868-03

5. Generator's Name and Mailing Address  
USEPA REGION 8  
1595 WYNKOOP ST  
DENVER, CO 80202

Generator's Site Address (if different than mailing address)  
USEPA REGION 8  
1338 WEST 200 SOUTH  
PAROWAN, UT 84761

Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name  
MP ENVIRONMENTAL SERVICES, INC.

U.S. EPA ID Number  
CAT000624247

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
ECDC ENVIRONMENTAL  
1111 WEST HIGHWAY 123, PO BOX 69  
EAST CARBON, UT 84520  
Facility's Phone: (800) 444-4521

U.S. EPA ID Number  
N/A

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS  
TREATED

001 CM

21 44

13. Special Handling Instructions and Additional Information

APPROVAL# 40411421139

SC8-88; STONE CASTLE RECYCLING

14. 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.

Generator's/Offeror's Printed/Typed Name  
STEVEN B. MERRITT, U.S. EPA

Signature  
Month Day Year  
12 15 14

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:  
Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
Dad Anderson

Signature  
Month Day Year  
12 16 14

Transporter 2 Printed/Typed Name

Signature  
Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

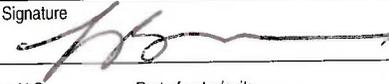
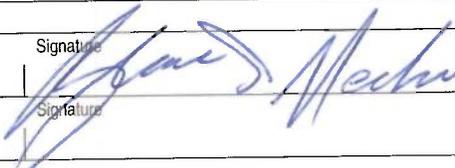
Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
A McFarland

Signature  
Month Day Year  
12 17 14

707

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-04	
5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202		Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761			
Generator's Phone: (303) 814-7477		U.S. EPA ID Number CAT000624247			
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.		U.S. EPA ID Number			
7. Transporter 2 Company Name		U.S. EPA ID Number			
8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520		U.S. EPA ID Number N/A			
Facility's Phone: (800) 444-4521					
GENERATOR	9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
		No.	Type		
	1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	CY
	2.				
	3.				
4.					
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139  SC8-68; STONE CASTLE RECYCLING					
14. 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.					
Generator's/Offeor's Printed/Typed Name STEVEN B. MELLITT, U.S. EPA		Signature 		Month Day Year 12 15 14	
15. International Shipments	<input type="checkbox"/> Import to U.S.	<input type="checkbox"/> Export from U.S.	Port of entry/exit: _____ Date leaving U.S.: _____		
16. Transporter Acknowledgment of Receipt of Materials					
Transporter 1 Printed/Typed Name Blaine Mechem		Signature 		Month Day Year 12 16 14	
Transporter 2 Printed/Typed Name		Signature		Month Day Year	
17. Discrepancy					
17a. 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: _____					
17b. Alternate Facility (or Generator)				U.S. EPA ID Number	
Facility's Phone: _____					
17c. Signature of Alternate Facility (or Generator)				Month Day Year	
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a					
Printed/Typed Name A McFarland		Signature 		Month Day Year 12 17 14	

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 688-814-7477	4. Waste Tracking Number 868-05		
5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202			Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761				
Generator's Phone: (303) 814-7477			U.S. EPA ID Number CAT000624247				
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.			U.S. EPA ID Number				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520			U.S. EPA ID Number N/A				
Facility's Phone: (800) 444-4521							
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.		
		No.	Type				
1.		NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS	TREATED	001	CM	21 CY	
2.							
3.							
4.							
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139 Bin #6300 SC8-69; STONE CASTLE RECYCLING							
14. 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.							
Generator's/Offeror's Printed/Typed Name STEVEN B. MEALITT, U.S. EPA			Signature 		Month 12	Day 18	Year 14
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
16. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Glen J. Wright			Signature 		Month 12	Day 16	Year 14
Transporter 2 Printed/Typed Name			Signature		Month	Day	Year
17. Discrepancy							
17a. 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: _____ U.S. EPA ID Number							
17b. Alternate Facility (or Generator)							
Facility's Phone: _____							
17c. Signature of Alternate Facility (or Generator)							
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a							
Printed/Typed Name Amefairland			Signature 		Month 12	Day 17	Year 14

773

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-06		
5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202			Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761				
Generator's Phone: (303) 814-7477							
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.			U.S. EPA ID Number CAT000624247				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520			U.S. EPA ID Number N/A				
Facility's Phone: (800) 444-4521							
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.		
		No.	Type				
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED		001	CM	21	CY		
2.							
3.							
4.							
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139 SCB-68; STONE CASTLE RECYCLING Bin # 4967							
14. 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.							
Generator's/Offoror's Printed/Typed Name STEVEN B. MELLIS, U.S. EPA			Signature <i>[Signature]</i>		Month 12	Day 15	Year 14
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
16. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Maverick Lattimore			Signature <i>[Signature]</i>		Month 12	Day 15	Year 14
Transporter 2 Printed/Typed Name			Signature		Month	Day	Year
17. Discrepancy							
17a. 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: _____							
17b. Alternate Facility (or Generator)					U.S. EPA ID Number		
Facility's Phone: _____							
17c. Signature of Alternate Facility (or Generator)					Month	Day	Year
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a							
Printed/Typed Name AM Farland			Signature <i>[Signature]</i>		Month 12	Day 17	Year 14

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

773

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number: N/A  
2. Page 1 of 1  
3. Emergency Response Phone: 888-814-7477  
4. Waste Tracking Number: 868-07

5. Generator's Name and Mailing Address: USEPA REGION 8, 1595 WYNKOOP ST, DENVER, CO 80202  
Generator's Site Address (if different than mailing address): USEPA REGION 8, 1338 WEST 200 SOUTH, PAROWAN, UT 84761  
Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name: MP ENVIRONMENTAL SERVICES, INC.  
U.S. EPA ID Number: CAT000624247

7. Transporter 2 Company Name: \_\_\_\_\_  
U.S. EPA ID Number: \_\_\_\_\_

8. Designated Facility Name and Site Address: EODC ENVIRONMENTAL, 1111 WEST HIGHWAY 123, PO BOX 69, EAST CARBON, UT 84520  
Facility's Phone: (800) 444-4521  
U.S. EPA ID Number: N/A

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
	No.	Type			
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	CY	
2.					
3.					
4.					

13. Special Handling Instructions and Additional Information: APPROVAL# 40411421139  
SCB-68: STONE CASTLE RECYCLING  
Bin 4904

14. 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.

Generator's/Offeor's Printed/Typed Name: STEVEN B. MERRITT, U.S. EPA  
Signature: [Signature]  
Month Day Year: 12 15 14

15. International Shipments:  Import to U.S.  Export from U.S.  
Port of entry/exit: \_\_\_\_\_  
Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: Ned Anderton  
Signature: [Signature]  
Month Day Year: 12 17 14  
Transporter 2 Printed/Typed Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Month Day Year: \_\_\_\_\_

17. Discrepancy  
17a. Discrepancy Indication Space:  Quantity  Type  Residue  Partial Rejection  Full Rejection  
Manifest Reference Number: \_\_\_\_\_

17b. Alternate Facility (or Generator): \_\_\_\_\_  
U.S. EPA ID Number: \_\_\_\_\_  
Facility's Phone: \_\_\_\_\_

17c. Signature of Alternate Facility (or Generator): \_\_\_\_\_  
Month Day Year: \_\_\_\_\_

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: Linda Smith  
Signature: [Signature]  
Month Day Year: 12 26 14

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

773

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number N/A  
2. Page 1 of 1  
3. Emergency Response Phone 888-814-7477  
4. Waste Tracking Number 868-08

5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202  
Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761  
Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC. U.S. EPA ID Number CAT000624247

7. Transporter 2 Company Name U.S. EPA ID Number

8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4521 U.S. EPA ID Number N/A

GENERATOR

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
	No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS -- TREATED	001	CM	21	CY
2.				
3.				
4.				

