



Tosco Northwest Company
A Division of Tosco Corporation
601 Union Street Suite 2500
Seattle, Washington 98101
206-442-7000

8/27/96

August 22, 1996

check for 8010 and 8270 in
mws dg of former fuel pit
and former w.o. pit -
Not done before.

~~XXXXXXXXXX~~

Hazardous Materials Specialist
Division of Environmental Protection
Department of Environmental Health
Alameda County Health Care Services Agency
1131 Harbor Bay Parkway
Alameda, California 94502

Keep an eye on Mw-3, and Mw-4
where high metal was recently
detected.

re: **Site #11120**
6400 Dublin Boulevard, Dublin

Dear Ms. Chu:

Attached you will find a copy of the August 13, 1996 report for the above-referenced site, as prepared by Innovative Technical Solutions, Inc. on behalf of Tosco Corporation. The report documents sampling and soil handling conducted during replacement of four underground storage tanks and associated piping.

Should you have any questions or concerns regarding the attached, feel free to contact me at 206-442-7434.

Very truly yours,

Timothy D. Johnson
Environmental Projects Manager

Attachment

cc: Mr. John West
Regional Water Quality Control Board - San Francisco Bay Region
2101 Webster Street, Suite 500
Oakland, CA 94612

Mr. Scott Hooton
BP Oil Company - Environmental Resources Management
Building 13, Suite N
295 SW 41st Street
Renton, WA 98055-4931

ENVIRONMENTAL
PROTECTION
96 AUG 26 PM 4: 09



ENVIRONMENTAL
PROTECTION
96 AUG 26 PM 4:09

August 13, 1996

Project No. 96-100

Ms. Eva Chu
Hazardous Materials Specialist
Division of Environmental Protection
Department of Environmental Health
Alameda County Health Care Services Agency
1131 Harbor Bay Parkway
Alameda, California 94502

Tank Closure Report
BP Service Station (Tosco Facility No. 11120)
6400 Dublin Boulevard
Dublin, California

Dear Ms. Chu:

Four underground storage tanks (USTs) and associated piping were removed on April 3, 1996 from the BP Service Station (Tosco facility number 11120), located at 6400 Dublin Boulevard in Dublin, California. The USTs and piping were removed by American Construction (American) on behalf of Tosco Corporation (Tosco). Innovative Technical Solutions, Inc. (ITSI) was contracted by Tosco to perform compliance sampling during removal of the USTs and piping, and to prepare the Tank Closure Report upon completion of the project.

Figure 1 shows the layout of the site and locations of the USTs. The four USTs were of fiberglass construction, and consisted of the following: One 12,000-gallon gasoline tank; one 10,000-gallon gasoline tank; one 8,000-gallon gasoline tank, and one 550-gallon waste oil tank. Approximately 160 feet of associated fiberglass piping were removed from the site, including product lines and vent lines. Additionally, two hydraulic lifts and a wastewater clarifier were removed from the site. Removal of the USTs and piping were performed according to the Underground Tank Closure Plan, prepared by Tait and Associates, Inc. and submitted to Alameda County. A copy of the Closure Plan is included as Attachment A.

UST REMOVAL

The four USTs, associated piping, two hydraulic lifts, and one wastewater clarifier were removed from the site on April 3, 1996. Figure 2 shows the approximate locations where the USTs,

pipings, hydraulic lifts and wastewater clarifier were removed. ITSI personnel documented the removal activities and collected soil samples from the excavations.

Before removal of the USTs, the lower explosion limit (LEL) and oxygen (O₂) levels inside the USTs were measured by American. Following approval by the onsite fire inspector, the USTs were removed from the excavations. The fiberglass USTs were in very good condition and the markings on the tanks were still legible.

The USTs were transported offsite under Uniform Hazardous Waste Manifest Numbers 95898160, 95898163, and 95898164 by Erickson Inc. (Erickson). The USTs were transported to Erickson's facility in Richmond, California for destruction. Copies of the Uniform Hazardous Waste Manifests and Certificates of Destruction are included in Attachment B.

The main UST excavation, where the three gasoline USTs were removed, was generally rectangular with sidewall dimensions of between approximately 35 feet and 50 feet in length. Total depth of the excavation was approximately 12 feet below ground surface (bgs). The excavation contained standing water at a depth of approximately 10 feet bgs.

The soil in the main UST excavation consisted of asphalt and gravelly fill to a depth of approximately 3 feet bgs, underlain by dark olive gray silty sand to approximately 6 feet bgs, and dark gray silty clay to the base of the excavation. Discolored soils and associated hydrocarbon odor were observed on the southern wall of the main UST excavation. Following receipt of the analytical data, the excavation was backfilled with imported clean Class II AB fill.

The product line piping consisted of several fiberglass lines within a fiberglass lined trench extending southeast of the main UST excavation, as shown in Figure 2. The fiberglass lines connected to multiple fuel dispensers located on two fuel islands. The product line trench was approximately 2 feet wide by 3 feet deep, with a total length of approximately 90 feet, including the fuel islands. The two fuel islands were also removed during piping removal activities. Stained soils with strong hydrocarbon odors were observed beneath the product line piping and fuel islands.

A small segment of abandoned product line piping extending to the west of the main UST excavation was also removed, along with vent line piping extending southwest of the excavation, as shown on Figure 2.

SOIL AND GROUNDWATER SAMPLING

Soil samples were collected from the sidewalls of the main UST excavation (designated S-1 through S-6 and S-13) at the soil/ groundwater interface at a depth of approximately 10 feet bgs, as directed by Mr. Dale Klettke of Alameda County. Additional soil samples were collected from a depth of approximately 3 feet bgs from beneath the product line piping and dispensers (designated S-7 through S-12 and S-16), from a depth of approximately 8 feet bgs from the waste oil tank excavation (designated S-14 and S-15) and hydraulic lift excavations (designated S-18 and S-19), and from a depth of approximately 4 feet bgs from the wastewater clarifier excavation (designated S-17). Groundwater samples were collected from both the main UST excavation (designated W-1) and waste oil tank excavation (designated W-2). Figure 2 shows the locations of the soil and groundwater samples collected.

Selected locations within the product line piping excavations were screened using an organic vapor meter equipped with a photoionization detector (PID). Organic vapors were detected in soils within the product line piping excavations ranging from 16 ppm to 2,700 ppm.

Soil samples from the bottom of the excavations were collected from a backhoe bucket. The bucket of the backhoe was brought to the surface for sample collection. Soil samples were collected by hand driving a 2-inch diameter by 6-inch long clean brass tube into soil at each location. Brass tubes containing soil samples were fitted on each end with Teflon patches and covered with plastic friction caps. Each soil sample was labeled with sample number, date and time of collection, and the sampler's initials. Soil samples were sealed into plastic zip-lock bags and placed on ice in an insulated cooler. A chain of custody documented the soil sample collections and was kept with the soil samples until relinquished to Sequoia Analytical, a California-certified laboratory, for analyses.

Soil and groundwater samples from the main UST and product line excavations (samples S-1 through S-13, S-16, and W-1) were analyzed for:

- TPH as gasoline (TPHg) by Modified EPA Method 8015
- Benzene, toluene, ethylbenzene and xylenes (BTEX) by EPA Method 8020
- TPH as diesel (TPHd) by Modified EPA Method 8015
- Total Lead by EPA Method 7420

Soil and groundwater samples from the waste oil tank excavation (samples S-14, S-15 and W-2) and wastewater clarifier excavation (sample S-17) were analyzed for:

- TPHg by Modified EPA Method 8015
- BTEX by EPA Method 8020

- TPHd by Modified EPA Method 8015
- Oil and Grease (O&G) by EPA Method 5520
- Halogenated volatile organic compounds (HVOCs) by EPA Method 8010
- Semivolatile Organic Compounds (SVOCs) by EPA Method 8270
- LUFT Metals by EPA Method 6010

Soil samples from the hydraulic lift excavations (samples S-18 and S-19) were analyzed for:

- TPH as hydraulic oil (TPHh) by DHS LUFT Method

Copies of the laboratory reports and chain of custody forms for the soil and groundwater samples are included in Attachment C.

STOCKPILE SAMPLING

Two soil stockpiles (designated SP-1 and SP-2) were generated during site construction activities. SP-1 consisted of soils from the waste oil tank excavation (an estimated 60 to 100 cubic yards), and SP-2 consisted of soils from the main UST and product line piping excavations (approximately 450 cubic yards). Four samples (composited by the laboratory into one sample) were collected for profiling of the waste oil tank stockpile, and 20 samples (composited by the laboratory into five samples) were collected for profiling of the main UST and product line piping stockpile.

Additionally, soil samples were collected from within the footprint of the new tank location to evaluate the potential for using this soil as backfill for the main UST excavation. Twelve soil samples (composited by the laboratory into three samples) were collected from depths of 4 and 8 feet bgs from two locations within each of three test trenches (designated T-1 through T-3), as shown on Figure 2.

Soil samples from stockpiles SP-1 and SP-2 were collected in clean glass sample containers. Soil samples from the new tank location were collected in clean brass sleeves and the brass tubes were sealed using teflon and plastic caps on each end. Each soil sample was labeled with sample number, date and time of collection, and the sampler's initials. A chain of custody documented the soil sample collections and was kept with the soil samples until relinquished to Sequoia Analytical for analyses.

Composite soil samples from the main UST and product line piping stockpile were analyzed for:

- TPHg by Modified EPA Method 8015
- BTEX by EPA Method 8020
- Total Lead by EPA Method 7420

The composite soil sample from the waste oil tank stockpile was analyzed for:

- TPHg by Modified EPA Method 8015
- BTEX by EPA Method 8020
- Total extractable petroleum hydrocarbons (TEPH) by EPA Method 8015
- Volatile organic compounds (VOCs) by EPA Method 8240
- SVOCs by EPA Method 8270
- California Assessment Manual (CAM) 17 Metals

The composite soil samples from the new tank location were analyzed for:

- TPHg by Modified EPA Method 8015
- BTEX by EPA Method 8020
- LUFT Metals by EPA Method 6010

Copies of laboratory results and chain of custody forms for the soil samples are included in Attachment C.

Stockpiled soil and soil from the new tank location were profiled and accepted for disposal at Browning-Ferris Industries (BFI) Vasco Road Sanitary Landfill. A total of 1,777.94 tons (an estimated 1,370 cubic yards) of soil was removed from the site during the period of April 29 to June 12, 1996 and transported by American under Non-Hazardous Special Waste Manifest to the BFI landfill for disposal. About 1,270 tons of petroleum-impacted soil was transported from the site to BFI landfill between April 29 and May 2, 1996, about 60 tons of petroleum-impacted soil was removed from the site to BFI landfill on May 24, 1996, and about 448 tons of petroleum-impacted soil was removed from the site to BFI landfill between June 10 and 12, 1996.

The sources and associated volumes of soil removed from the site are estimated as the following:

- An estimated 60 to 100 cubic yards of soil from the waste oil tank excavation.
- Approximately 450 cubic yards of soil from the main UST and product line piping excavations.
- An estimated 425 cubic yards of soil from the new tank location.
- An estimated 395 to 435 cubic yards of soil from construction related activities, including canopy footings, new building foundation, and trenching activities.

Copies of the non-hazardous manifests are included in Attachment B.

RESULTS

Analytical results for soil and groundwater samples are summarized in Table 1 and discussed below:

- Soil samples from the main UST excavation were reported to contain up to 2,700 mg/kg TPHg, 3.2 mg/kg benzene, and 570 mg/kg TPHd (sample S-2 collected from a depth of 10 feet bgs from the southern wall of the excavation).
- Groundwater from the main UST excavation (sample W-1) reportedly contained 14,000 µg/l TPHg, 500 µg/l benzene, and 6,200 µg/l TPHd.
- Soil samples from the product line piping excavation were reported to contain up to 42 mg/kg TPHg and 0.68 mg/kg benzene (sample S-7 collected from a depth of 3 feet bgs), and 75 mg/kg TPHd (sample S-9 collected from a depth of 3 feet bgs).
- TPHg, BTEX and O&G were reportedly not detected in two soil samples from the waste oil tank excavation. TPHd was reported in one soil sample (sample S-14 collected from a depth of 8 feet bgs) at a concentration of 1.2 mg/kg.
- Total lead ranged from <2.5 mg/kg to 21 mg/kg (sample S-16 collected from a depth of 3 feet bgs) in the soil samples collected from the site.

Analytical results of the stockpile soil samples are summarized in Table 1 and discussed below:

- Composite samples from the main UST and product line piping stockpile (SP-2) were reported to contain TPHg up to 30 mg/kg and benzene up to 0.027 mg/kg.
- TPHg, benzene, toluene and ethylbenzene were reportedly not detected in the composite sample from the waste oil tank stockpile (SP-1). Xylenes and TPHd (quantified as motor oil) were reported at concentrations of 0.0068 and 67 mg/kg, respectively.

Analytical results of the soil samples from the proposed new tank location are summarized in Table 1 and are discussed below:

- TPHg and TPHd reportedly were not detected in the composite soil samples from the proposed new tank location (T-1 through T-3).
- One composite soil sample from the proposed new tank location reportedly contained benzene and xylenes at concentrations of 0.019 and 0.015 mg/kg, respectively. These concentrations exceeded Alameda County's criteria of non-detect for BTEX for reuse of soils onsite as backfill.

Please give us a call if you have any questions or comments.

Sincerely,



Jeffrey D. Hess, R.G.
Project Director

Attachments

cc: Tim Johnson, Tosco Corporation
Scott Hooton, BP Oil Company

TABLE 1

SUMMARY OF LABORATORY RESULTS FOR CONFIRMATION SAMPLES
TOSCO FACILITY NO. 11120
DUBLIN, CALIFORNIA

A. SOILS

Sample Number	Depth (feet)	TPHg (mg/kg)	B (mg/kg)	T (mg/kg)	E (mg/kg)	X (mg/kg)	TPHd (mg/kg)	TPHh (mg/kg)	O&G (mg/kg)	Cd (mg/kg)	Cr (mg/kg)	Pb (mg/kg)	Ni (mg/kg)	Zn (mg/kg)
Gasoline tank, piping and dispenser samples														
S-1	10	14	0.12	0.045	0.12	0.14	1.5					3.5		
S-2	10	2,700	3.2	21	34	180	570					<2.5		
S-3	10	1,100	0.90	11	11	71	140					2.6		
S-4	10	470	2.1	<0.25	10	13	34					<2.5		
S-5	10	1,800	<5	<5	11	97	480					<2.5		
S-6	10	40	0.11	0.086	0.89	0.44	1.6					<2.5		
S-7	3	42	0.68	0.61	1.4	8.2	<10					4.8		
S-8	3	<1.0	0.059	0.0074	0.011	0.34	<10					5.5		
S-9	3	4	<0.005	<0.005	0.073	0.44	75					5.3		
S-10	3	11	0.015	0.26	0.15	1.8	1.0					7.7		
S-11	3	14	0.032	<0.012	0.25	0.21	2.1					9.7		
S-12	3	23	0.14	0.21	0.52	2.8	3.1					<2.5		
S-13	10	610	1.2	5.4	9.3	58	25					<2.5		
S-16	3	20	0.18	0.0092	0.37	2.1	56					21		
Waste oil tank samples														
S-14 ^{1,2}	8	<1.0	<0.005	<0.005	<0.005	<0.005	1.2		<50	<0.5	22	<1.0	28	28
S-15 ^{2,3}	8	<1.0	<0.005	<0.005	<0.005	<0.005	<1.0		<50	<0.5	25	<1.0	33	30

TABLE 1 (Continued)

SUMMARY OF LABORATORY RESULTS FOR CONFIRMATION SAMPLES
 TOSCO FACILITY NO. 11120
 DUBLIN, CALIFORNIA

Sample Number	Depth (feet)	TPHg (mg/kg)	B (mg/kg)	T (mg/kg)	E (mg/kg)	X (mg/kg)	TPHd (mg/kg)	TPHh (mg/kg)	O&G (mg/kg)	Cd (mg/kg)	Cr (mg/kg)	Pb (mg/kg)	Ni (mg/kg)	Zn (mg/kg)
Wastewater clarifier samples														
S-17 ^{2,3}	4	<1.0	<0.005	<0.005	<0.005	<0.005	<1.0		<50	<0.5	37	11	90	73
Hydraulic hoist samples														
S-18	8							<10						
S-19	8							<10						
New tank location samples														
T-1 (a-d)	4 & 8	<1.0	0.019	<0.005	<0.005	0.015	<1.0			<0.5	24	<1.0	34	31
T-2 (a-d)	4 & 8	<1.0	<0.005	<0.005	<0.005	<0.005	<1.0			<0.5	19	<1.0	23	26
T-3 (a-d)	4 & 8	<1.0	<0.005	<0.005	<0.005	<0.005	<1.0			<0.5	19	<1.0	28	28
Stockpile samples														
SP-1 ^{2,4,5} (a-d)	-	<1.0	<0.005	<0.005	<0.005	0.0068	67 ^a			<0.5	29	<1.0	34	45
SP-2 (a-d)	-	6.8	<0.005	0.012	0.037	0.22						<2.5		
SP-2 (e-h)	-	30	0.0061	0.047	0.27	1.8						<2.5		
SP-2 (i-l)	-	22	0.027	0.11	0.40	2.0						<2.5		
SP-2 (m-p)	-	<1.0	<0.005	<0.005	<0.005	0.0062						<2.5		
SP-2 (q-t)	-	<1.0	<0.005	<0.005	<0.005	<0.005						4.4		