13. Special Handling Instructions and Additional Information APPROVAL# 40411421139 SC8-68; STONE CASTLE RECYCLING Bin #5519

14. 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.

Generator's/Offoror's Printed/Typed Name STEVEN B. MERRITT, U.S. EPA Signature [Signature] Month Day Year 12 15 14

INT'L

15. International Shipments [ ] Import to U.S. [ ] Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

TRANSPORTER

Transporter 1 Printed/Typed Name Matthew LATTIMORE Signature [Signature] Month Day Year 12 19 14  
Transporter 2 Printed/Typed Name Signature Month Day Year

DESIGNATED FACILITY

17. Discrepancy 17a. Discrepancy Indication Space [ ] Quantity [ ] Type [ ] Residue [ ] Partial Rejection [ ] Full Rejection

Manifest Reference Number: U.S. EPA ID Number

17b. Alternate Facility (or Generator) Facility's Phone: Month Day Year

17c. Signature of Alternate Facility (or Generator) Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name A McFarland Signature [Signature] Month Day Year 12 19 14

707

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number N/A	2. Page 1 of	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-09	
5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202 Generator's Phone: (303) 814-7477			Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761			
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.				U.S. EPA ID Number CAT000624247		
7. Transporter 2 Company Name				U.S. EPA ID Number		
8. Designated Facility Name and Site Address ECCO ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4521				U.S. EPA ID Number N/A		
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED		001	CM	21	CY	
2.						
3.						
4.						
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139  SC9-69; STONE CASTLE RECYCLING						
14. 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. Bin 4405						
Generator's/Offor's Printed/Typed Name STEVEN B. MERRITS, U.S. EPA				Signature 		Month Day Year 12 15 14
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
16. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Deed Andewitan				Signature 		Month Day Year 12 19 14
Transporter 2 Printed/Typed Name Blairr Mechem				Signature 		Month Day Year 12 25 14
17. Discrepancy						
17a. 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: _____						
17b. Alternate Facility (or Generator)				U.S. EPA ID Number		
Facility's Phone: _____						
17c. Signature of Alternate Facility (or Generator)				Month Day Year		
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name Linda Smith				Signature 		Month Day Year 12 26 14

GENERATOR  
TRANSPORTER  
DESIGNATED FACILITY

701

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number N/A 2. Page 1 of 1 3. Emergency Response Phone 888-814-7477 4. Waste Tracking Number 868-10

5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202 Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761

Generator's Phone: (303) 814-7477 U.S. EPA ID Number CAT000624247

6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC. U.S. EPA ID Number

7. Transporter 2 Company Name U.S. EPA ID Number

8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4621 U.S. EPA ID Number N/A

Table with 6 columns: 9. Waste Shipping Name and Description, 10. Containers (No., Type), 11. Total Quantity, 12. Unit Wt./Vol. Row 1: NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED, 001, CM, 21, CT

13. Special Handling Instructions and Additional Information APPROVAL# 40411421139 SC8-68: STONE CASTLE RECYCLING

14. 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.

Generator's/Offoror's Printed/Typed Name STEVEN B. MERRIT, U.S. EPA Signature [Signature] Month Day Year 12 15 14

15. International Shipments [ ] Import to U.S. [ ] Export from U.S. Port of entry/exit: Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Blayne J. Meckan Signature [Signature] Month Day Year 12 19 14 Transporter 2 Printed/Typed Name [Signature] Signature [Signature] Month Day Year

17. Discrepancy 17a. Discrepancy Indication Space [ ] Quantity [ ] Type [ ] Residue [ ] Partial Rejection [ ] Full Rejection Manifest Reference Number: U.S. EPA ID Number

17b. Alternate Facility (or Generator) Facility's Phone: Month Day Year

17c. Signature of Alternate Facility (or Generator) Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a Printed/Typed Name [Signature] Signature [Signature] Month Day Year 12 14

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

DESIGNATED FACILITY TO GENERATOR

770

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number: N/A  
2. Page 1 of 1  
3. Emergency Response Phone: 888-814-7477  
4. Waste Tracking Number: 868-11

5. Generator's Name and Mailing Address: USEPA REGION 8, 1595 WYNKOOP ST, DENVER, CO 80202  
Generator's Site Address (if different than mailing address): USEPA REGION 8, 1338 WEST 200 SOUTH, PAROWAN, UT 84761  
Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name: MP ENVIRONMENTAL SERVICES, INC.  
U.S. EPA ID Number: CAT000624247

7. Transporter 2 Company Name: [Blank]  
U.S. EPA ID Number: [Blank]

8. Designated Facility Name and Site Address: ECDC ENVIRONMENTAL, 1111 WEST HIGHWAY 123, PO BOX 69, EAST CARBON, UT 84520  
Facility's Phone: (800) 444-4521  
U.S. EPA ID Number: N/A

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
	No.	Type			
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	CY	
2.					
3.					
4.					

13. Special Handling Instructions and Additional Information: APPROVAL# 40411421139  
SC8-88; STONE CASTLE RECYCLING  
Ben # 6494

14. 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.  
Generator's/Offeror's Printed/Typed Name: STEVEN B. MERRITT, U.S. EPA  
Signature: [Signature]  
Month Day Year: 12 15 14

15. International Shipments:  Import to U.S.  Export from U.S.  
Port of entry/exit: [Blank]  
Date leaving U.S.: [Blank]

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: GARY HILL  
Signature: [Signature]  
Month Day Year: 12 20 14  
Transporter 2 Printed/Typed Name: [Blank]  
Signature: [Blank]  
Month Day Year: [Blank]

17. Discrepancy  
17a. Discrepancy Indication Space:  Quantity  Type  Residue  Partial Rejection  Full Rejection  
Manifest Reference Number: [Blank]

17b. Alternate Facility (or Generator): [Blank]  
U.S. EPA ID Number: [Blank]  
Facility's Phone: [Blank]

17c. Signature of Alternate Facility (or Generator): [Blank]  
Month Day Year: [Blank]

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: [Blank]  
Signature: [Signature]  
Month Day Year: 12 22 14

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

**NON-HAZARDOUS WASTE MANIFEST**

1. Generator ID Number: N/A      2. Page 1 of 1      3. Emergency Response Phone: 888-814-7477      4. Waste Tracking Number: 868-12

5. Generator's Name and Mailing Address: USEPA REGION 8, 1595 WYNKOOP ST, DENVER, CO 80202  
 Generator's Site Address (if different than mailing address): USEPA REGION 8, 1338 WEST 200 SOUTH, PAROWAN, UT 84761

Generator's Phone: (303) 814-7477      U.S. EPA ID Number: CAT000624247

6. Transporter 1 Company Name: MP ENVIRONMENTAL SERVICES, INC.      U.S. EPA ID Number: \_\_\_\_\_

7. Transporter 2 Company Name: \_\_\_\_\_      U.S. EPA ID Number: \_\_\_\_\_

8. Designated Facility Name and Site Address: EODC ENVIRONMENTAL, 1111 WEST HIGHWAY 123, PO BOX 69, EAST CARBON, UT 84520  
 Facility's Phone: (800) 444-4521      U.S. EPA ID Number: N/A

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
	No.	Type			
1. <u>NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED</u>	<u>001</u>	<u>CM</u>	<u>21</u>	<u>CT</u>	
2.					
3.					
4.					

13. Special Handling Instructions and Additional Information: APPROVAL# 40411421139  
SC8-68; STONE CASTLE RECYCLING      Bin # 6407

14. 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.

Generator's/Offlor's Printed/Typed Name: STEVEN B. MELLITO, U.S. EPA      Signature: [Signature]      Month: 12 Day: 15 Year: 14

15. International Shipments:  Import to U.S.       Export from U.S.      Port of entry/exit: \_\_\_\_\_      Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: Paul Anderson      Signature: [Signature]      Month: 12 Day: 22 Year: 14  
 Transporter 2 Printed/Typed Name: \_\_\_\_\_      Signature: \_\_\_\_\_      Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

17. Discrepancy  
 17a. Discrepancy Indication Space:  Quantity       Type       Residue       Partial Rejection       Full Rejection  
 Manifest Reference Number: \_\_\_\_\_      U.S. EPA ID Number: \_\_\_\_\_

17b. Alternate Facility (or Generator)      U.S. EPA ID Number: \_\_\_\_\_  
 Facility's Phone: \_\_\_\_\_

17c. Signature of Alternate Facility (or Generator)      Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: Linda Smith      Signature: [Signature]      Month: 12 Day: 23 Year: 14

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

770

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number: N/A  
2. Page 1 of 1  
3. Emergency Response Phone: 888-814-7477  
4. Waste Tracking Number: 868-13

5. Generator's Name and Mailing Address: USEPA REGION 8, 1595 WYNKOOP ST, DENVER, CO 80202  
Generator's Site Address (if different than mailing address): USEPA REGION 8, 1338 WEST 200 SOUTH, PAROWAN, UT 84761  
Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name: MP ENVIRONMENTAL SERVICES, INC.  
U.S. EPA ID Number: CAT000624247

7. Transporter 2 Company Name: [Blank]  
U.S. EPA ID Number: [Blank]

8. Designated Facility Name and Site Address: ECDC ENVIRONMENTAL, 1111 WEST HIGHWAY 123, PO BOX 89, EAST CARBON, UT 84520  
Facility's Phone: (800) 444-4521  
U.S. EPA ID Number: N/A

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
	No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	CY
2. [Blank]				
3. [Blank]				
4. [Blank]				

13. Special Handling Instructions and Additional Information: APPROVAL# 40411421139, SC8-88; STONE CASTLE RECYCLING, Bin # 35251

14. 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.

Generator's/Offeror's Printed/Typed Name: STEVEN B. MEARITT, U.S. EPA  
Signature: [Signature]  
Month Day Year: 12 15 14

15. International Shipments:  Import to U.S.  Export from U.S.  
Port of entry/exit: [Blank]  
Date leaving U.S.: [Blank]

16. Transporter Acknowledgment of Receipt of Materials  
Transporter 1 Printed/Typed Name: Ned Anderton  
Signature: [Signature]  
Month Day Year: 12 23 14  
Transporter 2 Printed/Typed Name: [Blank]  
Signature: [Blank]  
Month Day Year: [Blank]

17. Discrepancy  
17a. Discrepancy Indication Space:  Quantity  Type  Residue  Partial Rejection  Full Rejection

Manifest Reference Number: [Blank]  
U.S. EPA ID Number: [Blank]

17b. Alternate Facility (or Generator)  
Facility's Phone: [Blank]

17c. Signature of Alternate Facility (or Generator)  
Month Day Year: [Blank]

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a  
Printed/Typed Name: AMcFarland  
Signature: [Signature]  
Month Day Year: 12 24 14

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

707

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-14
5. Generator's Name and Mailing Address USEPA REGION 8 1695 WYNKOOP ST DENVER, CO 80202 Generator's Phone: (303) 814-7477			Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761		
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.				U.S. EPA ID Number CAT000624247	
7. Transporter 2 Company Name				U.S. EPA ID Number	
8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4521				U.S. EPA ID Number N/A	
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.
		No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED		001	CM	21	CY
2.					
3.					
4.					
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139  SC8-68; STONE CASTLE RECYCLING  Bin # 47410					
14. 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.					
Generator's/Offoror's Printed/Typed Name STEVEN B. MERLIT, U.S. EPA				Signature 	Month Day Year 12 15 14
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____					
16. Transporter Acknowledgment of Receipt of Materials					
Transporter 1 Printed/Typed Name Blaine Meckam				Signature 	Month Day Year 12 22 14
Transporter 2 Printed/Typed Name				Signature	Month Day Year
17. Discrepancy					
17a. 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: _____					
17b. Alternate Facility (or Generator)				U.S. EPA ID Number	
Facility's Phone: _____					
17c. Signature of Alternate Facility (or Generator)				Month Day Year	
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a					
Printed/Typed Name A McFarland				Signature 	Month Day Year 12 23 14

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

707

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
N/A

2. Page 1 of  
1

3. Emergency Response Phone  
888-814-7477

4. Waste Tracking Number  
868-15

5. Generator's Name and Mailing Address  
USEPA REGION 8  
1595 WYNKOOP ST  
DENVER, CO 80202

Generator's Site Address (if different than mailing address)  
USEPA REGION 8  
1338 WEST 200 SOUTH  
PAROWAN, UT 84761

Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name  
MP ENVIRONMENTAL SERVICES, INC.

U.S. EPA ID Number  
CAT000624247

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
ECDC ENVIRONMENTAL  
1111 WEST HIGHWAY 123, PO BOX 89  
EAST CARBON, UT 84520

U.S. EPA ID Number  
N/A

Facility's Phone: (800) 444-4521

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
	No.	Type			
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	CY	
2.					
3.					
4.					

13. Special Handling Instructions and Additional Information

APPROVAL# 40411421139

SC8-88: STONE CASTLE RECYCLING

Bin # 5262

14. 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.

Generator's/Offeor's Printed/Typed Name  
STEVEN B. MERRITT, U.S. EPA

Signature

Month Day Year  
12 15 14

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
Blaine Mecham

Signature

Month Day Year  
12 23 14

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
J McFarland

Signature

Month Day Year  
12 24 14

GENERATOR  
 INT'L  
 TRANSPORTER  
 DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <p style="text-align: center;">N/A</p>	2. Page 1 of <p style="text-align: center;">1</p>	3. Emergency Response Phone <p style="text-align: center;">888-814-7477</p>	4. Waste Tracking Number <p style="text-align: center;">868-16</p>
5. Generator's Name and Mailing Address USEPA REGION 8 1585 WYNKOOP ST DENVER, CO 80202		Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761		
Generator's Phone: (303) 814-7477		U.S. EPA ID Number <p style="text-align: center;">CAT000624247</p>		
6. Transporter 1 Company Name <p style="text-align: center;">MP ENVIRONMENTAL SERVICES, INC.</p>		U.S. EPA ID Number		
7. Transporter 2 Company Name		U.S. EPA ID Number		
8. Designated Facility Name and Site Address EODC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 89 EAST CARBON, UT 84520		U.S. EPA ID Number <p style="text-align: center;">N/A</p>		
Facility's Phone: (800) 444-4621				
9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
	No.	Type		
	1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS <i>TREATED</i>	001	CM	21 01
	2.			
	3.			
4.				
13. Special Handling Instructions and Additional Information <p style="text-align: center;">APPROVAL# 40411421139</p> <p style="text-align: center;">SC8-68; STONE CASTLE RECYCLING</p> <p style="text-align: right; font-size: 2em;"><i>Bin # 5956</i></p>				
14. 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.				
Generator's/Offorer's Printed/Typed Name <i>STEVEN B. MERRITT, U.S. EPA</i>		Signature 		Month Day Year <i>12 15 14</i>
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____				
16. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name <i>Mawerick Lattimore</i>		Signature <i>Mawerick Lattimore</i>		Month Day Year <i>12 22 14</i>
Transporter 2 Printed/Typed Name		Signature		Month Day Year
17. Discrepancy				
17a. 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: _____				
17b. Alternate Facility (or Generator)		U.S. EPA ID Number		
Facility's Phone:				
17c. Signature of Alternate Facility (or Generator)		Month Day Year		
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a				
Printed/Typed Name <i>Linda Smith</i>		Signature 		Month Day Year <i>12 23 14</i>