TABLE 1 (Continued)

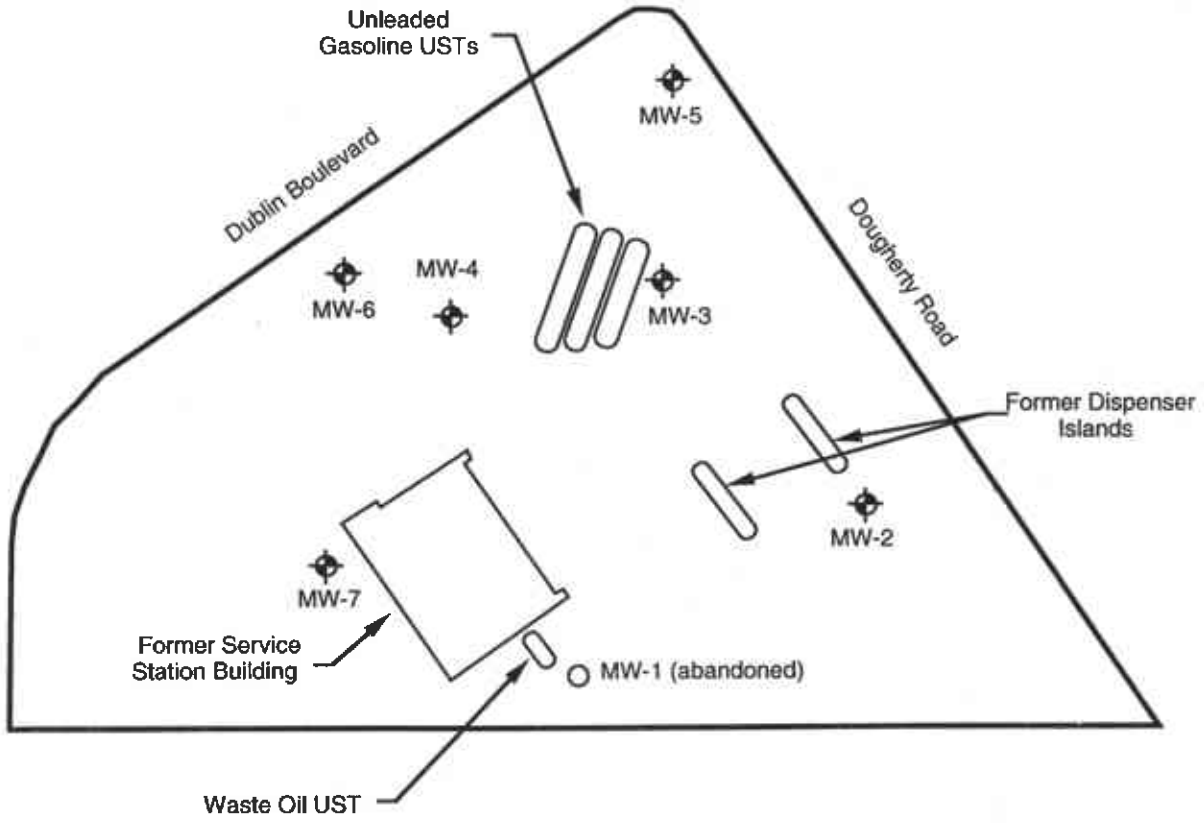
SUMMARY OF LABORATORY RESULTS FOR CONFIRMATION SAMPLES
 TOSCO FACILITY NO. 11120
 DUBLIN, CALIFORNIA

B. GROUNDWATER

Sample Number	Depth (feet)	TPHg (µg/l)	B (µg/l)	T (µg/l)	E (µg/l)	X (µg/l)	TPHd (µg/l)	TPHh (µg/l)	O&G (µg/l)	Cu (µg/l)	Cr (µg/l)	Pb (µg/l)	Ni (µg/l)	Zn (µg/l)
W-1 ¹	10	14,000	500	1,600	280	2,100	6,200		<5.0	<0.01	0.015	<0.02	0.046	0.071
W-2 ¹	7	130	<0.5	2.6	2.5	24	130		<5.0	<0.01	<0.01	<0.02	<0.02	0.033

¹ Concentration of 7.6 µg/kg tetrachloroethene reported by EPA Method 8010. *901*
² No compounds reportedly detected by EPA Method 8270.
³ No compounds reportedly detected by EPA Method 8010.
⁴ No compounds reportedly detected by EPA Method 8240.
⁵ CAM 17 metals analyzed for this sample, no significant concentrations reported.
⁶ Quantified as motor oil (C16 +)
⁷ Concentration of 6.7 µg/l tetrachloroethene reported by EPA Method 8010.

SVOCs were also identified in W-1 and W-2 (water)



Approximate Scale

 **Legend**
Monitoring Well

FIGURE 1
SITE LAYOUT

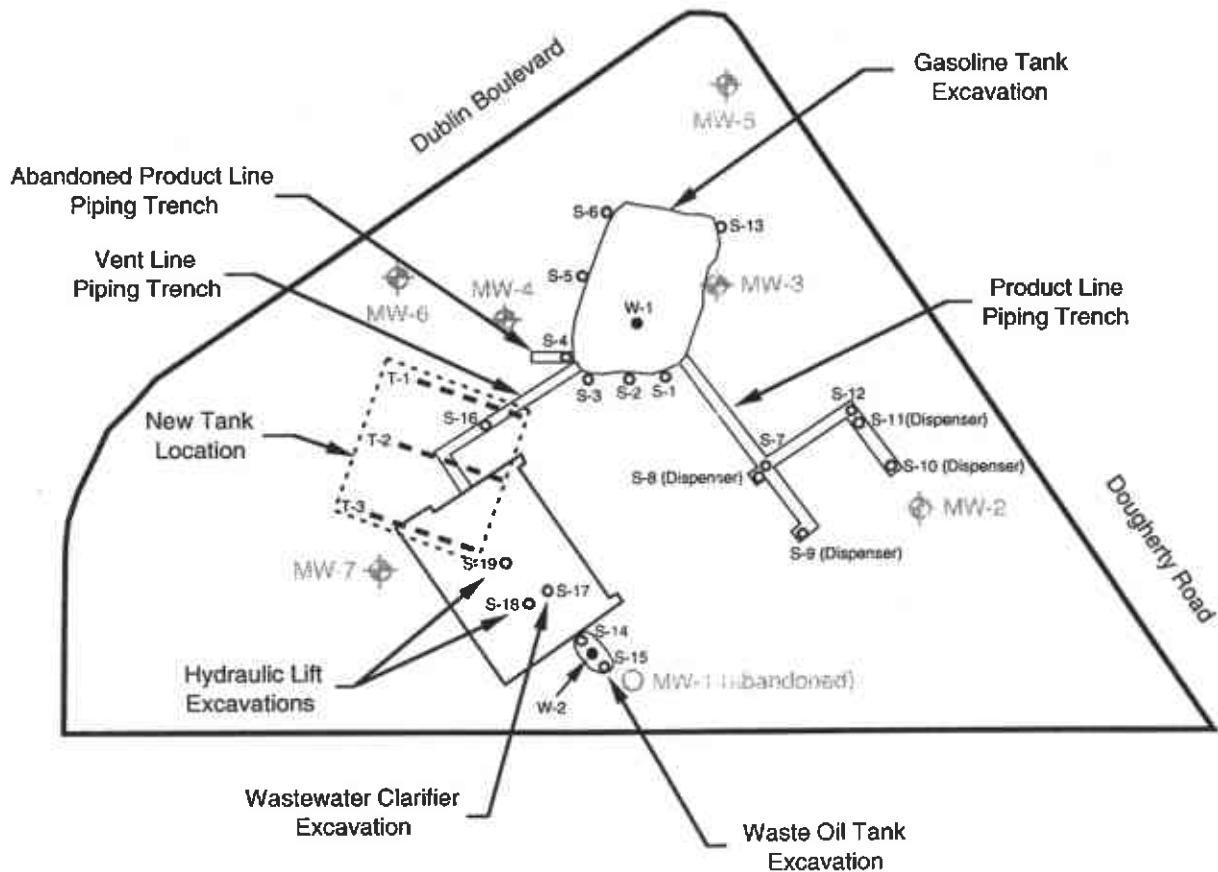
Tosco Oil Facility No. 11120
6400 Dublin Boulevard
Dublin, California



TOSCO CORPORATION

INNOVATIVE TECHNICAL SOLUTIONS, INC.

Source: Adapted from Figure A-1, Emcon Northwest, Inc., dated 12-16-94.



Approximate Scale




- Legend**
-  Monitoring Well
 -  Soil Sample
 -  Water Sample

FIGURE 2
APPROXIMATE SAMPLE LOCATIONS

Tosco Oil Facility No. 11120
 6400 Dublin Boulevard
 Dublin, California



TOSCO CORPORATION

INNOVATIVE TECHNICAL SOLUTIONS, INC.

Source: Adapted from Figure A-1, Emcon Northwest, Inc., dated 12-16-94.

Warden 129196

Note changes / additions highlighte

ACCEPTED

Underground Storage Tank Closure Permit Application
 Alameda County Division of Hazardous Materials
 1191 Harbor Bay Parkway, Suite 200
 Alameda, CA 94502-6577

These closure/removal plans have been received and found to be acceptable and generally meet the requirements of State and Local Health Laws. Changes to your closure plans indicated by this Department are to assure compliance with State and local laws. The project proposed herein is now released for issuance of any required building permits to the contractor/destination.

One copy of the accepted plans must be on the job and available to all contractors and craftsmen involved with the removal.
 Any changes or alterations of these plans and specifications must be submitted to this Department and in the Field and Building Inspections Department to determine if such changes meet the requirements of State and local laws. Notify this Department at least 72 hours prior to the following required inspections:

- Removal of Tank(s) and Piping
- Sampling
- Final Inspection

Issuance of a permit to operate, b) permanent site closure, is dependent on compliance with accepted plans and all applicable laws and regulations.

***THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS:**

Contact Specialist

UNDERGROUND TANK CLOSURE PLAN

*** Complete according to attached instructions ***

1. Business Name Tosco Facility #11120
 Business Owner Tosco Refining & Marketing
2. Site Address 6900 Dublin Blvd
 city Dublin zip 94568 Phone 510-828-1830
3. Mailing Address 2130 Professional Dr. Suite 100
 city Rosville CA zip 95661 Phone 916-774-3000
4. Land Owner Tosco Refining & Marketing Inc.
 Address 2130 Professional Dr #100 city, state Rosville CA zip 95661
5. Generator name under which tank will be manifested _____
Tosco Refining & Marketing
 EPA I.D. No. under which tank will be manifested CAL000035 356

6. Contractor To be determined American Construction
Address 507 Exchange Ct
City Livermore 94550 Phone 510 447 2484
License Type A Haz #702214 ID#

*Effective January 1, 1992, Business and Professional Code Section 7058.7 requires prime contractors to also hold Hazardous Waste Certification issued by the State Contractors License Board. Indicate that the certificate has been received, in addition, to holding the appropriate contractors license type.

7. Consultant Tait & Assoc Inc
Address 2880 Sunrise Blvd #206
City Rancho Cordova CA 95742 Phone 916-635-2444

8. Contact Person for Investigation
Name Stan Iverson Title Proj Manager
Phone 916-635-2444

9. Number of tanks being closed under this plan 4
Length of piping being removed under this plan 375 lineal feet
Total number of tanks at facility 4

10. State Registered Hazardous Waste Transporters/Facilities (see instructions).

** Underground tanks are hazardous waste and must be handled **
as hazardous waste

a) Product/Residual Sludge/Rinsate Transporter

Name California Hazardous EPA I.D. No. CAD 9836A1598
Hauler License No. 3157 License Exp. Date 3/31/96
Address 3101 S. Main St.
City Santa Ana State CA Zip 92707

b) Product/Residual Sludge/Rinsate Disposal Site

Name Romic EPA I.D. No. CAD009452657
Address 2081 Bay Rd
City E. Palo Alto State CA Zip 94303

c) Tank and Piping Transporter

Name ERICKSON INC. EPA I.D. No. CAD009-406392
Hauler License No. 0019 License Exp. Date 5/31/96
Address 255 PARR BLVD
City RICHMOND State CA Zip 94801

d) Tank and Piping Disposal Site

Name SAME EPA I.D. No. _____
Address _____
City _____ State _____ Zip _____

11. Sample Collector

Name TOUCHSTONE DEVELOPMENTS
Company _____
Address P.O. Box 2554
City SANTA ROSA State CA Zip 95405 Phone (707) 538-8818

12. Laboratory

Name SEQUOIA
Address 680 CHESAPEAKE DR.
City Redwood City State CA Zip 94063
State Certification No. 1210

13. Have tanks or pipes leaked in the past? Yes [] No [] Unknown [X]

If yes, describe. _____

14. Describe methods to be used for rendering tank(s) inert:

dry ice max. 15 lbs/1000 gallon UST

Before tanks are pumped out and inerted, all associated piping must be flushed out into the tanks. All accessible associated piping must then be removed. Inaccessible piping must be permanently plugged.

The Bay Area Air Quality Management District, 415/771-6000, along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of a combustible gas indicator to verify tank inertness. It is the contractor's responsibility to bring a working combustible gas indicator on-site to verify that the tank is inert.

15. Tank History and Sampling Information *** (see instructions) ***

Tank		Material to be sampled (tank contents, soil, groundwater)	Location and Depth of Samples
Capacity	Use History include date last used (estimated)		
12,000	still in use gasoline	soil	20 ft 3 samples of native soil intervals USTs 2 soil sample beneath USTs OR side wall soil samples if gw in excavation. Sample 20' interval below piping and at elbows.
10,000	still in use gasoline	"	
8,000	still in use gasoline	"	
1,000	still in use waste oil	"	
		Groundwater, if encountered	

One soil sample must be collected for every 20 linear feet of piping that is removed. A ground water sample must be collected if any ground water is present in the excavation.

Excavated/Stockpiled Soil	
Stockpiled Soil Volume (Estimated)	<p>Sampling Plan</p> <p>Minimum 2-3 samples / tank</p> <p>1 sample per 20' lineal feet of piping</p> <p>1/20 cu for reuse or</p> <p>1/50 cu for disposal</p>

Stockpiled soil must be placed on bermed plastic and must be completely covered by plastic sheeting.

16. Chemical methods and associated detection limits to be used for analyzing samples

The Tri-Regional Board recommended minimum verification analyses and practical quantitation reporting limits should be followed. See attached Table 2.

Contaminant Sought	EPA, DHS, or Other Sample Preparation Method Number	EPA, DHS, or Other Analysis Method Number	Method Detection Limit
TPH-G		GCFID (5030)	1.0
BTX & E		8020 or 8240	0.005
TPH-D Total lead		GCFID (3550)	1.0
O & G		5520 O&F	50.0
TPH-G TPH-D BTX Metals: Cd, Cr, Pb, Ni, Zn Cl-HC (VOCs) S VOCs			

gasoline
USTs

Waste oil
tank

17. Submit Site Health and Safety Plan (See Instructions)
by Contractor

Name of Insurer To be determined by contractor State Fund

Policy No. 571-95-Unit 000148L
Exp. 10-01-96

19. Submit Plot Plan (See Instructions)
20. Enclose Deposit (See Instructions)-
21. Report any leaks or contamination to this office within 5 days of discovery. The report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report form. (see Instructions)
22. Submit a closure report to this office within 60 days of the tank removal. This report must contain all the information listed in item 22 of the instructions.

I declare that to the best of my knowledge and belief the statements and information provided above are correct and true.

I understand that information in addition to that provided above may be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin on this project until this plan is approved.

I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personal health and safety. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

Signature of Contractor

Name (please type) Terri Stack

Signature Terri Stack

Date 1/29/96

Signature of Site Owner or Operator

Name (please type) Stanley Iverson

Signature Stanley Iverson

Date 10/3/95

rev 3/92

Post-it® Fax Note	7671	Date	# of pages ▶
To	<u>EVA Chu</u>	From	<u>Terri Stack</u>
Co./Dept.	<u>Haz</u>	Co.	
Phone #		Phone #	<u>447-2484</u>
Fax #		Fax #	<u>337-9336</u>

01-29-1996 10:33AM

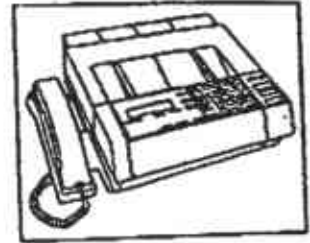
510 357 9555



ERICKSON Inc.