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NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
N/A

2. Page 1 of  
1

3. Emergency Response Phone  
888-814-7477

4. Waste Tracking Number  
868-17

5. Generator's Name and Mailing Address  
USEPA REGION 8  
1595 WYNKOOP ST  
DENVER, CO 80202  
Generator's Phone: (303) 814-7477

Generator's Site Address (if different than mailing address)  
USEPA REGION 8  
1338 WEST 200 SOUTH  
PAROWAN, UT 84761

6. Transporter 1 Company Name  
MP ENVIRONMENTAL SERVICES, INC.

U.S. EPA ID Number  
CAT000624247

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
ECDC ENVIRONMENTAL  
1111 WEST HIGHWAY 123, PO BOX 69  
EAST CARBON, UT 84520  
Facility's Phone: (800) 444-4521

U.S. EPA ID Number  
N/A

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
	No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	CY
2.				
3.				
4.				

13. Special Handling Instructions and Additional Information  
APPROVAL# 40411421139  
SC8-68; STONE CASTLE RECYCLING  
Bin # 5815

14. 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.

Generator's/Offoror's Printed/Typed Name: STEVEN B. MELLIN, U.S. EPA  
Signature: [Signature]  
Month Day Year: 12 15 14

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: MAURICK LATTIMORE  
Signature: MAURICK LATTIMORE  
Month Day Year: 12 23 14

Transporter 2 Printed/Typed Name: Signature: Month Day Year:

17. Discrepancy  
17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection  
Manifest Reference Number: U.S. EPA ID Number:

17b. Alternate Facility (or Generator) Facility's Phone: U.S. EPA ID Number:

17c. Signature of Alternate Facility (or Generator) Month Day Year:

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: A McFarland  
Signature: [Signature]  
Month Day Year: 12 24 14

10

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
N/A

2. Page 1 of  
1

3. Emergency Response Phone  
888-814-7477

4. Waste Tracking Number  
868-18

5. Generator's Name and Mailing Address  
USEPA REGION 8  
1595 WYNKOOP ST  
DENVER, CO 80202

Generator's Site Address (if different than mailing address)  
USEPA REGION 8  
1338 WEST 200 SOUTH  
PAROWAN, UT 84761

Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name  
MP ENVIRONMENTAL SERVICES, INC.

U.S. EPA ID Number  
CAT000624247

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

E.C.D.C. ENVIRONMENTAL  
1111 WEST HIGHWAY 123, PO BOX 69  
EAST CARBON, UT 84520

U.S. EPA ID Number  
N/A

Facility's Phone: (800) 444-4521

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit WL/Vol.

No.

Type

1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED

001

CM

21

CT

13. Special Handling Instructions and Additional Information  
APPROVAL# 40411421139

SC8-88; STONE CASTLE RECYCLING

Bin# 30197

14. 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.

Generator's/Offor's Printed/Typed Name  
STEVEN B. MERRITT, U.S. EPA

Signature

Month Day Year  
12 15 14

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
Blaine Mecham, MPE

Signature

Month Day Year  
12 28 14

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year  
12 29 14

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

707

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-19		
5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202 Generator's Phone: (303) 814-7477			Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761				
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.			U.S. EPA ID Number CAT000624247				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4521			U.S. EPA ID Number N/A				
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.		
		No.	Type				
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED		001	CM	21	CY		
2.							
3.							
4.							
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139  SC8-88; STONE CASTLE RECYCLING							
14. 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.							
Generator's/Offero's Printed/Typed Name STEVEN B. MERRITT, U.S. EPA				Signature 	Month 12	Day 15	Year 14
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
16. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Blaine Mecham				Signature 	Month 12	Day 29	Year 14
Transporter 2 Printed/Typed Name				Signature	Month	Day	Year
17. Discrepancy							
17a. 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: _____							
17b. Alternate Facility (or Generator)					U.S. EPA ID Number		
Facility's Phone: _____							
17c. Signature of Alternate Facility (or Generator)					Month	Day	Year
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a							
Printed/Typed Name Linda Smith				Signature 	Month 12	Day 30	Year 14

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

707

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-20
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5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202 Generator's Phone: (303) 814-7477	Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761
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6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.	U.S. EPA ID Number CAT000624247
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7. Transporter 2 Company Name	U.S. EPA ID Number
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8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4521	U.S. EPA ID Number N/A
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9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
	No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	CY
2.				
3.				
4.				

13. Special Handling Instructions and Additional Information  
APPROVAL# 40411421139  
SC8-68; STONE CASTLE RECYCLING  
Bin# 6412

14. 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.

Generator's/Offero's Printed/Typed Name STEVEN B. MERRITT, U.S. EPA	Signature 	Month 12	Day 15	Year 14
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15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.	Port of entry/exit: Date leaving U.S.:
--	---

16. Transporter Acknowledgment of Receipt of Materials	Signature 	Month 12	Day 30	Year 14
Transporter 1 Printed/Typed Name Blaine Mecham MPE	Signature 	Month	Day	Year
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

17. Discrepancy

17a. Discrepancy Indication Space  
 Quantity  Type  Residue  Partial Rejection  Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)	U.S. EPA ID Number
Facility's Phone:	

17c. Signature of Alternate Facility (or Generator)	Month	Day	Year
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18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a	Signature 	Month 12	Day 31	Year 14
Printed/Typed Name Linda Smith				

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NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
N/A

2. Page 1 of  
1

3. Emergency Response Phone  
888-814-7477

4. Waste Tracking Number  
868-21

5. Generator's Name and Mailing Address  
USEPA REGION 8  
1595 WYNKOOP ST  
DENVER, CO 80202

Generator's Site Address (if different than mailing address)  
USEPA REGION 8  
1338 WEST 200 SOUTH  
PAROWAN, UT 84761

Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name  
MP ENVIRONMENTAL SERVICES, INC.

U.S. EPA ID Number  
CAT000624247

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
ECDC ENVIRONMENTAL  
1111 WEST HIGHWAY 123, PO BOX 69  
EAST CARBON, UT 84520

U.S. EPA ID Number  
N/A

Facility's Phone: (800) 444-4521

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED

001 CM

21 CY

2.

3.

4.

13. Special Handling Instructions and Additional Information

APPROVAL# 40411421139

SC8-68; STONE CASTLE RECYCLING

Bill # 6023

14. 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.

Generator's/Offoror's Printed/Typed Name  
STEVEN B. MERRITT, U.S. EPA

Signature

Month Day Year  
12 15 14

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
Maverick Lattimore

Signature

Month Day Year  
12 28 14

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
Linda Smith

Signature

Month Day Year  
12 29 14

DESIGNATED FACILITY TO GENERATOR

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

773

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-22
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5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202 Generator's Phone: (303) 814-7477	Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761
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6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.	U.S. EPA ID Number CAT000624247
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7. Transporter 2 Company Name	U.S. EPA ID Number
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8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4621	U.S. EPA ID Number N/A
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9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
	No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	CY
2.				
3.				
4.				

13. Special Handling Instructions and Additional Information  
APPROVAL# 40411421139  
SC8-68; STONE CASTLE RECYCLING  
Bin# 5609

14. 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.