255 Parr Boulevard / Richmond, CA 94801 / (510) 235-1393 / Fax (510) 235-3709

Facsimile Cover Sheet



Date: 8/2

Please deliver the following pages to:

Name: JEFF HESS Fax No.: 256-8998

Company name / location: ITSI

Number of pages following cover sheet: 6 Hard copy to follow? Yes No

From: DAVE SATO Phone No.: _____

Subject: _____

Notes: _____

If you do not receive all pages sent, please contact us as soon as possible to re-send the fax.

Thank You!



DAY OR NIGHT
TELEPHONE
(510) 235-1393

CERTIFICATE CERTIFIED SERVICES COMPANY

255 Parr Boulevard • Richmond, California 94801

NO. 23822

CUSTOMER
S. P. OIL
JOB NO.
967911

FOR: ERICKSON. INC. TANK NO. 17565

LOCATION: RICHMOND DATE: 96/04/03 TIME: 13:07

TEST METHOD VISUAL GASTECH/1314 SMPN LAST PRODUCT UG

This is to certify that I have personally determined that this tank is in accordance with the American Petroleum Institute and have found the condition to be in accordance with its assigned designation. This certificate is based on conditions existing at the time the inspection herein set forth was completed and is issued subject to compliance with all qualifications and instructions.

TANK SIZE 3000 GALLON TANK CONDITION SAFE FOR FIRE

REMARKS: OXYGEN 20.9% LOWER EXPLOSIVE LIMIT LESS THAN 0.1%
ERICKSON. INC. HEREBY CERTIFIES THAT THE ABOVE NUMBERED TANK HAS BEEN
PROCESSED, AND THEREFORE DESTROYED AT OUR PERMITTED HAZARDOUS
FACILITY.
ERICKSON. INC. HAS THE APPROPRIATE PERMITS FOR, AND HAS ACCEPTED THE TANK
ISSUED TO US FOR PROCESSING.

In the event of any physical or atmospheric changes affecting the gas-free conditions of the above tanks, or if in any doubt, immediately stop all hot work and contact the undersigned. This permit is valid for 24 hours if no physical or atmospheric changes occur.

STANDARD SAFETY DESIGNATION

SAFE FOR MEN: Means that in the compartment or space so designated (a) The oxygen content of the atmosphere is at least 19.5 percent by volume; and that (b) Toxic materials in the atmosphere are within permissible concentrations; and (c) In the judgment of the Inspector, the residues are not capable of producing toxic materials under existing atmospheric conditions while maintained as directed on the Inspector's certificate.

SAFE FOR FIRE: Means that in the compartment so designated (a) The concentration of flammable materials in the atmosphere is below 10 percent of the lower explosive limit; and that (b) In the judgment of the Inspector, the residues are not capable of producing a higher concentration that permitted under existing atmospheric conditions in the presence of fire and while maintained as directed on the Inspector's certificate, and further, (c) All adjacent spaces have either been cleaned sufficiently to prevent the spread of fire, are satisfactorily inerted, or in the case of fuel tanks, have been treated as deemed necessary by the Inspector.

The undersigned representative acknowledges receipt of this certificate and understands the conditions and limitations under which it was issued.

<u>[Signature]</u>	TITLE	<u>[Signature]</u>	INSPECTOR
REPRESENTATIVE			

State of California - Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-96)
Please print or type Form designed for use on 8 1/2 (12 pitch) typewriter.

LOW 00 Y

See Instructions on back of page 6

967911

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1

Information in the shaded areas is not required by Federal law.

CIAA00000000002224981164

State Manifest Document Number 8898

3. Generator's Name and Mailing Address
Tosco Refining + marketing (site 6400 Dublin)
2130 Professional On the 100 Roseville CA 95061

4. Generator's Phone 916 774 3000

5. Transporter 1 Company Name Erickson RNC

6. US EPA ID Number

CIA100094663912

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address
Erickson, Inc.
115 Park Blvd.
Roseville, CA 95803

10. US EPA ID Number

CIA100094663912

State Generator's ID

State Transporter's ID

State Transporter's Phone 510-235-1393

State Facility's ID

State Facility's Phone (510)235-1393

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

UNRECORDED Hazardous Waste Solid
Waste Empty Storage Tank. 0101 T F 2900 F

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

15. Additional Descriptions for Materials Listed Above

Qty. 1 Empty Storage Tank(s) #17567
Tank(s) have been inerted with 15 lbs. Dry Ice Per 1000 Gallon Capacity.

16. Special Handling Instructions and Additional Information
Keep away from sources of ignition. Always wear hardhats when working around tanks. Call 24 Hr. Contact Name Tosco Facility & Phone 916-774-3000

17. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name Harold Erickson Signature [Signature] Month Day Year 014031916

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name Robert Noyes Signature [Signature] Month Day Year 014031916

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name DAVID STRO Signature [Signature] Month Day Year 0403916

DO NOT WRITE BELOW THIS LINE.

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802. WITHIN CALIFORNIA, CALL 1-800-852-7350

GENERATOR FACILITY

DAY OR NIGHT
TELEPHONE
(510) 235-1393

CERTIFIED SERVICES COMPANY

25250 Boulevard • Richmond, California 94801

NO. 26823
CUSTOMER B.P. OIL
JOB NO. 967911

FOR: ERICKSON, INC. TANK NO. 17566

LOCATION: RICHMOND DATE: 96/04/09 TIME: 13:07

TEST METHOD VISUAL GASTECH/1314 SHPN LAST PRODUCT UG

This is to certify that I have personally determined that this tank is in accordance with the American Petroleum Institute and have found the condition to be in accordance with its assigned designation. This certificate is based on conditions existing at the time the inspection herein set forth was completed and is issued subject to compliance with all qualifications and instructions.

TANK SIZE 12000 GALLON TANK CONDITION SAFE FOR FIRE

REMARKS: OXYGEN 20.9% LOWER EXPLOSIVE LIMIT LESS THAN 0.1%
ERICKSON, INC. HEREBY CERTIFIES THAT THE ABOVE NUMBERED TANK HAS BEEN
FULLY PROCESSED, AND THEREFORE DESTROYED AT OUR PERMITTED HAZARDOUS
WASTE FACILITY.
ERICKSON, INC. HAS THE APPROPRIATE PERMITS FOR, AND HAS ACCEPTED THE TANK
RETURNED TO US FOR PROCESSING.

In the event of any physical or atmospheric changes affecting the gas-free conditions of the above tanks, or if in any doubt, immediately stop all hot work and contact the undersigned. This permit is valid for 24 hours if no physical or atmospheric changes occur.

STANDARD SAFETY DESIGNATION

SAFE FOR MEN: Means that in the compartment or space so designated (a) The oxygen content of the atmosphere is at least 19.5 percent by volume; and that (b) Toxic materials in the atmosphere are within permissible concentrations; and (c) In the judgment of the Inspector, the residues are not capable of producing toxic materials under existing atmospheric conditions while maintained as directed on the Inspector's certificate.

SAFE FOR FIRE: Means that in the compartment so designated (a) The concentration of flammable materials in the atmosphere is below 10 percent of the lower explosive limit; and that (b) In the judgment of the Inspector, the residues are not capable of producing a higher concentration than permitted under existing atmospheric conditions in the presence of fire and while maintained as directed on the Inspector's certificate, and further, (c) All adjacent spaces have either been cleaned sufficiently to prevent the spread of fire, are satisfactorily inerted, or in the case of fuel tanks, have been treated as deemed necessary by the Inspector.

The undersigned representative acknowledges receipt of this certificate and understands the conditions and limitations under

<u>[Signature]</u>	<u>[Signature]</u>
REPRESENTATIVE	INSPECTOR

IF 06

See instructions on back of page 6

967911

Department of Toxic Substances Control
Sacramento, California

California Environmental Protection Agency
Approved OMB No. 2050-0039 (Expires 9-30-96)
Please print or type Form designed for use on office (12 pitch) typewriter.

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page

Information in the shaded areas is not required by Federal law.

CA0001000122498163

1 of 1

3. Generator's Name and Mailing Address
Tosco Refining & Marketing
2130 Professional Dr. #100
Roseville, CA

Site 6400 Dublin
Dublin CA
and Dougherty Rd

15. State Manifest Document Number
958

4. Generator's Phone
916 274-3000 - 956611

5. Transporter 1 Company Name
ERICKSON INC

6. US EPA ID Number
CA00109466392

16. State Transporter's ID
N/A

17. Transporter's Phone
510-235-1395

7. Transporter 2 Company Name

8. US EPA ID Number

18. State Transporter's ID

19. Transporter's Phone

9. Designated Facility Name and Site Address
ERICKSON, INC.
250 West 8th St.
Berkeley, CA 94701

10. US EPA ID Number
CA000109466392

20. State Facility's ID
CA000109466392

21. Facility's Phone
(510)235-1395

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

12. Containers No. Type

13. Total Quantity

14. Unit wt./Vol

15. Waste

Empty Storage Tank

001 TP

2075

512

EPA Code
NA

Empty Storage Tank

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER AT 1-800-424-6002. WITHIN CALIFORNIA, CALL 1-800-553-8522.

12. Additional Descriptions for Materials Listed Above
Qty: 1 Empty Storage Tank(s) #17...
Tank(s) have been inerted with 15...
lbs. Dry Ice Per 1000 Gallon Capacity

13. Special Handling Instructions and Additional Information
Keep away from sources of ignition. Always wear handhats when working around...
Call Mr. Contact Name: Tosco Facility & Phone 916-274-3000

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

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: Harold... Signature: [Signature] Month: 04 Day: 10 Year: 1996

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Henrique Lopez Signature: [Signature] Month: 04 Day: 10 Year: 1996

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: DAVID SATO Signature: DAVID SATO Month: 04 Day: 03 Year: 1996

DO NOT WRITE BELOW THIS LINE.

DAY OR NIGHT
TELEPHONE
(510) 235-1393

CERTIFICATE CERTIFIED SERVICES COMPANY

255 Parr Boulevard • Richmond, California 94801

NO. 23824

CUSTOMER
B.P. OIL
JOB NO.
967911

FOR: ERICKSON, INC. TANK NO. 17567

LOCATION: RICHMOND DATE: 96/04/09 TIME: 13:07

TEST METHOD VISUAL GASTECH/1314 SMPN LAST PRODUCT WO

This is to certify that I have personally determined that this tank is in accordance with the American Petroleum Institute and have found the condition to be in accordance with its assigned designation. This certificate is based on conditions existing at the time the inspection herein set forth was completed and is issued subject to compliance with all qualifications and instructions.

TANK SIZE 500 GALLON TANK CONDITION: SAFE FOR FIRE

REMARKS: OXYGEN 20.9% LOWER EXPLOSIVE LIMIT LESS THAN 0.1%
ERICKSON, INC. HEREBY CERTIFIES THAT THE ABOVE NUMBERED TANK HAS BEEN
PROCESSED, AND THEREFORE DESTROYED AT OUR PERMITTED HAZARDOUS
WASTE FACILITY.
ERICKSON, INC. HAS THE APPROPRIATE PERMITS FOR, AND HAS ACCEPTED THE TANK
RETURNED TO US FOR PROCESSING.

In the event of any physical or atmospheric changes affecting the gas-free conditions of the above tanks, or if in any doubt, immediately stop all hot work and contact the undersigned. This permit is valid for 24 hours if no physical or atmospheric changes occur.

STANDARD SAFETY DESIGNATION

SAFE FOR MEN: Means that in the compartment or space so designated (a) The oxygen content of the atmosphere is at least 19.5 percent by volume; and that (b) Toxic materials in the atmosphere are within permissible concentrations; and (c) In the judgment of the Inspector, the residues are not capable of producing toxic materials under existing atmospheric conditions while maintained as directed on the Inspector's certificate.

SAFE FOR FIRE: Means that in the compartment so designated (a) The concentration of flammable materials in the atmosphere is below 10 percent of the lower explosive limit; and that (b) In the judgment of the Inspector, the residues are not capable of producing a higher concentration that permitted under existing atmospheric conditions in the presence of fire and while maintained as directed on the Inspector's certificate, and further, (c) All adjacent spaces have either been cleaned sufficiently to prevent the spread of fire, are satisfactorily inerted, or in the case of fuel tanks, have been treated as deemed necessary by the Inspector.

The undersigned representative acknowledges receipt of this certificate and understands the conditions and limitations under which it was issued.

REPRESENTATIVE <u>[Signature]</u>	TITLE	INSPECTOR <u>[Signature]</u>
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California Environmental Protection Agency
Approved OMB No 2050-0039 (Expires 9-30-96)
Form design for use on 48 1/2 (12-pitch) typewriter.

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

967911

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-474-8802 WITHIN CALIFORNIA, CALL 1-800-857-7350

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CA A01010000022491811 EIO
 Manifest Document No. 101
 2. Page 1
 Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address: **TESCO REFUELING & MARKETING SITE**
 2130 PROFESSIONAL DR. 6400 OUBLW ST
 ROSEVILLE CA 95664 OUBLW CA

4. Generator's Phone: 916 774-3000

5. State Manifest Document Number: 9585353

6. US EPA ID Number: CA A0101019466392

7. Transporter Company Name: **ERICKSON INC.**

8. US EPA ID Number: CA A0101019466392

9. Designated Facility Name and Site Address: **ERICKSON INC.**
 10. US EPA ID Number: CA A0101019466392

11. State Manifest Document Number: 9585353

12. State Generator's ID: 9585353

13. State Transporter's ID: N/A

14. Transporter's Phone: 510-235-1393

15. State Facility's ID: CA A0101019466392

16. Facility's Phone: (510)235-1393

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers	13. Total	14. Unit	L Waste Code
	No.	Quantity	Wt/Vol	
a. Empty Storage Tank	102	14645		State: 51Z EPA/Other: NONE
b.				State: EPA/Other:
c.				State: EPA/Other:
d.				State: EPA/Other:

12. Containers: 102, Type: T, 13. Total Quantity: 14645, 14. Unit Wt/Vol: 14645, L Waste Code: 51Z, EPA/Other: NONE

1. Additional Descriptions for Materials Listed Above: Qty. 02 Empty Storage Tank(s) have been inserted with 15 lbs. Dry Ice Per 1000 Gallon Capacity

2. Handling Codes for Wastes Listed Above: 99

15. Special Handling Instructions and Additional Information: Stay away from sources of ignition. Always wear hardhats when working at cases. Contact Name: TESCO FACILITY, Phone: 916 774-3000

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: **Harold Erickson** Signature: *[Signature]* Month: 04, Day: 10, Year: 1996

17. Transporter 1 Acknowledgement of Receipt of Materials: Printed/Typed Name: **CHARLEY ELMORE** Signature: *[Signature]* Month: 04, Day: 03, Year: 1996

18. Transporter 2 Acknowledgement of Receipt of Materials: Printed/Typed Name: Signature: Month: Day: Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name: **DAVID SATO** Signature: *[Signature]* Month: 04, Day: 03, Year: 1996

DO NOT WRITE BELOW THIS UNE.

DAY OR NIGHT
TELEPHONE
510: 235-1393

CERTIFICATE CERTIFIED SERVICES COMPANY

255 Parr Boulevard • Richmond, California 94801

NO. 23819

CUSTOMER
E.P. OIL
JOB NO.
967911

FOR: ERICKSON, INC. TANK NO. 17564

LOCATION: RICHMOND DATE: 96/04/08 TIME: 09:55

TEST METHOD VISUAL GASTECH/1314 SMPN LAST PRODUCT UG

This is to certify that I have personally determined that this tank is in accordance with the American Petroleum Institute and have found the condition to be in accordance with its assigned designation. This certificate is based on conditions existing at the time the inspection herein set forth was completed and is issued subject to compliance with all qualifications and instructions.

TANK SIZE 10000 GALLON TANK CONDITION SAFE FOR FIRE

REMARKS: OXYGEN 20.9% LOWER EXPLOSIVE LIMIT LESS THAN 0.1%
INC. HEREBY CERTIFIES THAT THE ABOVE NUMBERED TANK HAS BEEN
PROCESSED, AND THEREFORE DESTROYED AT OUR PERMITTED HAZARDOUS
FACILITY.
INC. HAS THE APPROPRIATE PERMITS FOR, AND HAS ACCEPTED THE TANK
TO US FOR PROCESSING.

In the event of any physical or atmospheric changes affecting the gas-free conditions of the above tanks, or if in any doubt, immediately stop all hot work and contact the undersigned. This permit is valid for 24 hours if no physical or atmospheric changes occur.