Generator's/Offeror's Printed/Typed Name: STEVEN B. MELLIX, U.S. EPA  
Signature: [Signature]  
Month Day Year: 12 15 14

15. International Shipments  Import to U.S.  Export from U.S. Port of entry/exit: \_\_\_\_\_ Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Maverick Lattimore  
Signature: [Signature]  
Month Day Year: 12 29 14

Transporter 2 Printed/Typed Name: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Month Day Year: \_\_\_\_\_

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

Manifest Reference Number: \_\_\_\_\_

17b. Alternate Facility (or Generator) \_\_\_\_\_ U.S. EPA ID Number \_\_\_\_\_

Facility's Phone: \_\_\_\_\_

17c. Signature of Alternate Facility (or Generator) \_\_\_\_\_ Month Day Year: \_\_\_\_\_

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name: AMcFarland  
Signature: [Signature]  
Month Day Year: 12 29 14

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<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-23
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5. Generator's Name and Mailing Address USEPA REGION 8 1696 WYNKOOP ST DENVER, CO 80202 Generator's Phone: (303) 814-7477	Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761
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6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.	U.S. EPA ID Number CAT000624247
--	------------------------------------

7. Transporter 2 Company Name	U.S. EPA ID Number
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8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 89 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4521	U.S. EPA ID Number N/A
---	---------------------------

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
	No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	cy
2.				
3.				
4.				

13. Special Handling Instructions and Additional Information APPROVAL# 40411421139  SC8-68; STONE CASTLE RECYCLING  Bin #4967
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14. 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.				
Generator's/Offeror's Printed/Typed Name STEVEN B MERRITT, U.S. EPA	Signature 	Month 12	Day 15	Year 14

15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.	Port of entry/exit: Date leaving U.S.:
--	---

16. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name Maverick Lattimore	Signature Maverick Lattimore	Month 12	Day 30	Year 14
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

17. Discrepancy					
17a. 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:					

17b. Alternate Facility (or Generator)	U.S. EPA ID Number
Facility's Phone:	

17c. Signature of Alternate Facility (or Generator)	Month	Day	Year
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18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a				
Printed/Typed Name Linda Smith	Signature 	Month 12	Day 31	Year 14

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
N/A

2. Page 1 of 1

3. Emergency Response Phone  
888-814-7477

4. Waste Tracking Number  
868-24

5. Generator's Name and Mailing Address  
USEPA REGION 8  
1595 WYNKOOP ST  
DENVER, CO 80202

Generator's Site Address (if different than mailing address)  
USEPA REGION 8  
1338 WEST 200 SOUTH  
PAROWAN, UT 84761

Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name  
MP ENVIRONMENTAL SERVICES, INC.

U.S. EPA ID Number  
CAT000624247

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
EODC ENVIRONMENTAL

1111 WEST HIGHWAY 123, PO BOX 69  
EAST CARBON, UT 84520

U.S. EPA ID Number

N/A

Facility's Phone: (800) 444-4521

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED

001

CM

21

CY

13. Special Handling Instructions and Additional Information  
APPROVAL# 40411421139

SC8-88; STONE CASTLE RECYCLING

Bin

14. 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.

Generator's/Offor's Printed/Typed Name  
STEVEN B. WEAIR, U.S. EPA

Signature

Month Day Year  
12 15 14

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:  
Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
Blaine Meckam ME UT

Signature

Month Day Year  
1 5 15

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
A. M. Farland

Signature

Month Day Year  
1 6 15

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

707

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-25		
5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202 Generator's Phone: (303) 814-7477			Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761				
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.			U.S. EPA ID Number CAT000624247				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address ECCO ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4521			U.S. EPA ID Number N/A				
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.		
		No.	Type				
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED		001	CM	21	cy		
2.							
3.							
4.							
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139 SC9-88; STONE CASTLE RECYCLING Bin 5133							
14. 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.							
Generator's/Offor's Printed/Typed Name STEVEN B. MERRIN, U.S. EPA			Signature 		Month 12	Day 15	Year 14
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
16. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Blaine D. Speckman MPE			Signature 		Month 1	Day 6	Year 15
Transporter 2 Printed/Typed Name			Signature		Month	Day	Year
17. Discrepancy							
17a. 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: _____							
17b. Alternate Facility (or Generator)			U.S. EPA ID Number				
Facility's Phone: _____							
17c. Signature of Alternate Facility (or Generator)			Signature		Month	Day	Year
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a							
Printed/Typed Name 			Signature 		Month 1	Day 7	Year 14

707

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number

N/A

2. Page 1 of

3. Emergency Response Phone

888-814-7477

4. Waste Tracking Number

868-26

5. Generator's Name and Mailing Address  
USEPA REGION 8  
1595 WYNKOOP ST  
DENVER, CO 80202

Generator's Site Address (if different than mailing address)

USEPA REGION 8  
1330 WEST 200 SOUTH  
PAROWAN, UT 84761

Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name

IMP ENVIRONMENTAL SERVICES, INC.

U.S. EPA ID Number

CAT000624247

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

ECDC ENVIRONMENTAL  
1111 WEST HIGHWAY 123, PO BOX 69  
EAST CARBON, UT 84520

U.S. EPA ID Number

N/A

Facility's Phone: (800) 444-4521

9. Waste Shipping Name and Description

10. Containers

No. Type

11. Total Quantity

12. Unit Wt./Vol.

1. NON-PCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED

001 CM

21 CY

13. Special Handling Instructions and Additional Information

APPROVAL# 40411421139

SC8-68; STONE CASTLE RECYCLING

Bin 6410

14. 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.

Generator's/Offoror's Printed/Typed Name

STEVEN B. MERRITT, U.S. EPA

Signature

[Signature]

Month Day Year  
12 16 14

15. International Shipments

Import to U.S.

Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

[Signature]

Signature

Signature

Month Day Year  
1 7 15

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator. Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

[Signature]

Month Day Year  
1 8 14

DESIGNATED FACILITY TO GENERATOR

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 808-27	
5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202 Generator's Phone: (303) 814-7477		Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761			
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.			U.S. EPA ID Number CAT000624247		
7. Transporter 2 Company Name			U.S. EPA ID Number		
8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4621			U.S. EPA ID Number N/A		
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.
		No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED		001	CM	21	CY
2.					
3.					
4.					
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139  SC9-89, STONE CASTLE RECYCLING  <i>Bin 5219</i>					
14. 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.					
Generator's/Offorer's Printed/Typed Name STEVEN B. MERRITT			Signature <i>[Signature]</i>		Month Day Year 12 16 14
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____					
16. Transporter Acknowledgment of Receipt of Materials					
Transporter 1 Printed/Typed Name Blaine Meacham MPE UT			Signature <i>[Signature]</i>		Month Day Year 1 8 15
Transporter 2 Printed/Typed Name			Signature		Month Day Year
17. Discrepancy					
17a. 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: _____					
17b. Alternate Facility (or Generator)			U.S. EPA ID Number		
Facility's Phone: _____					
17c. Signature of Alternate Facility (or Generator)			Signature		Month Day Year
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a					
Printed/Typed Name <i>[Signature]</i>			Signature <i>[Signature]</i>		Month Day Year 1 9 14

709

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
N/A

2. Page 1 of 1  
3. Emergency Response Phone  
888-814-7477

4. Waste Tracking Number  
868-28

5. Generator's Name and Mailing Address

USEPA REGION 8  
1596 WYNKOOP ST  
DENVER, CO 80202

Generator's Site Address (if different than mailing address)

USEPA REGION 8  
1338 WEST 200 SOUTH  
PAROWAN, UT 84761

Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name  
MP ENVIRONMENTAL SERVICES, INC.

U.S. EPA ID Number  
CAT000624247

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

ECDC ENVIRONMENTAL  
1111 WEST HIGHWAY 123, PO BOX 69  
EAST CARBON, UT 84520

U.S. EPA ID Number  
N/A

Facility's Phone: (800) 444-4521

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TRUCKED

001

CM

21

CY

13. Special Handling Instructions and Additional Information

APPROVAL# 40411421139

SCB-88; STONE CASTLE RECYCLING

Bin # 5009

14. 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.

Generator's/Offor's Printed/Typed Name  
STEVEN B. MERRITT, U.S. EPA

Signature

Month Day Year  
12 16 14

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

Transporter Signature (for exports only):

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
Glen T. Wright

Signature

Month Day Year  
1 12 13

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17c

Printed/Typed Name

Signature

Signature

Signature

Month Day Year  
1 13 15

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

709

<b>NON-HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-29	
5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202 Generator's Phone: (303) 814-7477			Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761			
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.			U.S. EPA ID Number CAT000624247			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 89 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4521			U.S. EPA ID Number N/A			
GENERATOR	9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.
			No.	Type		
	1.	NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	CT
	2.					
	3.					
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139 SCB-88; STONE CASTLE RECYCLING Bin 25470						
14. 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.						
Generator's/Offor's Printed/Typed Name STEVEN B. MERRITT, U.S. EPA			Signature 		Month 12	Day 16
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit: Date leaving U.S.:			
TRANSPORTER	16. Transporter Acknowledgment of Receipt of Materials					
	Transporter 1 Printed/Typed Name Glen T Wright		Signature 		Month 1	Day 15
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
DESIGNATED FACILITY	17. Discrepancy					
	17a. 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:					
	17b. Alternate Facility (or Generator)			U.S. EPA ID Number		
Facility's Phone:						
17c. Signature of Alternate Facility (or Generator)					Month	Day
					Year	
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name A McFarland			Signature 		Month 1	Day 6
					Year 15	

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-30	
5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202		Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761			
Generator's Phone: (303) 814-7477					
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.			U.S. EPA ID Number CAT000624247		
7. Transporter 2 Company Name			U.S. EPA ID Number		
8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520			U.S. EPA ID Number N/A		
Facility's Phone: (800) 444-4521					
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.
		No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - <i>INITIATED</i>		001	CM	21	CT
2.					
3.					
4.					
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139  SCB-88; STONE CASTLE RECYCLING  <i>Bin 25413</i>					
14. 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.					
Generator's/Offoror's Printed/Typed Name <i>STEVEN B. MERRITT, U.S. EPA</i>			Signature <i>[Signature]</i>		Month Day Year 12 16 14
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____					
16. Transporter Acknowledgment of Receipt of Materials					
Transporter 1 Printed/Typed Name <i>Glen T. Wright</i>			Signature <i>[Signature]</i>		Month Day Year 1 6 15
Transporter 2 Printed/Typed Name			Signature		Month Day Year
17. Discrepancy					
17a. 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: _____					
17b. Alternate Facility (or Generator)			U.S. EPA ID Number		
Facility's Phone: _____					
17c. Signature of Alternate Facility (or Generator)			Month Day Year		
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a					
Printed/Typed Name <i>Linda Smith</i>			Signature <i>[Signature]</i>		Month Day Year 1 7 15

**NON-HAZARDOUS WASTE MANIFEST**      1. Generator ID Number: N/A      2. Page 1 of 1      3. Emergency Response Phone: 888-814-7477      4. Waste Tracking Number: 888-31

5. Generator's Name and Mailing Address: USEPA REGION 8, 1595 WYNKOOP ST, DENVER, CO 80202      Generator's Site Address (if different than mailing address): USEPA REGION 8, 1338 WEST 200 SOUTH, PAROWAN, UT 84761

Generator's Phone: (303) 814-7477      U.S. EPA ID Number: CAT000624247

6. Transporter 1 Company Name: MP ENVIRONMENTAL SERVICES, INC.      U.S. EPA ID Number: [Blank]

7. Transporter 2 Company Name: [Blank]      U.S. EPA ID Number: [Blank]

8. Designated Facility Name and Site Address: ECOC ENVIRONMENTAL, 1111 WEST HIGHWAY 123, PO BOX 89, EAST CARBON, UT 84520      Facility's Phone: (800) 444-4521      U.S. EPA ID Number: N/A

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
	No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	CT
2.				
3.				
4.				

13. Special Handling Instructions and Additional Information: APPROVAL# 40411421139, SC8-86; STONE CASTLE RECYCLING, Bin 6413

14. 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.

Generator's/Offero's Printed/Typed Name: STEVEN B. MERRIN, U.S. EPA      Signature: [Signature]      Month: 12, Day: 16, Year: 14

15. International Shipments:  Import to U.S.       Export from U.S.      Port of entry/exit: [Blank]      Date leaving U.S.: [Blank]

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name: Glen T. Wright      Signature: [Signature]      Month: 1, Day: 15, Year: 15

Transporter 2 Printed/Typed Name: [Blank]      Signature: [Blank]      Month: [Blank], Day: [Blank], Year: [Blank]

17. Discrepancy: 17a. Discrepancy Indication Space:  Quantity       Type       Residue       Partial Rejection       Full Rejection

17b. Alternate Facility (or Generator): [Blank]      Manifest Reference Number: [Blank]      U.S. EPA ID Number: [Blank]

17c. Signature of Alternate Facility (or Generator): [Blank]      Month: [Blank], Day: [Blank], Year: [Blank]

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 7a  
Printed/Typed Name: [Signature]      Signature: [Signature]      Month: 1, Day: 8, Year: 15

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number: N/A  
 2. Page 1 of 1  
 3. Emergency Response Phone: 888-814-7477  
 4. Waste Tracking Number: 868-32

5. Generator's Name and Mailing Address: USEPA REGION 8, 1595 WYNKOOP ST, DENVER, CO 80202  
 Generator's Phone: (303) 814-7477  
 Generator's Site Address (if different than mailing address): USEPA REGION 8, 1338 WEST 200 SOUTH, PAROWAN, UT 84761

6. Transporter 1 Company Name: MP ENVIRONMENTAL SERVICES, INC. U.S. EPA ID Number: CAT000624247

7. Transporter 2 Company Name: U.S. EPA ID Number:

8. Designated Facility Name and Site Address: ECOC ENVIRONMENTAL, 1111 WEST HIGHWAY 123, PO BOX 89, EAST CARBON, UT 84520  
 Facility's Phone: (800) 444-4521  
 U.S. EPA ID Number: N/A

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit WL/Vol.
	No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	CY
2.				
3.				
4.				

13. Special Handling Instructions and Additional Information: APPROVAL# 40411421139  
 SC8-68; STONE CASTLE RECYCLING  
 Bin 5046

14. 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.  
 Generator's/Offoror's Printed/Typed Name: STEVEN B. MERRITT, U.S. EPA  
 Signature: [Signature]  
 Month: 12, Day: 16, Year: 14

15. International Shipments:  Import to U.S.  Export from U.S.  
 Port of entry/exit: \_\_\_\_\_  
 Date leaving U.S.: \_\_\_\_\_

16. Transporter Acknowledgment of Receipt of Materials  
 Transporter 1 Printed/Typed Name: Glen T. Wright  
 Signature: [Signature]  
 Month: 1, Day: 8, Year: 15  
 Transporter 2 Printed/Typed Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Month: \_\_\_\_\_, Day: \_\_\_\_\_, Year: \_\_\_\_\_

17. Discrepancy  
 17a. Discrepancy Indication Space:  Quantity  Type  Residue  Partial Rejection  Full Rejection  
 Manifest Reference Number: \_\_\_\_\_

17b. Alternate Facility (or Generator): \_\_\_\_\_ U.S. EPA ID Number: \_\_\_\_\_  
 Facility's Phone: \_\_\_\_\_