STANDARD SAFETY DESIGNATION

SAFE FOR MEN: Means that in the compartment or space so designated (a) The oxygen content of the atmosphere is at least 19.5 percent by volume; and that (b) Toxic materials in the atmosphere are within permissible concentrations; and (c) In the judgment of the Inspector, the residues are not capable of producing toxic materials under existing atmospheric conditions while maintained as directed on the Inspector's certificate.

SAFE FOR FIRE: Means that in the compartment so designated (a) The concentration of flammable materials in the atmosphere is below 10 percent of the lower explosive limit; and that (b) In the judgment of the Inspector, the residues are not capable of producing a higher concentration that permitted under existing atmospheric conditions in the presence of fire and while maintained as directed on the Inspector's certificate, and further, (c) All adjacent spaces have either been cleaned sufficiently to prevent the spread of fire, are satisfactorily inerted, or in the case of fuel tanks, have been treated as deemed necessary by the Inspector.

The undersigned representative acknowledges receipt of this certificate and understands the conditions and limitations under which it was issued.

[Signature]
REPRESENTATIVE

TITLE

[Signature]
INSPECTOR



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006501

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP STATION 11120
 c. Address: 2130 PROFESSIONAL DR #180 Address: 6400 DUBLIN BLVD
Rosville CA 95661 DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: SOIL WITH PIANO CARBONS Quantity:

1	K	Y	1	7
---	---	---	---	---

 Units: _____
 TYPE: _____
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

MARC DONNOT Marc Donnot 061073
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>BFI</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: _____
b. Address: <u>TASCO RD</u> <u>LIVERMORE CA</u>	k. Phone No.: _____	l. Truck No.: _____	m. Vehicle License No./State: _____
c. Driver Name/Title: <u>Her</u>	e. Truck No.: <u>633</u>	n. _____	
d. Phone No.: _____	f. Vehicle License No./State: _____	Acknowledgement of Receipt of Materials: _____	
g. <u>Her</u> <u>061076</u>	Driver Signature Shipment Date	Driver Signature Shipment Date	

Section III DESTINATION (Generator completes a-d; destination site completes e-l)

a. Site Name: _____ c. Phone No.: _____
 b. Physical Address: _____ d. Mailing Address: _____
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
Her 061076
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV
If waste is NOT asbestos waste, complete only Sections I, II and III

No. 006502

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: OP STATION 1120
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBLIN BLVD
ROSVILLE CA 95661 DUBLIN CA
 e. Phone No.: 916 774 3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: SOIL w/HYDRO k. Quantity:

	16	Y		1	✓
--	----	---	--	---	---

 Units: _____ No.: _____ TYPE: _____

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

MARC DONNOIT Marc Donnoit 061096
 Generator Authorized Agent Name Signature Shipment Date

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>BFI</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: _____
b. Address: <u>WASCO RD</u> <u>LIVERMORE CA</u>	k. Phone No.: _____	l. Truck No.: _____	m. Vehicle License No./State: _____
c. Driver Name/Title: <u>HW</u>	e. Truck No.: <u>623</u>	n. Driver Signature: _____	Shipment Date: _____
d. Phone No.: _____	f. Vehicle License No./State: _____	Acknowledgement of Receipt of Materials: _____	
g. Driver Signature: <u>HW</u>	Shipment Date: <u>061096</u>	Shipment Date: _____	

Section III DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: _____ c. Phone No.: _____
 b. Physical Address: _____ d. Mailing Address: _____
 e. Discrepancy Indication Space: _____

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

f. Name of Authorized Agent: _____ Signature: _____ Receipt Date: 061096

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type: _____ Operator's Signature: _____ Date: _____

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III

No. 006508

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tasco Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional Dr #180 d. Address: 6400 Dublin Blvd.
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.:

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
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 Containers: _____
 j. Description of Waste: Soil w/ Hydro Carbon k. Quantity:

		16	Y
--	--	----	---

 Units:

		1	T
--	--	---	---

 No.: _____ TYPE: _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

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

Generator Authorized Agent Name: Mark Walsh Signature: _____ Shipment Date: 06/09/96

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-j)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct.
Livermore CA 94550.
 c. Driver Name/Title: _____
 d. Phone No.: 510-447-7184 e. Truck No.: 636
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____
 Driver Signature: _____ Shipment Date: 06/10/96

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____
 Driver Signature: _____ Shipment Date: _____

Section III DESTINATION (Generator completes a-d; destination site completes e-l)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco Rd. d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____ Signature: _____ Receipt Date: 06/10/96

Section IV ASBESTOS (Generator completes a-d, f; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006509

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tasco Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional DR #180 Address: 6400 Dublin Blvd.
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
 i. BFI WASTE CODE: CA 405 042996 04276 Containers: _____
 j. Description of Waste: soil w/hydro carbon k. Quantity: 16 Units: Y No.: 1 TYPE: T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Generator Authorized Agent Name: _____ Signature: [Signature] Shipment Date: 06/09/96

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-i)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct.
Livermore CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510-447-7484 e. Truck No.: 630
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____
 g. Driver Signature: [Signature] Shipment Date: 06/12/96

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____
 n. Driver Signature: _____ Shipment Date: _____

Section III DESTINATION (Generator completes a-c; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco rd. d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____ Signature: [Signature] Receipt Date: 06/10/96

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e-f)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006510

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional DR #180 d. Address: 6400 Dublin Blvd
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: SOIL w/ Hydro Carbon k. Quantity:

16	1	T
----	---	---

 Units:

1	T
---	---

 No.: _____ TYPE: _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y	- CUBIC YARDS
O	- OTHER

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

Generator Authorized Agent Name: _____ Signature: [Signature] Shipment Date: 06/10/96

Section II TRANSPORTER (Generator, Transporter I, and Transporter II complete this section)

TRANSPORTER I				TRANSPORTER II			
a. Name:	<u>American Construction</u>			h. Name:	_____		
b. Address:	<u>567 Exchange Ct.</u> <u>Livermore CA 94550</u>			i. Address:	_____		
c. Driver Name/Title:	_____			j. Driver Name/Title:	_____		
d. Phone No.:	<u>510-447-7484</u>	e. Truck No.:	<u>636</u>	k. Phone No.:	_____	l. Truck No.:	_____
f. Vehicle License No./State:	_____			m. Vehicle License No./State:	_____		
Acknowledgement of Receipt of Materials:				Acknowledgement of Receipt of Materials:			
g. Driver Signature:	<u>[Signature]</u>		Shipment Date:	<u>06/10/96</u>	n. Driver Signature:	_____	

Section III DESTINATION (Generator, Operator, and Destination site completes this section)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco rd
Livermore CA d. Mailing Address: _____
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: _____ Signature: [Signature] Receipt Date: 06/10/96

Section IV ASBESTOS (Generator, Operator, and Operator completes this section)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006511

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional DR #180 d. Address: 6400 Dublin Blvd
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	4	0	5	0	4	2	9	9	6
----	---	---	---	---	---	---	---	---	---

0	4	2	7	6
---	---	---	---	---

 Containers: _____
 j. Description of Waste: Soil / w hydro Carbon k. Quantity:

				1	6
--	--	--	--	---	---

 Units:

Y

 No.:

1

 TYPE:

T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG
	or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y	- CUBIC YARDS
O	- OTHER

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

Michael E. ...
 Generator Authorized Agent Name Signature

06/16/96
 Shipment Date

Section II: TRANSPORTER (Generator completes a-4; Transporter I completes a-g; Transporter II completes h-n)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct.
Livermore CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510-447-7884 e. Truck No.: 6306
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
Kel ...

0	6	1	6	9	6
---	---	---	---	---	---

 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:

--	--	--	--	--	--

 Driver Signature Shipment Date

Section III: DESTINATION (Carrier completes a-c; Generator completes d-f; Receiver completes g-i)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco rd d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____

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

f. _____

0	6	1	6	9	6
---	---	---	---	---	---

 Name of Authorized Agent Signature Receipt Date

Section IV: ASBESTOS (Generator completes a-c; Operator completes d-f)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006512

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional DR #180 d. Address: 6400 Dublin Blvd
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.:

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

LA	405	042996	04276
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 Containers

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

j. Description of Waste: _____ k. Quantity

1	6
---	---

 Units

Y

 No.

1

 TYPE

T

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

UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y	- CUBIC YARDS
O	- OTHER

Generator Authorized Agent Name _____ Signature _____ Shipment Date 06/10/96

Section II TRANSPORTER (Generator completes I, II, III; Transporter completes IV, V)

TRANSPORTER I	TRANSPORTER II
a. Name: <u>American Construction</u>	h. Name: _____
b. Address: <u>567 Exchange Ct</u> <u>Livermore CA 94550</u>	i. Address: _____
c. Driver Name/Title: <u>[Signature]</u>	j. Driver Name/Title: _____
d. Phone No.: <u>510-447-7884</u> e. Truck No.: <u>636</u>	k. Phone No.: _____ l. Truck No.: _____
f. Vehicle License No./State: _____	m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.	
g. <u>[Signature]</u> <u>06/10/96</u>	n. _____ <u>06/10/96</u>
Driver Signature	Driver Signature
Shipment Date	Shipment Date

Section III DESTINATION (Generator completes I, II, III, IV; Shipper completes V)

a. Site Name: B.F.I c. Phone No.: _____
 b. Physical Address: Vasco rd d. Mailing Address _____
Livermore CA

e. Discrepancy Indication Space: _____

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

f. Name of Authorized Agent _____ Signature [Signature] 06/10/96 Receipt Date

Section IV ASBESTOS (Generator completes I, II, III, IV; Shipper completes V)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title _____ Print/Type _____ Operator's Signature _____ Date _____

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006513

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tasca Marketing b. Generating Location: BP Station
 c. Address # 230 Professional Dr #180 d. Address: Dublin Blvd
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.:

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	905	042996	04276
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 Containers

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

 j. Description of Waste: Soil w/ Hydro Carbon k. Quantity

	16	4	1	T
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 Units No. TYPE

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

Generator Authorized Agent Name

Signature

06/09/96

Shipment Date

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-i)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct.
Livermore CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510-477-7484 e. Truck No.: 636
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. Driver Signature 06/10/96 Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. Driver Signature _____ Shipment Date

Section III DESTINATION (Generator completes a-c; Destination site completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco rd d. Mailing Address _____
Livermore CA

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent _____ Signature 06/10/96 Receipt Date

Section IV ASBESTOS (Generator completes a-d; Operator completes e-g)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type Operator's Signature _____ Date

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006514

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: Tasco Marketing b. Generating Location: BP Station
 c. Address: 230 Professional DR #180 d. Address: Dublin Blvd
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: Soil w/ Hydro Carbons k. Quantity:

	1	6	4
--	---	---	---

 Units:

	1		
--	---	--	--

 No.:

	1		
--	---	--	--

 TYPE:

	T		
--	---	--	--

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

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

UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Generator Authorized Agent Name: _____ Signature: _____ Shipment Date: 06/09/96

Section II: TRANSPORTER (Generator completes a and b; Transporter I completes c and d; Transporter II completes e and f)

TRANSPORTER I				TRANSPORTER II				
a. Name:	<u>American Construction</u>			h. Name:	_____			
b. Address:	<u>567 Exchange Ct.</u> <u>Livermore CA 94550</u>			i. Address:	_____			
c. Driver Name/Title:	_____			j. Driver Name/Title:	_____			
d. Phone No.:	<u>510-447-7481</u>	e. Truck No.:	<u>636</u>	k. Phone No.:	_____		l. Truck No.:	_____
f. Vehicle License No./State:	_____			m. Vehicle License No./State:	_____			
Acknowledgement of Receipt of Materials:				Acknowledgement of Receipt of Materials:				
g. Driver Signature:	<u>06/09/96</u>			n. Driver Signature:	_____			
Shipment Date				Shipment Date				

Section III: DESTINATION (Generator completes a and b; Destination completes c and d)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vesco rd. d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____ Signature: _____ Receipt Date: 06/10/96

Section IV: ASBESTOS (Generator completes a and b; Asbestos completes c and d)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 006515

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tasca Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional Dr #180 d. Address: Dublin Blvd
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
----	-----	--------	-------

 Containers _____
 j. Description of Waste: Soil w/ Hydro Carbons k. Quantity

	16	1	1
--	----	---	---

 Units No. TYPE
 TYPE: DM - METAL DRUM, DP - PLASTIC DRUM, B - BAG, BA - 6 MIL PLASTIC BAG or WRAP, T - TRUCK, O - OTHER

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

Generator Authorized Agent Name _____ Signature _____ Shipment Date 061096
 UNITS: P - POUNDS, Y - YARDS, M³ - CUBIC METERS, Y³ - CUBIC YARDS, O - OTHER

Section II TRANSPORTER (Generator completes a-c; Transporter I completes d-g; Transporter II completes h-n)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct.
Livermore CA 94550
 c. Driver Name/Title: A
 d. Phone No.: 510-447-7489 e. Truck No.: 636
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. Driver Signature _____ Shipment Date 061096

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. Driver Signature _____ Shipment Date _____

Section III DESTINATION (Generator completes a-c; Destination also completes a-c)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco rd. d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____

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

f. Name of Authorized Agent _____ Signature _____ Receipt Date 061096

Section IV ASBESTOS (Generator also completes a-c; Operator completes a-c)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006516

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tasco Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional Dr #180 d. Address: Dublin Blvd
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
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 Containers: _____
 j. Description of Waste: Soil w/ Hydro Carbons k. Quantity:

16	4	1	T
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 Units: _____ No.: _____ TYPE: _____

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Generator Authorized Agent Name: _____ Signature: _____ Shipment Date: 06/10/96

Section II TRANSPORTER (Generator completes a-b; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct.
Livermore CA 94530
 c. Driver Name/Title: _____
 d. Phone No.: 510-447-7484 e. Truck No.: 636
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____
 g. Driver Signature: _____ Shipment Date: 06/10/96

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____
 n. Driver Signature: _____ Shipment Date: _____

Section III DESTINATION (Generator completes a-c; Receiver completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco rd d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: _____ Signature: _____ Receipt Date: 06/10/96

Section IV ASBESTOS (Generator completes a-c; Operator completes d-f)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006517

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: ATASCO Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional Dr #180 d. Address: Dublin Blvd
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-714-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996
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04276	
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 Containers: _____

j. Description of Waste: Soil w/ Hydro Carbons k. Quantity:

		16	
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 Units: No.:

1	
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 TYPE:

T	
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TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y	- CUBIC YARDS
O	- OTHER

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

061096

Generator Authorized Agent Name _____ Signature _____ Shipment Date _____

Section II TRANSPORTER (Generator completes a-g; Transporter I completes e-g; Transporter II completes h-i)

TRANSPORTER I

a. Name: American Construction
 b. Address: 367 Exchange Ct.
Livermore CA 94530
 c. Driver Name/Title: _____
 d. Phone No.: 510-947-7484 e. Truck No.: 636
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____
 g. Driver Signature: _____ Shipment Date:

061096

TRANSPORTER II

h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____
 n. Driver Signature: _____ Shipment Date:

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Section III DESTINATION (Generator completes a-c; Destination site completes e-f)

a. Site Name: BFI. c. Phone No.: _____
 b. Physical Address: Vasco rd. d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____

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

f. Name of Authorized Agent: _____ Signature: _____ Receipt Date:

061096

Section IV ASBESTOS (Generator completes a-d; Operator completes e-f)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type _____ Operator's Signature _____ Date

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f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006518

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional Dr #180 d. Address: Dublin Blvd
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	0429	96
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04276

 Containers
 j. Description of Waste: Soil w/ Hydro Carbon k. Quantity:

16

 Units:

Y

 No.:

1

 TYPE:

T

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

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Generator Authorized Agent Name: _____ Signature: _____ Shipment Date: 06/09/96

Section II TRANSPORTER (Generator completes I-a through I-h; transporter I completes I-i through I-l; transporter II completes I-m through I-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>American Construction</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: _____
b. Address: <u>567 Exchange Ct.</u>	i. Address: _____	k. Phone No.: _____	l. Truck No.: _____
<u>Livermore CA 94530</u>		m. Vehicle License No./State: _____	
c. Driver Name/Title: _____		Acknowledgement of Receipt of Materials: _____	
d. Phone No.: <u>510-447-7484</u>	e. Truck No.: <u>636</u>	n. _____	
f. Vehicle License No./State: _____		Driver Signature: _____	Shipment Date: _____
g. Driver Signature: _____	Shipment Date: <u>06/09/96</u>		

Section III DESTINATION (Generator completes I-a through I-h; destination site completes I-i through I-l)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasconia rd d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: _____ Signature: _____ Receipt Date: 06/09/96

Section IV ASBESTOS (Generator completes I-a through I-h; operator completes I-i through I-l)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006519