17c. Signature of Alternate Facility (or Generator): \_\_\_\_\_  
 Month: \_\_\_\_\_, Day: \_\_\_\_\_, Year: \_\_\_\_\_

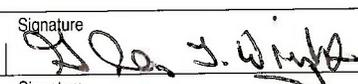
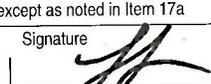
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a  
 Printed/Typed Name: A McFarland  
 Signature: [Signature]  
 Month: 1, Day: 9, Year: 15

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

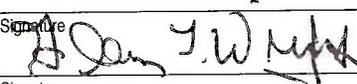
<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-33
5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202		Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761		
Generator's Phone: (303) 814-7477		U.S. EPA ID Number CAT000624247		
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.		U.S. EPA ID Number		
7. Transporter 2 Company Name		U.S. EPA ID Number		
8. Designated Facility Name and Site Address ECCC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520		U.S. EPA ID Number N/A		
Facility's Phone: (800) 444-4521				
9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
	No.	Type		
	1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21 CY
	2.			
	3.			
4.				
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139  SC8-68; STONE CASTLE RECYCLING  <i>Bin 4020</i>				
14. 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.				
Generator's/Offoror's Printed/Typed Name <i>STEVEN B. MERRITS, U.S. EPA</i>		Signature <i>[Signature]</i>		Month Day Year <i>12 16 14</i>
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____				
16. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name <i>Alan J. Wright</i>		Signature <i>[Signature]</i>		Month Day Year <i>1 19 15</i>
Transporter 2 Printed/Typed Name		Signature		Month Day Year
17. Discrepancy				
17a. 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: _____ U.S. EPA ID Number				
17b. Alternate Facility (or Generator)				
Facility's Phone: _____				
17c. Signature of Alternate Facility (or Generator)				
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a				
Printed/Typed Name <i>[Signature]</i>		Signature <i>[Signature]</i>		Month Day Year <i>1 19 15</i>

GENERATOR  
 INT'L  
 TRANSPORTER  
 DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number <i>N/A</i>	2. Page 1 of <i>1</i>	3. Emergency Response Phone <i>888-814-7477</i>	4. Waste Tracking Number <i>868-34</i>
5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202		Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761		
Generator's Phone: <i>(303) 814-7477</i>		U.S. EPA ID Number <i>CAT000624247</i>		
6. Transporter 1 Company Name <i>MP ENVIRONMENTAL SERVICES, INC.</i>		U.S. EPA ID Number		
7. Transporter 2 Company Name		U.S. EPA ID Number		
8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT <i>84520</i>		U.S. EPA ID Number <i>N/A</i>		
Facility's Phone: <i>(800) 444-4521</i>				
9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
	No.	Type		
	1.			
	<i>NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED</i>	<i>001</i>	<i>CM</i>	<i>21 CY</i>
	2.			
3.				
4.				
13. Special Handling Instructions and Additional Information <i>APPROVAL# 40411421139</i>  <i>SC8-88, STONE CASTLE RECYCLING</i>  <i>Bin # 25127</i>				
14. 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.				
Generator's/Offeror's Printed/Typed Name <i>STEVEN B. MERRILL, U.S. EPA</i>		Signature 		Month Day Year <i>12 16 14</i>
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____				
16. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name <i>Glen J. Wright</i>		Signature 		Month Day Year <i>1 13 15</i>
Transporter 2 Printed/Typed Name		Signature		Month Day Year
17. Discrepancy				
17a. 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: _____				
17b. Alternate Facility (or Generator)		U.S. EPA ID Number		
Facility's Phone:				
17c. Signature of Alternate Facility (or Generator)		Month Day Year		
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a				
Printed/Typed Name <i>Linda Smith</i>		Signature 		Month Day Year <i>1 14 15</i>

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GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-35		
5. Generator's Name and Mailing Address USEPA REGION 8 1595 WYNKOOP ST DENVER, CO 80202 Generator's Phone: (303) 814-7477		Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761				
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.			U.S. EPA ID Number CAT000624247			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4521			U.S. EPA ID Number N/A			
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
		No.	Type			
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED		001	CM	21	CY	
2.						
3.						
4.						
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139  SCB-88; STONE CASTLE RECYCLING  <span style="color:blue;">Bin #</span>						
14. 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.						
Generator's/Offeror's Printed/Typed Name STEVEN B. MERRITT, U.S. EPA			Signature 	Month 12	Day 16	Year 14
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
16. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Glen T Wright			Signature 	Month 1	Day 15	Year 15
Transporter 2 Printed/Typed Name			Signature	Month	Day	Year
17. Discrepancy						
17a. 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: _____						
17b. Alternate Facility (or Generator)			U.S. EPA ID Number			
Facility's Phone: _____						
17c. Signature of Alternate Facility (or Generator)			Month	Day	Year	
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a						
Printed/Typed Name A McFarland			Signature 	Month 1	Day 16	Year 15

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<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 868-36
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5. Generator's Name and Mailing Address USEPA REGION 8 1586 WYNKOOP ST DENVER, CO 80202 Generator's Phone: (303) 814-7477	Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761
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6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.	U.S. EPA ID Number CAT000624247
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7. Transporter 2 Company Name	U.S. EPA ID Number
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8. Designated Facility Name and Site Address ECCO ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520 Facility's Phone: (800) 444-4521	U.S. EPA ID Number N/A
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9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
	No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	21	CM	21	CY
2.				
3.				
4.				

13. Special Handling Instructions and Additional Information APPROVAL# 40411421139 SC9-68; STONE CASTLE RECYCLING Bin # 6233
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14. 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.				
Generator's/Offoror's Printed/Typed Name STEVEN B. MERRIS, U.S. EPA	Signature <i>[Signature]</i>	Month 12	Day 16	Year 14

15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.	Port of entry/exit: Date leaving U.S.:
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16. Transporter Acknowledgment of Receipt of Materials				
Transporter 1 Printed/Typed Name Glen J. Wright	Signature <i>[Signature]</i>	Month 1	Day 20	Year 15
Transporter 2 Printed/Typed Name	Signature	Month	Day	Year

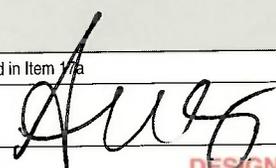
17. Discrepancy					
17a. Discrepancy Indication Space	<input type="checkbox"/> Quantity	<input type="checkbox"/> Type	<input type="checkbox"/> Residue	<input type="checkbox"/> Partial Rejection	<input type="checkbox"/> Full Rejection
Manifest Reference Number:					

17b. Alternate Facility (or Generator)	U.S. EPA ID Number
Facility's Phone:	

17c. Signature of Alternate Facility (or Generator)	Month	Day	Year
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18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a				
Printed/Typed Name Linda Smith	Signature <i>[Signature]</i>	Month 1	Day 21	Year 15