Section I. GENERATOR (Generator completes all of Section I)

a. Generator Name: Tasco Marketing b. Generating Location: BP Station
c. Address: 2130 Professional Dr #180 Address: Dublin Blvd
Roseville CA 95661 Dublin CA

e. Phone No.: 916-774-3000 f. Phone No.: _____
If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
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 Containers: _____
j. Description of Waste: Soil w/ hydro Carbon k. Quantity:

		16	
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 Units: No.:

	1	
--	---	--

 TYPE:

	T	
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TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Generator Authorized Agent Name: _____ Signature: _____ Shipment Date: 06/09/06

Section II. TRANSPORTER (Generator completes a-d; transporter I completes e-h; transporter II completes i-m)

TRANSPORTER I
a. Name: American Construction
b. Address: 567 Exchange Ct
Livermore CA 94530
c. Driver Name/Title: _____
d. Phone No.: 510-447-7486 e. Truck No.: 626
f. Vehicle License No./State: _____
g. Driver Signature: _____ Shipment Date: 16/10/06

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ i. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials: _____
n. Driver Signature: _____ Shipment Date: _____

Section III. DESTINATION (Generator completes a-c; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
b. Physical Address: Vasco rd d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: Apache Signature: _____ Receipt Date: 06/09/06

Section IV. ASBESTOS (Generator completes a-d)

a. Operator's Name: _____ b. Operator's Phone No.: _____
c. Operator's Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type: _____ Operator's Signature: _____ Date: _____

f. Name and Address of Responsible Agency: _____
g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006520

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tosco Marketing b. Generating Location: BP Station
 c. Address: 2130 Roseville Dr #180 d. Address: 6400 Dublin Blvd
Roseville, CA 95661 Dublin, CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI Waste Code: CA 405 042 996 042 76 Containers: _____
 j. Description of Waste: Sol w/ Hydrocarbons k. Quantity: _____ Units: Y No.: 1 TYPE: T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

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

WALT OWE Walter Owe 060996
 Generator Authorized Agent Name Signature Shipment Date

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z; Transporter I completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z; Transporter II completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct.
Livermore, CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: _____ e. Truck No.: 636
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
 g. [Signature] _____
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z; Operator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD
LIVERMORE, CA d. Mailing Address: _____

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. _____ [Signature] 07/16
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z; Operator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006521

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION
 c. Address: 2130 PROFESSIONAL DR #180 d. Address: 6400 DUBLIN BLVD
ROSEVILLE, CA. 95661 DUBLIN, CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE CA405042996 04276 Containers
 j. Description of Waste: Soil w/ HYDROCARBON k. Quantity 16 Units 4 No. 1 TYPE T
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

WALT ORP Walt Orp 0609916
 Generator Authorized Agent Name Signature Shipment Date

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator completes a-c; Transporter I completes e-g; Transporter II completes h-j)

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 Exchange Ct.
LIVERMORE, CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: _____ e. Truck No.: 037
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
Fred Johnson 06/13/96
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:

 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-c; Destination site completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE, CA
 e. Discrepancy Indication Space: _____

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

f. _____ 6/13/96
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-c; Operator completes d-f)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006522

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional DR #180 d. Address: 6400 Dublin BLVD
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-300 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	4105	042996	04276
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 Containers _____
 j. Description of Waste: Soil w/ Hydro Carbon k. Quantity

		16	Y
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 Units

	1		
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 No.

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 TYPE

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TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Generator Authorized Agent Name: Tina Wall Signature _____ Shipment Date: 06/29/96

Section II TRANSPORTER (Generator completes I and II; Transporter I completes I-9; Transporter II completes I-11)

TRANSPORTER I		TRANSPORTER II	
a. Name:	<u>American Construction</u>	h. Name:	_____
b. Address:	<u>567 Exchange Ct.</u> <u>Livermore CA 94550</u>	i. Address:	_____
c. Driver Name/Title:	_____	j. Driver Name/Title:	_____
d. Phone No.:	<u>510-247-7184</u> PRINT/TYPE	k. Phone No.:	_____ PRINT/TYPE
e. Truck No.:	<u>636</u>	l. Truck No.:	_____
f. Vehicle License No./State:	_____	m. Vehicle License No./State:	_____
Acknowledgement of Receipt of Materials. <u>Tina Wall</u>		Acknowledgement of Receipt of Materials.	
g. Driver Signature	<u>Tina Wall</u>	n. Driver Signature	_____
Shipment Date	<u>06/29/96</u>	Shipment Date	_____

Section III DESTINATION (Generator completes I and II; Destination site completes I-11)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD.
LIVERMORE d. Mailing Address: _____
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: _____ Signature: [Signature] Receipt Date: 06/29/96

Section IV ASBESTOS (Generator completes I and II; Operator completes I-12)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
 e. Operator's Name & Title: _____ Print/Type _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006523

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional DR #180 d. Address: 6400 Dublin Blvd
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.:

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA 405 042996 04276

Containers

- TYPE
- DM - METAL DRUM
 - DP - PLASTIC DRUM
 - B - BAG
 - BA - 6 MIL. PLASTIC BAG or WRAP
 - T - TRUCK
 - O - OTHER

j. Description of Waste: soil w/ hydro Carbon

k. Quantity Units No. TYPE
 [] [] [] [] [] [] [] [] [] []

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

- UNITS
- P - POUNDS
 - Y - YARDS
 - M³ - CUBIC METERS
 - Y³ - CUBIC YARDS
 - O - OTHER

Generator Authorized Agent Name

Signature

061296

Shipment Date

Section II TRANSPORTER (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kk, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, nn, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 367 Exchange Ct.
Livermore CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510-247-7484 e. Truck No.: 6367
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
 g. Driver Signature: [Signature] 061296
 Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
 n. _____
 Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: BFL c. Phone No.: _____
 b. Physical Address: Vasco rd. d. Mailing Address: _____
Livermore
 e. Discrepancy Indication Space: _____

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

f. Name of Authorized Agent: [Signature] 061296
 Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, destination site completes e-f)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 006524

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional DR #180 d. Address: 6400 Dublin BLVD
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

2	A	4	0	5	0	4	2	9	9	6	0	4	2	7	6
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 Containers: _____
 j. Description of Waste: Soil w/ Hydro Carbon k. Quantity:

1	6
---	---

 Units:

Y

 No.:

1

 TYPE:

1

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

- TYPE**
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
- UNITS**
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Generator Authorized Agent Name: _____ Signature: _____ Shipment Date: 061296

Section II TRANSPORTER (Generator completes all of Section II)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct.
Livermore CA 94550

TRANSPORTER II
 h. Name: _____
 i. Address: _____

c. Driver Name/Title: _____
 d. Phone No.: 510-247-7484 e. Truck No.: 63087
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.

j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.

g. Driver Signature: _____ Shipment Date: 061296

n. Driver Signature: _____ Shipment Date: _____

Section III DESTINATION (Generator completes all of Section III)

a. Site Name: BFI
 b. Physical Address: Vasco rd.
Livermore CA

c. Phone No.: _____
 d. Mailing Address: _____

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____ Signature: _____ Receipt Date: 061296

Section IV ASBESTOS (Generator completes all of Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 006525

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO Marketing b. Generating Location: BP Station
 c. Address: 2130 Marketing DR #180 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 Dublin CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: Soil w/Hydro Carbon k. Quantity:

		16	Y	1	T
--	--	----	---	---	---

 Units: _____ No.: _____ TYPE: _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Generator Authorized Agent Name: _____ Signature: _____ Shipment Date: 061296

Section II TRANSPORTER (Generator completes a-c; Transporter I completes a-j; Transporter II completes i-m)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct.
Livermore CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510-247-7484 PRINT/TYPE e. Truck No.: 636
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
[Signature] 061296
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____ PRINT/TYPE
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
 n. _____

--	--	--	--	--	--

 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-c; Destination site completes a-c)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco rd d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: [Signature] Signature: _____ Receipt Date: 061296

Section IV ASBESTOS (Generator completes a-c; f, g; Operator completes a-c)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396676

Section I GENERATOR

a. Generator Name: TOSO REFINING MANUFACTURING b. Generating Location: 6400 DUBIN BLVD
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: DUBIN CA 94568
ROSELITE CA 94861

e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: TOSO h. Owner's Phone No.: _____

i. BFI WASTE CODE CA 405 042 996 04276 Containers _____

j. Description of Waste: RAEGRVEL / Clog Dirt Quantity _____ Units _____ No. _____ TYPE _____

- TYPE**
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
- UNITS**
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

WALTER ORR Walter Orr 092996
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER I

a. Name: GREG TAUCKING
 b. Address: POB 1626
SAN MATEO CA
 c. Driver Name/Title: Polly Aslund
 d. Phone No.: 415 313 5946 e. Truck No.: 34
 f. Vehicle License No./State: 9B11173 CA
 Acknowledgement of Receipt of Materials.
 g. [Signature] 092996
 Driver Signature Shipment Date

Section II TRANSPORTER II

h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ [Signature] 092996
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's* Signature _____ Date _____

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396677

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSO MARKETING b. Generating Location: BP STATION
 c. Address: 2130 PROFESSIONAL DR #101 Address: 6400 DUBLIN BLVD
ROSEVILLE, CA DUBLIN, CA 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	40	S	0	4	2	9	9	6
----	----	---	---	---	---	---	---	---

0	4	2	7	6
---	---	---	---	---

 Containers

j. Description of Waste: FRAGILE/CERAMIC k. Quantity

--	--	--	--	--

 /

1	6
---	---

 Units

4

 No.

1

 TYPE

T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

WALTER ORR WALTER ORR 042996
 Generator Authorized Agent Name Signature Shipment Date

Section II: TRANSPORTER (Transporter completes all of Section II)

a. Name: AMERICAN CONSTRUCTION h. Name: _____
 b. Address: 567 EXCHANGE CT. i. Address: _____
LIVERMORE, CA 94550
 c. Driver Name/Title: _____ j. Driver Name/Title: _____
 d. Phone No.: 510-447-2484 e. Truck No.: 3 k. Phone No.: _____ l. Truck No.: _____
 f. Vehicle License No./State: _____ m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials.

g.

--	--	--	--	--	--	--	--

 Shipment Date Driver Signature

n.

--	--	--	--	--	--	--	--

 Shipment Date Driver Signature

Section III: DESTINATION (Operator completes all of Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE, CA

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. WALTER ORR 042996
 Name of Authorized Agent Signature Receipt Date

Section IV: ASBESTOS (Operator completes all of Section IV)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type Operator's* Signature _____ Date

--	--	--	--	--	--

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396678

Section I: GENERATOR

a. Generator Name: Losco Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional d. Address: 6400 Dublin Blvd
Roseville, Ca Dublin, Ca 94568
 e. Phone No.: 916-734-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE: CA405042996 04296 Containers: _____
 j. Description of Waste: Soil & pea k. Quantity: _____ Units: _____ No.: _____ TYPE: _____
gravel cont. with HC _____

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

WALTER CHAN Walter Chan 042996
 Generator Authorized Agent Name Signature Shipment Date

TYPE	
DM	METAL DRUM
DP	PLASTIC DRUM
B	BAG
BA	6 MIL. PLASTIC BAG or WRAP
T	TRUCK
O	OTHER

UNITS	
P	POUNDS
Y	YARDS
M ³	CUBIC METERS
Y ³	CUBIC YARDS
O	OTHER

Section II: TRANSPORTER I

a. Name: American Construction h. Name: _____
 b. Address: 567 Exchange Ct i. Address: _____
Livermore Ca 94550
 c. Driver Name/Title: _____ j. Driver Name/Title: _____
 d. Phone No.: (510) 447-2484 k. Phone No.: _____
 e. Truck No.: _____ l. Truck No.: _____
 f. Vehicle License No./State: CA A313C716 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials. n. Acknowledgement of Receipt of Materials. _____

g. [Signature] 042996 n. _____ 042996
 Driver Signature Shipment Date Driver Signature Shipment Date

Section III: DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: USCO RD d. Mailing Address: _____
Livermore Ca
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ [Signature] 042996
 Name of Authorized Agent Signature Receipt Date

Section IV: ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's* Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396679

Section I GENERATOR

a. Generator Name: TOSCO MANUFACTURING b. Generating Location: BP STATION
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBIN BLVD
ROSEVILLE, CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	4	0	5	0	4	2	9	9	6
----	---	---	---	---	---	---	---	---	---

0	4	2	7	6
---	---	---	---	---

 Containers

j. Description of Waste: PRA GRAVEL / CLAY SOIL k. Quantity:

1	6		
---	---	--	--

 Units:

Y			
---	--	--	--

 No.:

1			
---	--	--	--

 TYPE:

T			
---	--	--	--

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

WALTER ORR Walter Orr 042996
 Generator Authorized Agent Name Signature Shipment Date

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 EXCHANGE CT
LIVERMORE, CA 94550
 c. Driver Name/Title: JAMES GRAY
 d. Phone No.: 510-447-2489 e. Truck No.: 608/618
 f. Vehicle License No./State: A6362473 CA
 Acknowledgement of Receipt of Materials.
 g. James Gray 042996
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION

a. Site Name: _____ c. Phone No.: _____
 b. Physical Address: _____ d. Mailing Address: _____
 e. Discrepancy Indication Space: _____

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

f. W 042996
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's* Signature: _____ Date: _____

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

No. 396680

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

Section I GENERATOR

a. Generator Name: Tesco Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional Dr Address: 6400 Dublin Blvd
Roseville Ca Dublin Ca 94568
 e. Phone No.: 916-524-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
 i. BFI WASTE CODE

CA	40	50	42	99	6
----	----	----	----	----	---

0	4	2	9	9	6
---	---	---	---	---	---

 Containers: _____
 j. Description of Waste: Soil CONTAMINATED k. Quantity:

--	--	--	--	--	--

with Hydrocarbons Units:

--	--	--	--	--	--

16 No.:

--	--	--	--	--	--

1 TYPE:

--	--	--	--	--	--

T

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

W. Boone Generator Authorized Agent Name W. Boone Signature 042996 Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER I

a. Name: GREG TRUCKING
 b. Address: P.O. Box 1626
SAN MATEO CA 94401
 c. Driver Name/Title: Tom Phillips Driver
 d. Phone No.: 415 243 5946 e. Truck No.: 590 E05
 f. Vehicle License No./State: DAV KWA
 Acknowledgement of Receipt of Materials.
 g. Tom Phillips Driver Signature 042996 Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____ Driver Signature _____ Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: 14800 ROAD. d. Mailing Address: _____
LIVERMORE, CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] Name of Authorized Agent [Signature] Signature 042996 Receipt Date

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
 e. Operator's* Name & Title: _____ Operator's* Signature _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

No. 396681

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MANIFESTING b. Generating Location: BP STATION #11/20
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBLIN BLVD.
ROSEVILLE, CA. 95661 DUBLIN, CA. 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: TOSCO h. Owner's Phone No.: _____
 i. BFI WASTE CODE:

CA	405042996	04276
----	-----------	-------

 Containers:

DM - METAL DRUM	DP - PLASTIC DRUM
B - BAG	BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK	O - OTHER

 j. Description of Waste: SOIL & GRAVEL k. Quantity:

		16	4		1	T
--	--	----	---	--	---	---

CONTAMINATED WITH HYDROCARBONS
 GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.
WALTER ORR Walter Orr 092988
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 EXCHANGE CT
LIVERMORE, CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510-447-2484 e. Truck No.: DD3
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials. _____
 g. Driver Signature _____ Shipment Date _____

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials. _____
 n. Driver Signature _____ Shipment Date _____

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE, CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: A. Corbin Signature: A. Corbin Receipt Date: 092988

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
 e. Operator's* Name & Title: _____ Print/Type _____ Operator's* Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

RETURN TO OPERATOR



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396682

Section I: GENERATOR

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION #1170
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBLIN BLVD
ROSEVILLE, CA 95601 DUBLIN, CA 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: TOSCO h. Owner's Phone No.: _____

i. BFI WASTE CODE: CA 405 042 996 09276 Containers: _____
 j. Description of Waste: SOIL & GRAVEL k. Quantity: 164 Units: 4 No.: 1 TYPE: T
CONTAMINATED BY HYDRO CARBONS

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

Walter Carl Walter Carl 042996
 Generator Authorized Agent Name Signature Shipment Date

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II: TRANSPORTER

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 EXCHANGE CP.
LIVERMORE, CA 94550
 c. Driver Name/Title: JAMES GRAY
 d. Phone No.: 510-447-2487 e. Truck No.: 6081618
 f. Vehicle License No./State: A6362923
 Acknowledgement of Receipt of Materials.
JAMES GRAY 042996
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____ PRINT/TITLE
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 Driver Signature Shipment Date

Section III: DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE, CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Asacka 042996
 Name of Authorized Agent Signature Receipt Date

Section IV: SPECIAL USE

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type Operator's* Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396683

Section I: GENERATOR (Generator, Producer, or other Party)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION #11120
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBLIN BLVD.
ROSEVILLE, CA 95661 DUBLIN, CA 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: TOSCO h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	4	0	5	0	4	2	9	9	6
----	---	---	---	---	---	---	---	---	---

0	4	2	7	6
---	---	---	---	---

 Containers _____

j. Description of Waste: SOIL & GRAVEL k. Quantity

--	--	--	--	--	--

 /

1	6
---	---

 Units

4

 No.

1

 TYPE

T

- TYPE
- DM - METAL DRUM
 - DP - PLASTIC DRUM
 - B - BAG
 - BA - 6 MIL. PLASTIC BAG or WRAP
 - T - TRUCK
 - O - OTHER
- UNITS
- P - POUNDS
 - Y - YARDS
 - M³ - CUBIC METERS
 - Y³ - CUBIC YARDS
 - O - OTHER

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

WALTER ORR Walter Orr

0	4	2	9	9	6
---	---	---	---	---	---

 Generator Authorized Agent Name Signature Shipment Date

Section II: TRANSPORTER

TRANSPORTER I

a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 EXCHANGE CT
LIVERMORE, CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510-447-2484 e. Truck No.: 6078
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. Driver Signature _____ Shipment Date

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TRANSPORTER II

h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. Driver Signature _____ Shipment Date

--	--	--	--	--	--

Section III: DESTINATION (Receiver, Complete)

a. Site Name: BET c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE, CA
 e. Discrepancy Indication Space: _____

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

f. Name of Authorized Agent _____ Signature W/O

0	4	2	9	9	6
---	---	---	---	---	---

 Receipt Date

Section IV: ASBESTOS (Generator, Producer, or other Party)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type Operator's* Signature _____ Date

--	--	--	--	--	--

 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

RETURN TO OPERATOR



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III

No. 396684

Section I GENERATOR

a. Generator Name: TOSO MARKETING b. Generating Location: BP STATION #1120
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBLIN BLVD.
ROSWILLE, CA 95061 DUBLIN, CA 94568
 e. Phone No.: 916-774-3000 f. Phone No.:

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: TOSCO h. Owner's Phone No.:

i. BFI WASTE CODE

CA	4	0	5	6	4	2	9	9	6
----	---	---	---	---	---	---	---	---	---

0	4	2	7	6
---	---	---	---	---

 Containers

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

j. Description of Waste: SOIL & GRAVEL k. Quantity

				16
--	--	--	--	----

 Units No.

			1
--	--	--	---

 TYPE

									7
--	--	--	--	--	--	--	--	--	---

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

WALTER ORR Walter Orr 042996
 Generator Authorized Agent Name Signature Shipment Date

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER

TRANSPORTER I
 a. Name: ONEYS TRUCKING
 b. Address: PO Box 26
SAN MATEO CA
 c. Driver Name/Title: PELLY, Richard
 d. Phone No.: 415 345 3946 e. Truck No.: 39
 f. Vehicle License No./State: 9B11173 CA
 Acknowledgement of Receipt of Materials.
 g. Richard Pelly

--	--	--	--	--	--	--	--	--	--

 Shipment Date
 Driver Signature

TRANSPORTER II
 h. Name:
 i. Address:
 j. Driver Name/Title: PRINT/TYPE
 k. Phone No.: l. Truck No.:
 m. Vehicle License No./State:
 Acknowledgement of Receipt of Materials.
 n.

--	--	--	--	--	--	--	--	--	--

 Shipment Date
 Driver Signature

Section III DESTINATION

a. Site Name: BFI c. Phone No.:
 b. Physical Address: VASCO ROAD d. Mailing Address:
LIVERMORE, CA

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

f. Walter Orr Walter Orr 042996
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's* Name: b. Operator's* Phone No.:
 c. Operator's* Address:
 d. Special Handling Instructions and additional information:

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: Print/Type Operator's* Signature

--	--	--	--	--	--

 Date

f. Name and Address of Responsible Agency:

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396685

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION # 11120
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBLIN BLVD
ROSEVILLE, CA 95661 DUBLIN CA 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: TOSCO h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
----	-----	--------	-------

 Containers _____
 j. Description of Waste: SOIL & GRAVEL k. Quantity

		16	Y
--	--	----	---

 Units

		1	
--	--	---	--

 No.

		1	
--	--	---	--

 TYPE

			T
--	--	--	---

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

WALTER OR Walter OR 042996
 Generator Authorized Agent Name Signature Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II: TRANSPORTER

TRANSPORTER I
 a. Name: GREG TRUCKING
 b. Address: POB 1626
SAN RAFAEL CA
 c. Driver Name/Title: Ken [Signature]
 d. Phone No.: 4153953946 e. Truck No.: 39
 f. Vehicle License No./State: 7B1173 CA
 Acknowledgement of Receipt of Materials.
 g. Ken [Signature]

		42996
--	--	-------

 Shipment Date
 Driver Signature

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____ PRINT/TYPE
 k. Phone No.: _____ I. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____ Shipment Date
 Driver Signature

Section III: DESTINATION (Generator completes a, b, destination and completes c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] 042996
 Name of Authorized Agent Signature Receipt Date

Section IV: ASBESTOS (Generator completes all of Section IV)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's* Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396686

Section I GENERATOR

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION #11120
 c. Address: 2130 PROFESSIONAL DR #100 Address: 6400 DUBUW BLVD
ROSEVILLE CA 95661 DUBUW, CA 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: TOSCO h. Owner's Phone No.: _____

i. BFI WASTE CODE: CA 405 042996 04276 Containers:

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

 j. Description of Waste: SOIL & GRAVEL CONTAMINATED w/ HYDROCARBONS k. Quantity:

		16	4	1	1

 Units:

 No.:

 TYPE:

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

Walter One Walter One 042996
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER

TRANSPORTER I			TRANSPORTER II		
a. Name: <u>GREG'S TRUCKING</u>			h. Name: _____		
b. Address: <u>PO BOX 11626</u>			i. Address: _____		
<u>SAN MATEO CA 94401</u>					
c. Driver Name/Title: <u>Tom Palle</u> <u>Driver</u>			j. Driver Name/Title: _____		
<small>PRINT/TYPE</small>			<small>PRINT/TYPE</small>		
d. Phone No.: <u>415 343 5846</u>	e. Truck No.: <u>592 CAS</u>		k. Phone No.: _____	l. Truck No.: _____	
f. Vehicle License No./State: <u>DAWK CA</u>			m. Vehicle License No./State: _____		
Acknowledgement of Receipt of Materials.			Acknowledgement of Receipt of Materials.		
g. <u>[Signature]</u> <u>042996</u>	Shipment Date		n. _____	Shipment Date	
Driver Signature			Driver Signature		

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE, CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] 042996
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
Print/Type

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

RETURN TO OPERATOR



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396687

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO Marketing b. Generating Location: BP STATION #11120
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBUN BLVD
ROSELILLE, CA 95661 DUBUN, CA 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: TOSCO h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: SOIL & GRAVEL k. Quantity:

		16	Y	1	T
--	--	----	---	---	---

 Units: _____ No.: _____ TYPE: _____
CONTAMINATED w/ Hydrocarbons

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

WALTER WALTER 042996
 Generator Authorized Agent Name Signature Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II: TRANSPORTER (Transporter completes all of Section II)

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 EXCHANGE CA
LIVERMORE, CA 94550
 c. Driver Name/Title: Scott H. Hinton operator
 d. Phone No.: 510-447-2484 e. Truck No.: 623
 f. Vehicle License No./State: CA A3136716
 Acknowledgement of Receipt of Materials:
 g. [Signature] 042996
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
 n. _____
 Driver Signature Shipment Date

Section III: DESTINATION (Destination completes all of Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE, CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 042996
 Name of Authorized Agent Signature Receipt Date

Section IV: ASBESTOS (Operator completes all of Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396688

Section I GENERATOR

a. Generator Name: Tosco Manufacturing b. Generating Location: BP Station #11120
 c. Address: 2130 Professional Dr #100 Address: 6400 Dublin Blvd.
Roseville CA 95661 Dublin CA 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: Tosco h. Owner's Phone No.: _____

i. BFI WASTE CODE: CA 405 042996 0427A Containers: _____
 j. Description of Waste: Soil & Gravel k. Quantity: 116 Units: Y No.: 1 TYPE: T
CONTAMINATED w/ HYDROCARBONS

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

WALTER ORR Walter Orr 042996
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 Exchange Ct
Livermore CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510-447-2884 e. Truck No.: 637
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
Walter Orr _____
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco Rd d. Mailing Address: _____
Livermore, CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ Walter Orr 042996
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's* Signature: _____ Date: _____

f. Name and Address of Responsible Agency: _____
 g. Friable Non-friable; Both _____ % friable _____ % non-friable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396689

Section I GENERATOR

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION #11120
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBLIN BLVD
ROSEVILLE, CA 95661 DUBLIN CA 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: TOSCO h. Owner's Phone No.: _____

i. BFI WASTE CODE: CA 405 042996 04276 Containers: _____
 j. Description of Waste: SAIL & GRAVEL k. Quantity: _____ Units: Y No.: 1 TYPE: T
CONTAMINATED W/ HYDROCARBONS

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

Walter Orr Walter Orr 042996
 Generator Authorized Agent Name Signature Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 EXCHANGE CT
LIVERMORE, CA 94550
 c. Driver Name/Title: JAMES PERRY
 d. Phone No.: 510-447-2484 e. Truck No.: 601/618
 f. Vehicle License No./State: A6263923
 Acknowledgement of Receipt of Materials.
 g. James Perry _____
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. _____ Walter Orr 042996
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's* Signature: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

No. 396690

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION # 11120
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBLIN BLVD
ROSELVILLE CA 95601 DUBLIN, CA 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: TOSCO h. Owner's Phone No.: _____
 i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: Soil & Gravel k. Quantity:

		16	Y	1	Y
--	--	----	---	---	---

 Units:

--	--	--	--	--	--

 No.:

--	--	--	--	--	--

 TYPE:

--	--	--	--	--	--

 CONTAMINATED w/ Hydrocarbons
 GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.
 Generator Authorized Agent Name: WACT ORR Signature: [Signature] Shipment Date: 042996

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II: TRANSPORTER I (Transporter I completes all of Section II)

a. Name: AMERICAN CONSTRUCTION h. Name: _____
 b. Address: 567 EXCHANGE CA i. Address: _____
LIVERMORE, CA 94550
 c. Driver Name/Title: Sean Hinton j. Driver Name/Title: _____
PRINT/TITLE PRINT/TITLE
 d. Phone No.: 925-244-2674 e. Truck No.: 623 k. Phone No.: _____ l. Truck No.: _____
 f. Vehicle License No./State: CA 243674 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. [Signature]

--	--	--	--	--	--

 n. [Signature]

--	--	--	--	--	--

Driver Signature Shipment Date Driver Signature Shipment Date

Section III: DESTINATION (Operator completes all of Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
LIVERMORE, CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature]

--	--	--	--	--	--

Name of Authorized Agent Signature Receipt Date

Section IV: ASBESTOS (Operator completes all of Section IV)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
 e. Operator's* Name & Title: _____ f. Operator's* Signature: _____ Date: _____
Print/Type Operator's* Signature Date
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396691

Section I GENERATOR

a. Generator Name: Tosco Marketing b. Generating Location: BP STATION #11120
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 10400 DUBLIN BLVD.
ROSEVILLE, CA 95661 DUBLIN, CA 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: Tosco h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____

j. Description of Waste: SOIL & GRAVEL k. Quantity:

		16	Y	1	T
--	--	----	---	---	---

 Units: _____ No.: _____ TYPE: _____

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

Walt Orr Generator Authorized Agent Name # Walt Orr Signature 042996 Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER

TRANSPORTER I
 a. Name: ENEGAS TRUCKING
 b. Address: PO BOX 26
SAN MATEO, CA
 c. Driver Name/Title: Perry Ashworth
PRINT/TITLE
 d. Phone No.: 415-343-5946 e. Truck No.: 39
 f. Vehicle License No./State: 9B4173 CA
 Acknowledgement of Receipt of Materials:
Very Late

		42996
--	--	-------

 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
PRINT/TITLE
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:

--	--	--	--	--	--

 Driver Signature Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE, CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ Walt Orr

		042996
--	--	--------

 Receipt Date
 Name of Authorized Agent Signature

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's* Signature: _____ Date: _____
Print/Type

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396692

Section I GENERATOR

a. Generator Name: TOSCO MARKETING b. Generating Location: _____
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: _____
ROSEVILLE CA 95661
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: TOSCO h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042	996
----	-----	-----	-----

04276 Containers: _____
 j. Description of Waste: Soil & GRAVEL k. Quantity:

			16
--	--	--	----

 Units: Y No.: 1 TYPE: 7
CONTAMINATED WITH HYDROCARBONS

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG OF WRAP
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

WALT ORR Generator Authorized Agent Name Walter Orr Signature 042996 Shipment Date

Section II TRANSPORTER I

a. Name: Greggs Trucking
 b. Address: P.O. Box 1426
San Mateo, CA 94401
 c. Driver Name/Title: Tom M. ...
 d. Phone No.: 415-335-5940 e. Truck No.: SD 109
 f. Vehicle License No./State: DA J K V CA
 Acknowledgement of Receipt of Materials.
 g. [Signature] 042796 Shipment Date
 Driver Signature

h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____ Shipment Date
 Driver Signature

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE, CA
 e. Discrepancy Indication Space: _____

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

f. [Signature] 042996 Receipt Date
 Name of Authorized Agent Signature

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's* Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396693

Section I: GENERATOR (Generator complete all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION #11120
 c. Address: 2139 PROFESSIONAL DR #100 Address: 6400 DUBLIN BLVD.
ROSEVILLE, CA. 95661 DUBLIN, CA 94568
 e. Phone No.: 916-714-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: TASCO h. Owner's Phone No.: _____
 i. BFI WASTE CODE CA 405 042994 04274 Containers _____
 j. Description of Waste: SOIL & GRAVEL k. Quantity _____ Units _____ No. _____ TYPE _____
CONTAMINATED w/ HYDROCARBONS _____
 GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.
WARTORR W. A. E. E. E. 042994
 Generator Authorized Agent Name Signature Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II: TRANSPORTER (Transporter complete all of Section II)

TRANSPORTER I	
a. Name:	<u>AMERICAN CONSTRUCTION</u>
b. Address:	<u>507 EXCHANGE CT</u> <u>LIVERMORE, CA 94550</u>
c. Driver Name/Title:	_____
d. Phone No.:	_____
e. Truck No.:	<u>3</u>
f. Vehicle License No./State:	_____
Acknowledgement of Receipt of Materials.	
g. Driver Signature:	_____
Shipment Date:	_____

TRANSPORTER II	
h. Name:	_____
i. Address:	_____
j. Driver Name/Title:	_____
k. Phone No.:	_____
l. Truck No.:	_____
m. Vehicle License No./State:	_____
Acknowledgement of Receipt of Materials.	
n. Driver Signature:	_____
Shipment Date:	_____

Section III: DESTINATION (Destination complete all of Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE, CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: _____ Signature: _____ Receipt Date: _____

Section IV: ASBESTOS (Operator complete all of Section IV)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
 e. Operator's* Name & Title: _____ Operator's* Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 396694

Section I GENERATOR

a. Generator Name: TOSCO MANIFESTING b. Generating Location: BP STATION #1120
 c. Address: 2130 PROFESSIONAL DR #100 Address: 6400 DUBLIN BLVD.
ROSEVILLE, CA. 95661 DUBLIN, CA. 94568
 e. Phone No.: 916-714-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: TOSCO h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
----	-----	--------	-------

 Containers _____
 j. Description of Waste: SOIL & GRAVEL k. Quantity

		16	Y
--	--	----	---

 Units

		1	T
--	--	---	---

 No. _____ TYPE _____
CONTAMINATED w/ HYDROCARBONS

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

WALT ODE Walter Ode 042996
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 EXCHANGE CT
LIVERMORE, CA. 94550
 c. Driver Name/Title: JAMES GRAY
 d. Phone No.: _____ e. Truck No.: 608618
 f. Vehicle License No./State: AL862473
 Acknowledgement of Receipt of Materials.
 g. James Gray 042996
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD
LIVERMORE, CA d. Mailing Address: _____

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Walt Ode 042996
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's* Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

RETURN TO OPERATOR



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 786598

Section I GENERATOR

a. Generator Name: Tosco Marketing b. Generating Location: BP St #11124
 c. Address: 2130 Roseville Ave Ct. #100 d. Address: 6400 Dublin Blvd
Roseville CA 95661 DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	4	0	5	0	4	2	9	9	4
----	---	---	---	---	---	---	---	---	---

0	4	2	7	4
---	---	---	---	---

 Containers _____

j. Description of Waste: Soil w/ Hydrocarbons k. Quantity

--	--	--	--	--	--	--	--

 Units

--	--	--	--	--	--	--	--

 No.