GENERATOR  
INT'L  
TRANSPORTER  
DESIGNATED FACILITY

<b>NON-HAZARDOUS WASTE MANIFEST</b>	1. Generator ID Number N/A	2. Page 1 of 1	3. Emergency Response Phone 888-814-7477	4. Waste Tracking Number 808-37	
5. Generator's Name and Mailing Address USEPA REGION 8 1695 WYNKOOP ST DENVER, CO 80202		Generator's Site Address (if different than mailing address) USEPA REGION 8 1338 WEST 200 SOUTH PAROWAN, UT 84761			
Generator's Phone: (303) 814-7477					
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES, INC.			U.S. EPA ID Number CAT000624247		
7. Transporter 2 Company Name			U.S. EPA ID Number		
8. Designated Facility Name and Site Address ECDC ENVIRONMENTAL 1111 WEST HIGHWAY 123, PO BOX 69 EAST CARBON, UT 84520			U.S. EPA ID Number N/A		
Facility's Phone: (800) 444-4621					
9. Waste Shipping Name and Description		10. Containers		11. Total Quantity	12. Unit Wt./Vol.
		No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED		001	CM	21	CY
2.					
3.					
4.					
13. Special Handling Instructions and Additional Information APPROVAL# 40411421139  SC8-88; STONE CASTLE RECYCLING  Bill # 5944					
14. 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.					
Generator's/Offeror's Printed/Typed Name STEVEN B. MERRITT U.S. EPA			Signature 		Month Day Year 12 16 14
15. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____					
16. Transporter Acknowledgment of Receipt of Materials					
Transporter 1 Printed/Typed Name Ricardo Felix			Signature 		Month Day Year 12 26 15
Transporter 2 Printed/Typed Name			Signature		Month Day Year
17. Discrepancy					
17a. 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: _____					
17b. Alternate Facility (or Generator)			U.S. EPA ID Number		
Facility's Phone: _____					
17c. Signature of Alternate Facility (or Generator)					Month Day Year
18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 7a					
Printed/Typed Name 			Signature 		Month Day Year 1 24 14

NON-HAZARDOUS WASTE MANIFEST 1. Generator ID Number N/A 2. Page 1 of 1 3. Emergency Response Phone 888-814-7477 4. Waste Tracking Number 868-38

5. Generator's Name and Mailing Address: USEPA REGION 8, 1596 WYNKOOP ST, DENVER, CO 80202. Generator's Site Address (if different than mailing address): USEPA REGION 8, 1338 WEST 200 SOUTH, PAOWAN, UT 84761. Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name: MP ENVIRONMENTAL SERVICES, INC. U.S. EPA ID Number: CAT000624247

7. Transporter 2 Company Name: U.S. EPA ID Number:

8. Designated Facility Name and Site Address: ECDC ENVIRONMENTAL, 1111 WEST HIGHWAY 123, PO BOX 83, EAST CARBON, UT 84520. U.S. EPA ID Number: N/A. Facility's Phone: (303) 444-4521

9. Waste Shipping Name and Description	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
	No.	Type		
1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED	001	CM	21	CT
2.				
3.				
4.				

13. Special Handling Instructions and Additional Information: APPROVAL# 40411421138, SCB-88; STONE CASTLE RECYCLING. Bin# 25364

14. 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. Generator's/Offeror's Printed/Typed Name: STEVEN B. MERTZ, U.S. EPA. Signature: [Signature]. Month: 12, Day: 16, Year: '14

15. International Shipments:  Import to U.S.  Export from U.S. Port of entry/exit: Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials. Transporter 1 Printed/Typed Name: Ricardo Felix. Signature: [Signature]. Month: 01, Day: 27, Year: 14. Transporter 2 Printed/Typed Name: Signature: Month: Day: Year:

17. Discrepancy. 17a. Discrepancy Indication Space:  Quantity  Type  Residue  Partial Rejection  Full Rejection. Manifest Reference Number:

17b. Alternate Facility (or Generator). U.S. EPA ID Number: Facility's Phone:

17c. Signature of Alternate Facility (or Generator). Month: Day: Year:

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a. Printed/Typed Name: Signature: [Signature]. Month: 1, Day: 27, Year: 14

Truck 707

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
N/A

2. Page 1 of 1

3. Emergency Response Phone  
888-814-7477

4. Waste Tracking Number  
868-39

5. Generator's Name and Mailing Address  
USEPA REGION 8  
1595 WYNKOOP ST  
DENVER, CO 80202

Generator's Site Address (if different than mailing address)  
USEPA REGION 8  
1398 WEST 200 SOUTH  
PAROWAN, UT 84761

Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name  
MP ENVIRONMENTAL SERVICES, INC.

U.S. EPA ID Number  
CAT000624247

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address  
ECDC ENVIRONMENTAL  
1111 WEST HIGHWAY 123, PO BOX 69  
EAST CARBON, UT 84520  
Facility's Phone: (800) 444-4521

U.S. EPA ID Number  
N/A

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No.

Type

1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED

001

CM

21

CY

13. Special Handling Instructions and Additional Information

APPROVAL# 40411421139

608-68; STONE CASTLE RECYCLING

BIN # 5227

14. 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.

Generator's/Offoror's Printed/Typed Name  
STEVEN B. MEALIN, U.S. EPA

Signature

Month Day Year  
12 16 14

INT'L

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Transporter Signature (for exports only):

Date leaving U.S.:

TRANSPORTER

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name  
Blaine Mecham MPE LTD

Signature

Month Day Year  
1 21 15

Transporter 2 Printed/Typed Name

Signature

Month Day Year

DESIGNATED FACILITY

17. Discrepancy

17a. Discrepancy Indication Space  Quantity  Type  Residue  Partial Rejection  Full Rejection

Manifest Reference Number:

U.S. EPA ID Number

17b. Alternate Facility (or Generator)

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name  
Linda Smith

Signature

Month Day Year  
1 22 15

770

NON-HAZARDOUS WASTE MANIFEST

1. Generator ID Number  
N/A

2. Page 1 of 1

3. Emergency Response Phone  
888-814-7477

4. Waste Tracking Number  
888-40

5. Generator's Name and Mailing Address  
USEPA REGION 8  
1895 WYNKOOP ST  
DENVER, CO 80202

Generator's Site Address (if different than mailing address)  
USEPA REGION 8  
1338 WEST 200 SOUTH  
PAROWAN, UT 84761

Generator's Phone: (303) 814-7477

6. Transporter 1 Company Name  
MP ENVIRONMENTAL SERVICES, INC.

U.S. EPA ID Number  
CAT000624247

7. Transporter 2 Company Name

U.S. EPA ID Number

8. Designated Facility Name and Site Address

ECDC ENVIRONMENTAL  
1111 WEST HIGHWAY 123, PO BOX 89  
EAST CARBON, UT 84520

U.S. EPA ID Number

N/A

Facility's Phone: (800) 444-4521

9. Waste Shipping Name and Description

10. Containers

11. Total Quantity

12. Unit Wt./Vol.

No. Type

1. NON-RCRA, NON-HAZARDOUS, DISCARDED TELEVISIONS AND CATHODE RAY TUBE MONITORS - TREATED

001

CM

21

CY

13. Special Handling Instructions and Additional Information

APPROVAL# 40411421139

Bin # 4033

508-89; STONE CASTLE RECYCLING

14. 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.

Generator's/Offoror's Printed/Typed Name

Signature

Month Day Year  
12 16 14

STEVEN B. MERRITT, U.S. EPA

15. International Shipments  Import to U.S.  Export from U.S.

Port of entry/exit:

Date leaving U.S.:

16. Transporter Acknowledgment of Receipt of Materials

Transporter 1 Printed/Typed Name

Signature

Month Day Year  
1 20 15

Dal Anderton

Transporter 2 Printed/Typed Name

Signature

Month Day Year

17. Discrepancy

17a. Discrepancy Indication Space

Quantity

Type

Residue

Partial Rejection

Full Rejection

Manifest Reference Number:

17b. Alternate Facility (or Generator)

U.S. EPA ID Number

Facility's Phone:

17c. Signature of Alternate Facility (or Generator)

Month Day Year

18. Designated Facility Owner or Operator: Certification of receipt of materials covered by the manifest except as noted in Item 17a

Printed/Typed Name

Signature

Month Day Year  
1 21 15

Linda Smith

GENERATOR

INT'L

TRANSPORTER

DESIGNATED FACILITY