--	--	--	--	--	--	--	--

 TYPE

--	--	--	--	--	--	--	--

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

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

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Mark D. ... 050292
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER

TRANSPORTER I	TRANSPORTER II																
a. Name: <u>American Construction</u>	h. Name: _____																
b. Address: <u>567 Exchange Ct</u> <u>Livermore CA</u>	i. Address: _____																
c. Driver Name/Title: <u>Tom Welch</u> <small>PRINT/TYPE</small>	j. Driver Name/Title: _____ <small>PRINT/TYPE</small>																
d. Phone No.: <u>510-441-2494</u> % Truck No.: <u>436</u>	k. Phone No.: _____ l. Truck No.: _____																
f. Vehicle License No./State: _____	m. Vehicle License No./State: _____																
Acknowledgement of Receipt of Materials.																	
g. <u>[Signature]</u> <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Shipment Date									n. <u>[Signature]</u> <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Shipment Date								

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VESCO RD d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____

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

f. [Signature] 061098
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____

--	--	--	--	--	--	--	--

 Operator's Signature Date
Print/Type

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

RETURN TO GENERATOR



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 908312

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION #11120
 c. Address: 2130 PROFESSIONAL BLVD #100 d. Address: 6400 DUBUEN BLVD
ROSEVILLE, CA 95661 DUBUEN, CA 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: TOSCO h. Owner's Phone No.: _____
 i. BFI WASTE CODE:

CA	405	042	996	042	76
----	-----	-----	-----	-----	----

 Containers: _____
 j. Description of Waste: SOIL w/HYDROCARBONS k. Quantity:

			16	4	1	7
--	--	--	----	---	---	---

 Units: _____ No.: _____ TYPE: _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

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

WALTER OR WALTER OR 043098
 Generator Authorized Agent Name Signature Shipment Date

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Generator completes a-c; Transporter I completes a-d; Transporter II completes a-g)

TRANSPORTER I							
a. Name:	<u>AMERICAN CONSTRUCTION</u>						
b. Address:	<u>507 EXCHANGE CT</u> <u>LIVERMORE, CA 94550</u>						
c. Driver Name/Title:	_____						
d. Phone No.:	<u>510-447-2484</u>						
e. Truck No.:	<u>03</u>						
f. Vehicle License No./State:	_____						
Acknowledgement of Receipt of Materials.							
g. Driver Signature:	<u>Hee</u>						
Shipment Date:	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						

TRANSPORTER II							
h. Name:	_____						
i. Address:	_____						
j. Driver Name/Title:	_____						
k. Phone No.:	_____						
l. Truck No.:	_____						
m. Vehicle License No./State:	_____						
Acknowledgement of Receipt of Materials.							
n. Driver Signature:	_____						
Shipment Date:	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						

Section III DESTINATION (Generator completes a-d; Destination site completes a-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE, CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____ Signature: [Signature] Receipt Date:

04	20	96
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Section IV ASBESTOS (Generator completes a-d; Asbestos site completes a-f)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type: _____ Operator's Signature: _____ Date:

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 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908313

Section I GENERATOR

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION #11120
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 60400 DUBLIN BLVD
ROSEVILLE, CA. 95661 DUBLIN, CA. 94568
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: TOSCO h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: Soil w/ hydrocarbons k. Quantity:

16

 Units:

Y

 No.:

1

 TYPE:

T

- TYPE**
- DM - METAL DRUM
 - DP - PLASTIC DRUM
 - B - BAG
 - BA - 8 MIL. PLASTIC BAG or WRAP
 - T - TRUCK
 - O - OTHER
- UNITS**
- P - POUNDS
 - Y - YARDS
 - M³ - CUBIC METERS
 - Y³ - CUBIC YARDS
 - O - OTHER

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

WALT ORR Walter Orr 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 510 EXCHANGE CT
LIVERMORE, CA. 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510 447-2184 e. Truck No.: 3
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. Hue

003

 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____

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 Driver Signature Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASEO ROAD d. Mailing Address: _____
LIVERMORE, CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Walt Orr 050196
 Name of Authorized Agent Signature Receipt Date

Section IV SPECIAL USES

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908314

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: Tosco Manufacturing b. Generating Location: BP STATION #1120
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 16100 DURBIN BLVD.
ROSEVILLE CA, 95661 DURBIN CA.
 e. Phone No.: Tosco 916-774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: Tosco h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	092996	09274
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 Containers: _____
 j. Description of Waste: SOIL WITH HYDROCARBONS k. Quantity:

		16	4		1	TT
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 Units: _____ No.: _____ TYPE: _____
 TYPE: DM - METAL DRUM, DP - PLASTIC DRUM, B - BAG, BA - 8 MIL. PLASTIC BAG or WRAP, T - TRUCK, O - OTHER
 UNITS: P - POUNDS, Y - YARDS, M³ - CUBIC METERS, Y³ - CUBIC YARDS, O - OTHER

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

W. L. TORRE Generator Authorized Agent Name Walter De Signature 050296 Shipment Date

Section II: TRANSPORTER (Generator completes all of Section II; Transporter I completes all of Section II; Transporter II completes all of Section II)

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 PRECANGE CT.
LIVERMORE, CA 94550
 c. Driver Name/Title: James Gray Driver
 d. Phone No.: 510-447-2484 e. Truck No.: 6081618
 f. Vehicle License No./State: AL362923
 Acknowledgement of Receipt of Materials.
 g. James Gray Driver Signature 050296 Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____ Driver Signature _____ Shipment Date

Section III: DESTINATION (Generator completes all of Section III; Destination completes all of Section III)

a. Site Name: BFT c. Phone No.: _____
 b. Physical Address: VASCO ROAD d. Mailing Address: _____
LIVERMORE, CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ Name of Authorized Agent _____ Signature 050296 Receipt Date

Section IV: ASBESTOS (Generator completes all of Section IV; Asbestos Operator completes all of Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type _____ Operator's Signature _____ Date
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908315

Section I GENERATOR

a. Generator Name: TOSCO MARKETING b. Generating Location: BP Station # 11120
 c. Address: 2130 Professional Dr #100 d. Address: 6400 Durbin Blvd
Roseville CA 95661 DURBIN CA.
 e. Phone No.: 916) 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: TOSCO h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
----	-----	--------	-------

 Containers
 j. Description of Waste: SOIL w/ HYDROCARBONS k. Quantity

	16	Y	1	T
--	----	---	---	---

 Units No. TYPE
 TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
 UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

Walter Orr Walter Orr

050296

 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER

TRANSPORTER I
 a. Name: GREGG TRUCKING h. Name: _____
 b. Address: POB 1626 i. Address: _____
San Mateo, Ca
 c. Driver Name/Title: Perry Ashworth j. Driver Name/Title: _____
(415) 3135516 k. Phone No.: _____
 d. Phone No.: _____ e. Truck No.: 39 l. Truck No.: _____
 f. Vehicle License No./State: 7B1173 Ca m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials.
 g. [Signature]

050296

 n. [Signature]

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 Driver Signature Shipment Date Driver Signature Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASEO ROAD d. Mailing Address _____
LIVERMORE CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature]

050296

 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
 e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908316

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: TISCO MARKETING b. Generating Location: BP Station # 11120
 c. Address: 2130 Professional Dr 100 d. Address: 6700 DUBLIN BLD.
ROSELINE CA. 95061 DUBLIN CA.
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: TISCO h. Owner's Phone No.: _____

i. BFI WASTE CODE:

C	A	4	0	5	0	4	2	9	9	6
---	---	---	---	---	---	---	---	---	---	---

0	4	2	7	6
---	---	---	---	---

 Containers: _____

j. Description of Waste: SOIL WITH DIOL CARBONS k. Quantity:

--	--	--	--	--	--	--	--	--	--	--	--

 Units:

--	--	--	--	--	--	--	--	--	--	--	--

 No.:

--	--	--	--	--	--	--	--	--	--	--	--

 TYPE:

--	--	--	--	--	--	--	--	--	--	--	--

 T

- TYPE**
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
- UNITS**
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

MARC DONNAT Signature: [Signature] Shipment Date:

0	5	0	4	9	6
---	---	---	---	---	---

Section II: TRANSPORTER (Generator completes Section II; Transporter I completes Section II; Transporter II completes Section II)

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 EXCHANGE CT
LIVERMORE CA 94550
 c. Driver Name/Title: JAMES GLOV
 d. Phone No.: 510 447 2484 e. Truck No.: 608
 f. Vehicle License No./State: A6362723
 Acknowledgement of Receipt of Materials.
 g. [Signature]

0	5	0	4	9	6
---	---	---	---	---	---

 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____

--	--	--	--	--	--

 Driver Signature Shipment Date

Section III: DESTINATION (Generator completes Section III; Destination site completes Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
LIVERMORE CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature]

0	5	0	4	9	6
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 Name of Authorized Agent Signature Receipt Date

Section IV: ASBESTOS (Generator completes Section IV; Operator completes Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908317

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: to sco marketing b. Generating Location: BP Station # 1120
 c. Address: 2130 Professional Dr. #100 d. Address: 1400 Durbin Blvd
Roseville CA 95661 Durham CA

e. Phone No.: 916 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: Soil w/ hydrocarbons k. Quantity:

		16	4		1	T
--	--	----	---	--	---	---

 Units: _____ No.: _____ TYPE: _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Walt Orr Walter Orr 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes Section II, Transporter I completes Section II, Transporter II completes Section II)

TRANSPORTER I
 a. Name: Gregg Trucking
 b. Address: POB 1626
SAN MATEO CA
 c. Driver Name/Title: Kelly Ashwood
 d. Phone No.: (415) 343-5946 e. Truck No.: 39
 f. Vehicle License No./State: 9B11173 CA
 Acknowledgement of Receipt of Materials.
 g. Kelly Ashwood 050196
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION (Generator completes Section III, Destination site completes Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Walt Orr 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes Section IV, Operator completes Section IV)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908318

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP Station #11120
 c. Address: 2120 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD
Roseville Ca. 95661 DUBLIN CA.
 e. Phone No.: 916 714 3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

C	A	4	0	5	0	4	2	9	9	6	0	4	2	7	6
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 Containers _____ TYPE _____
 j. Description of Waste: sol w/lyt/proccadous k. Quantity _____ Units _____ No. _____ TYPE _____

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

Marc Donnat [Signature] 050296
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, nn, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)

TRANSPORTER I
 a. Name: American Truck
 b. Address: [Redacted]
 c. Driver Name/Title: [Redacted]
 d. Phone No.: [Redacted] e. Truck No.: 18
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
[Signature] 050296
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: Greys Trucking
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:

 Driver Signature Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050296
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Operator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, nn, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908319

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP Station # 11120
 c. Address: 2130 PROFESSIONAL DR. 100 d. Address: DUBLIN BLVD
ROSEVILLE CA. 95661 DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	4	0	5	0	4	2	9	9	6
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0	4	2	7	6
---	---	---	---	---

 Containers

DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

j. Description of Waste: SOIL W/ HYDROCARBONS k. Quantity: _____ Units:

1	6
---	---

 No.:

1	1
---	---

 TYPE:

T

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

Marc Donnot Marc Donnot
 Generator Authorized Agent Name Signature

0	5	0	1	9	6
---	---	---	---	---	---

 Shipment Date

UNITs
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator completes a-j; Transporter completes h-i)

TRANSPORTER I	TRANSPORTER II																				
a. Name: <u>Greys Trucking</u>	h. Name: _____																				
b. Address: _____	i. Address: _____																				
c. Driver Name/Title: _____	j. Driver Name/Title: <u>Bara S. Sham</u>																				
d. Phone No.: _____ e. Truck No.: _____	k. Phone No.: _____ l. Truck No.: <u>205</u>																				
f. Vehicle License No./State: _____	m. Vehicle License No./State: <u>9C42409</u>																				
Acknowledgement of Receipt of Materials. <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>											Acknowledgement of Receipt of Materials. <u>B Sham</u> <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>										
g. Driver Signature: _____ Shipment Date: _____	n. Driver Signature: _____ Shipment Date: _____																				

Section III DESTINATION (Generator completes a-c, f, g; Operator completes e, f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] [Signature]
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g; Operator completes e, f)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable: Non-friable: Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908320

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION # 1120
 c. Address: 2132 PROFESSIONAL DR # 100 d. Address: 6400 DUBLIN BLVD.
ROSEVILLE CA. 95661 DUBLIN CA.

e. Phone No.: 916 774 3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG
OR WRAP
T - TRUCK
O - OTHER

j. Description of Waste: SOIL W/ HYDROCARBONS k. Quantity

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

Marc Donnot [Signature] 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete f-h)

TRANSPORTER I
 a. Name: Gregs Trucking
 b. Address: _____
 c. Driver Name/Title: Dan Delgouner
 d. Phone No.: 415 3657000 e. Truck No.: 11
 f. Vehicle License No./State: 95C9224
 Acknowledgement of Receipt of Materials:
Dan Delgouner

--	--	--	--	--	--	--	--	--	--

 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:

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 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VARCO RD. d. Mailing Address: _____
LIVERMORE CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* complete e, h)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908321

Section I GENERATOR

a. Generator Name: TDSCO marketing b. Generating Location: BP STATION # 1120
 c. Address: 2133 Professional Dr #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA
 e. Phone No.: 916 714 3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers _____
 j. Description of Waste: Slur w/ HYDRO CARBONS k. Quantity

		16	
--	--	----	--

 Units

V			
---	--	--	--

 No.

--	--	--	--

 TYPE

T			
---	--	--	--

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y	- CUBIC YARDS
O	- OTHER

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

Marc Donnet Marc Donnet 050296
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER

TRANSPORTER I
 a. Name: ~~Greggs Trucking~~
 b. Address: ~~PO Box 1626~~
~~San Mateo CA 94401~~
 c. Driver Name/Title: _____
 d. Phone No.: ~~415 371 5211~~ e. Truck No.: _____
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.

TRANSPORTER II
 h. Name: Greggs Trucking
 i. Address: PO Box 1626
San Mateo CA 94401
 j. Driver Name/Title: Tom Phillips
 k. Phone No.: 415 371 5211 Truck No.: 550
 m. Vehicle License No./State: DAV 400 CA
 Acknowledgement of Receipt of Materials.

g. Marc Donnet

--	--	--	--	--

 Driver Signature Shipment Date
 n. Marc Donnet

--	--	--	--	--

 Driver Signature Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address _____
Livermore CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Marc Donnet Marc Donnet 050296
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908322

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TSCCO MARKETING b. Generating Location: BP STATION #1120
 c. Address: 2130 PROFESSIONAL DR. #100 d. Address: 6400 DUBLIN BLVD.
ROSEVILLE CA 95661 DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers _____
 j. Description of Waste: SOL W/HYDROCARBONS k. Quantity

		16	4				
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 Units

--	--	--	--	--	--	--	--

 No.

--	--	--	--	--	--	--	--

 TYPE

--	--	--	--	--	--	--	--

 TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG
 or WRAP
 T - TRUCK
 O - OTHER

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

Marc Donnot Signature [Signature] Shipment Date

05	09	96
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Section II TRANSPORTER (Generator completes a-c; Transporter I completes d-f; Transporter II completes g-i)

TRANSPORTER I				TRANSPORTER II									
a. Name:	<u>Greg's Trucking</u>	h. Name:	_____	b. Address:	_____	i. Address:	_____						
c. Driver Name/Title:	<u>[Signature]</u> PRINT/TYPE	g. Driver Name/Title:	_____	d. Phone No.:	_____	k. Phone No.:	_____						
e. Truck No.:	<u>18</u>	h. Truck No.:	_____	f. Vehicle License No./State:	<u>3CS7540</u>	m. Vehicle License No./State:	_____						
Acknowledgement of Receipt of Materials.				Acknowledgement of Receipt of Materials.									
g. Driver Signature:	<u>[Signature]</u>	n. Driver Signature:	_____	Shipment Date:	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>								

Section III DESTINATION (Generator completes a-c; Operator completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space:
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: _____ Signature [Signature] Receipt Date

05	09	96
----	----	----

Section IV ASBESTOS (Operator completes all of Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 908323

Section I GENERATOR (Generator/Generator of Section II)

a. Generator Name: TOSCO marketing b. Generating Location: BP Station #1122
 c. Address: 2132 Professional Dr #100 d. Address: 6400 DUBLIN BLVD
Roseville Ca. 95661 DUBLIN Ca.
 e. Phone No.: 916 714-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042	996	04276
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 Containers: _____
 j. Description of Waste: Soil with hydrocarbons k. Quantity:

	16	Y	1	T
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 Units: No. TYPE
 TYPE: DM - METAL DRUM, DP - PLASTIC DRUM, B - BAG, BA - 6 MIL. PLASTIC BAG or WRAP, T - TRUCK, O - OTHER
 UNITS: P - POUNDS, Y - YARDS, M³ - CUBIC METERS, Y³ - CUBIC YARDS, O - OTHER

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

Marc DONNIT Signature: [Signature] Shipment Date: 05 07 96
 Generator Authorized Agent Name

Section II TRANSPORTER (Transporter/Transporter of Section III)

TRANSPORTER I
 a. Name: Greag Trucking
 b. Address: POB 1626
SALITEO Ca.
 c. Driver Name/Title: Perry Ashwood O/D
 d. Phone No.: 415 243 5916 e. Truck No.: 39
 f. Vehicle License No./State: 7B11173 Ca.
 Acknowledgement of Receipt of Materials.
 g. [Signature] Shipment Date: 05 07 96
 Driver Signature

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____ Shipment Date: _____
 Driver Signature

Section III DESTINATION (Destination/Generator of Section IV)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] Receipt Date: 05 07 96
 Name of Authorized Agent Signature

Section IV ASBESTOS (Operator/Generator of Section V)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable, Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

if waste is asbestos waste, complete Sections I, II, III and IV.
if waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908324

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION 1120
 c. Address: 2132 Professional Dr #100 d. Address: 4400 DUBLIN BLVD
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	04	29	96	04	276
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 Containers _____

j. Description of Waste: SOIL w/HYDROCARBONS k. Quantity

		16	Y		1	T
--	--	----	---	--	---	---

 Units No. TYPE

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or W/AF
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

MARC DONNAT [Signature] 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator, Transporter, and Driver complete Section II)

TRANSPORTER I			TRANSPORTER II		
a. Name:	<u>AMERICAN CONSTRUCTION</u>		h. Name:	_____	
b. Address:	<u>567 Exchange Blvd</u> <u>Livermore CA 94550</u>		i. Address:	_____	
c. Driver Name/Title:	<u>James Gray Driver</u>		j. Driver Name/Title:	_____	
d. Phone No.:	_____		k. Phone No.:	_____	
e. Truck No.:	<u>608/618</u>		l. Truck No.:	_____	
f. Vehicle License No./State:	<u>AG362423</u>		m. Vehicle License No./State:	_____	
Acknowledgement of Receipt of Materials.			Acknowledgement of Receipt of Materials.		
g. Driver Signature	<u>[Signature]</u>	<u>050196</u>	n. Driver Signature	_____	<u>050196</u>
		Shipment Date			Shipment Date

Section III DESTINATION (Generator, Transporter, and Destination Site complete Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address _____
LIVERMORE CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV SPECIALIST (Specialist completes Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908325

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tosco Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional Dr d. Address: 6400 DuSain Blvd
Roseville CA 95661 Michigan CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	407	042946	04276
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 Containers

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

 j. Description of Waste: SSIC w/ HYDROCARBONS Quantity

16

 Units

Y

 No.

1

 TYPE

T

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

Marc Donnot Ren Frost
 Generator Authorized Agent Name Signature Shipment Date

05	01	96
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Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I	TRANSPORTER II
a. Name: <u>Greys Trucking</u>	h. Name: _____
b. Address: <u>12121</u>	i. Address: _____
c. Driver Name/Title: _____ <small>PRINT/TYPE</small>	j. Driver Name/Title: _____ <small>PRINT/TYPE</small>
d. Phone No.: _____ e. Truck No.: <u>7</u>	k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____	n. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.	Acknowledgement of Receipt of Materials.
g. <u>12121</u> Driver Signature Shipment Date	n. _____ Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: BET c. Phone No.: _____
 b. Physical Address: Wasco P.D. d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. 1/19

05	01	96
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 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____
Print/Type Date

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908326

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP Station #1120
 c. Address: 2150 PROFESSIONAL DR 100 d. Address: 6400 DUBLIN BLVD.
ROSELILLE CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	64276
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 Containers _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

j. Description of Waste: SOIL w/ HYDROCARBONS Quantity

	16
--	----

 Units

4	
---	--

 No.

1	
---	--

 TYPE

T	
---	--

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

Marc Bonnot Pac Bonnot 950196
 Generator Authorized Agent Name Signature Shipment Date

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Carrier completes all of Section II)

TRANSPORTER I

a. Name: Gregs Trucking
 b. Address: _____
 c. Driver Name/Title: _____
 d. Phone No.: _____ e. Truck No.: _____
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. _____
 Driver Signature Shipment Date

TRANSPORTER II

h. Name: GREGS
 i. Address: _____
 j. Driver Name/Title: Rance Dhami
 k. Phone No.: _____ l. Truck No.: 205
 m. Vehicle License No./State: 9C42109
 Acknowledgement of Receipt of Materials.
 n. R Dhami _____
 Driver Signature Shipment Date

Section III DESTINATION (Generator, Transporter, and Destination all complete Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCA RD. d. Mailing Address: _____
LIVERMORE CA.

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ Marc Bonnot 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes all of Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908327

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TDSCO Marketing b. Generating Location: B P Station 1120
 c. Address: 2130 Professional Ty #100 d. Address: 6400 DUBLIN BLVD.
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	047996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: Soil w/ hydrocarbons k. Quantity:

	16	4	1	1	1
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 Units: No. TYPE:

--	--	--	--	--	--

 TYPE: DM - METAL DRUM, DP - PLASTIC DRUM, B - BAG, BA - 6 MIL. PLASTIC BAG or WRAP, T - TRUCK, O - OTHER
 UNITS: P - POUNDS, Y - YARDS, M³ - CUBIC METERS, Y³ - CUBIC YARDS, O - OTHER

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

Marc Donnet Signature: [Signature] Shipment Date: 050196
 Generator Authorized Agent Name Signature

Section II TRANSPORTER (Carrier completes all of Section II)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct.
Livermore CA 94550
 c. Driver Name/Title: James Gray
 d. Phone No.: 510 447-7184 e. Truck No.: LD81618
 f. Vehicle License No./State: AL66423
 Acknowledgement of Receipt of Materials.
 g. [Signature] Shipment Date: 050196
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____ Shipment Date: _____
 Driver Signature Shipment Date

Section III DESTINATION (Carrier completes all of Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] Receipt Date: 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Carrier completes all of Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908328

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP Station # 1120
 c. Address: 2130 Professional Dr. #100 d. Address: DW 00 DUBLIN BLVD.
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	04	2796	04	276
----	-----	----	------	----	-----

 Containers

j. Description of Waste: Soil w/ HYDROCARBONS k. Quantity

		16	4		1				
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 Units No. TYPE
 T - TRUCK
 O - OTHER

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

Marc Donnot Signature 050196 Shipment Date

- TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
- UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator completes a-d, Transporter I completes e-g, Transporter II completes h-j)

TRANSPORTER I
 a. Name: Greys Trucking
 b. Address: Shenline
San Mateo CA
 c. Driver Name/Title: Daniel Camp
 d. Phone No.: 415 321 5180 e. Truck No.: 11
 f. Vehicle License No./State: 7D 4734
 Acknowledgement of Receipt of Materials.
 g. Driver Signature Daniel Camp

5	1	1	96
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 Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. Driver Signature _____

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 Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: RFT c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address _____
Livermore CA.

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent _____ Signature [Signature] Receipt Date 050196

Section IV ASBESTOS (Generator completes a-d, f, g, Operator completes e, j)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type Operator's Signature _____ Date _____

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908329

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tosco Marketing b. Generating Location: BP Station 1120
 c. Address: 2330 Professional Dr #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA
 e. Phone No.: 916 714 3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers
 j. Description of Waste: Soil w/ HYDROCARBONS k. Quantity

		16	4	1	T
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 Units No. TYPE
 TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
 UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

Marc Donnot [Signature] 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II complete h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>American Construction</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: _____
b. Address: <u>567 Exchange Ct</u> <u>Livermore CA 94550</u>	i. Address: _____	k. Phone No.: _____	l. Truck No.: _____
c. Driver Name/Title: <u>James Gray</u>	m. Vehicle License No./State: <u>AK28225</u>	n. _____	
d. Phone No.: <u>510 447 2484</u>	e. Truck No.: <u>6087618</u>	o. _____	
f. Vehicle License No./State: <u>AK28225</u>	Acknowledgement of Receipt of Materials.		
g. <u>[Signature]</u> <u>050196</u>	p. _____		
Driver Signature	Shipment Date	Driver Signature	Shipment Date

Section III DESTINATION (Generator completes a-c; Destination site completes e-f)

a. Site Name: BFE c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address _____
Livermore CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-f; Operator completes e)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

**NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST**

If waste is asbestos waste, complete Sections I, II, III and IV.
 If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908330**Section I GENERATOR** (Generator completes All of Section I)

a. Generator Name: TOSEA MARKETING b. Generating Location: BP. Station # 11120
 c. Address 2133 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774 3500 f. Phone No.:

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: h. Owner's Phone No.:

i. BFI WASTE CODE

CA	405	0427976
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04276

 Containers
 j. Description of Waste: SOIL w/ HYDROCARBONS k. Quantity

		16
--	--	----

 Units

Y

 No.

1

 TYPE

T

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

Marc Donust Marc Donust

050196

 Generator Authorized Agent Name Signature Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Generator completes a-f, Transporter completes b-i)

TRANSPORTER I
 a. Name: Greggs Trucking
 b. Address: _____
 c. Driver Name/Title: _____
 d. Phone No.: _____ e. Truck No.: _____
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. _____
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: Rama
 k. Phone No.: _____ i. Truck No.: 205
 m. Vehicle License No./State: 9C12 409
 Acknowledgement of Receipt of Materials.
 n. B. Elam
 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, Destination completes a-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASEA RD d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. _____
 Name of Authorized Agent Signature [Signature] Receipt Date

050196

Section IV ASBESTOS (Generator completes a-d, Operator completes a-g)

a. Operator's* Name: b. Operator's* Phone No.:
 c. Operator's* Address:
 d. Special Handling Instructions and additional information:

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908331

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP Station 11120

c. Address: 2830 Professional Dr. 500 Roseville, CA, 95661 d. Address: 6400 DUBLIN BLVD. DUBLIN CA.

e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
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 Containers: _____

j. Description of Waste: Soil w/activated carbons Quantity:

16

 Units:

Y

 No.:

1

 TYPE:

T

TYPE	
DM	METAL DRUM
DP	PLASTIC DRUM
B	BAG
BA	6 MIL. PLASTIC BAG & WRAP
T	TRUCK
O	OTHER

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

Mark Donnot Generator Authorized Agent Name [Signature] Signature 052496 Shipment Date

Section II TRANSPORTER (Generator completes Part I; Transporter II completes II-III)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>American Construction</u>	h. Name: _____	i. Address: _____	
b. Address: <u>567 Exchange Ct Livermore CA. 94550</u>	j. Driver Name/Title: _____		
c. Driver Name/Title: _____	k. Phone No.: _____		
d. Phone No.: <u>510 447 2484</u>	l. Truck No.: _____		
e. Truck No.: <u>623</u>	m. Vehicle License No./State: _____		
f. Vehicle License No./State: _____	n. _____		
g. <u>[Signature]</u> Driver Signature		_____ Driver Signature	
_____ Shipment Date		_____ Shipment Date	

Acknowledgement of Receipt of Materials.

Section III DESTINATION (Generator completes 1-3; Destination Site completes 4-7)

a. Site Name: BFI c. Phone No.: _____

b. Physical Address: VASCO RD. Livermore CA. d. Mailing Address: _____

e. Discrepancy Indication Space: _____

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

f. [Signature] Name of Authorized Agent _____ Signature 052496 Receipt Date

Section IV ASBESTOS (Generator completes 1-3; Operator completes 4-7)

a. Operator's Name: _____ b. Operator's Phone No.: _____

c. Operator's Address: _____

d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type _____ Operator's Signature _____ Date _____

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908332

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: ToSCO Marketing b. Generating Location: BP Station # 1120
 c. Address: 2130 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916) 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996
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04276

 Containers
 j. Description of Waste: SOL W/HYDROCARBONS k. Quantity

16

 Units

4

 No.

1

 TYPE

T

- TYPE**
- DM - METAL DRUM
 - DP - PLASTIC DRUM
 - B - BAG
 - BA - 6 MIL. PLASTIC BAG or WRAP
 - T - TRUCK
 - O - OTHER
- UNITS**
- P - POUNDS
 - Y - YARDS
 - M³ - CUBIC METERS
 - Y³ - CUBIC YARDS
 - O - OTHER

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

Mark Donnet Generator Authorized Agent Name [Signature] Signature 050196 Shipment Date

Section II TRANSPORTER (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Transporter completes all of Section II)

TRANSPORTER I	TRANSPORTER II
a. Name: <u>Greys Trucking</u>	h. Name: _____
b. Address: <u>POB 1626</u> <u>SAN MATEO CA</u>	i. Address: _____
c. Driver Name/Title: <u>Ferry Ashwood</u>	j. Driver Name/Title: _____
d. Phone No.: <u>(415) 343 5946</u> e. Truck No.: <u>39</u>	k. Phone No.: _____ l. Truck No.: _____
f. Vehicle License No./State: <u>9B11173 CA</u>	m. Vehicle License No./State: _____
g. <u>[Signature]</u> Driver Signature <u>050196</u> Shipment Date	n. _____ Driver Signature _____ Shipment Date
Acknowledgement of Receipt of Materials.	Acknowledgement of Receipt of Materials.

Section III DESTINATION (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Destination site completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] Name of Authorized Agent [Signature] Signature 050196 Receipt Date

Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Operator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908333

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: VESCO MARKETING b. Generating Location: BP Station #1120
 c. Address: 2132 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD.
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916) 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	4	0	5	0	4	2	9	9	6
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 Containers: 04276
 j. Description of Waste: Soil w/ HYDROCARBONS k. Quantity:

						1	6
--	--	--	--	--	--	---	---

 Units:

						Y
--	--	--	--	--	--	---

 No.:

						1
--	--	--	--	--	--	---

 TYPE:

						A
--	--	--	--	--	--	---

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

Maic Donnot Maic Donnot 052496
Generator Authorized Agent Name Signature Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG
	or WRAP
T	- TRUCK
O	- OTHER
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II: TRANSPORTER (Generator completes Section II; Transporter I completes a-d; Transporter II completes e-h)

TRANSPORTER I		TRANSPORTER II													
a. Name: <u>American Construction</u>		h. Name: _____													
b. Address: <u>567 Exchange Ct.</u> <u>Livermore CA 94550</u>		i. Address: _____													
c. Driver Name/Title: _____		j. Driver Name/Title: _____													
d. Phone No.: <u>510 447-2484</u> e. Truck No.: <u>623</u>		k. Phone No.: _____ l. Truck No.: _____													
f. Vehicle License No./State: _____		m. Vehicle License No./State: _____													
Acknowledgement of Receipt of Materials: _____		Acknowledgement of Receipt of Materials: _____													
g. <u>Maic Donnot</u> <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> Driver Signature Shipment Date								n. _____ <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> Driver Signature Shipment Date							

Section III: DESTINATION (Generator completes a-c; Operator completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Maic Donnot

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 Name of Authorized Agent Signature Receipt Date

Section IV: ASBESTOS (Generator completes a-d; Operator completes e-g)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908334

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: TDSC marketing b. Generating Location: BP Station #1120
 c. Address: 2130 Professional Ct, 100 d. Address: 4400 DUBLIN BLVD.
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: Soil w/ hydrocarbons Quantity:

16	Y	1	T
----	---	---	---

 Units: _____
 TYPE: _____
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

MARC DONNOT Signature: _____ Shipment Date: 050196
 Generator Authorized Agent Name

Section II: TRANSPORTER (Generator completes I, II, III; Transporter completes I, II; Transporter II completes I, II)

TRANSPORTER I
 a. Name: Greys trucking
 b. Address: Shoreline
San Mateo ca
 c. Driver Name/Title: Dan Delzompe
 PRINT/TITLE
 d. Phone No.: 415 367 7860 e. Truck No.: 11
 f. Vehicle License No./State: 9B09224
 Acknowledgement of Receipt of Materials.
 g. Dan Delzompe

5	1	96
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 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 PRINT/TITLE
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____

--	--	--	--

 Driver Signature Shipment Date

Section III: DESTINATION (Generator completes I, II, III; Destination completes I, II)

a. Site Name: BFF c. Phone No.: _____
 b. Physical Address: NASCO RD. d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. AJ WILK

0	5	0	1	9	6
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 Name of Authorized Agent Signature Receipt Date

Section IV: ASBESTOS (Generator completes I, II, III, IV; Operator completes I, II, III, IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 Print/Type
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908335

Section I - GENERATOR (Generator completes all of Section I)

a. Generator Name: Josco Marketing b. Generating Location: B.P. Station #1120
 c. Address: 2130 Professional Ct. #100 d. Address: 6400 DUBLIN BLVD.
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916) 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	4	0	5	0	4	2	9	9	6
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 Containers:

0	4	2	0	5
---	---	---	---	---

 j. Description of Waste: SOIL W/HYDROCARBONS k. Quantity: 04276 Units:

1	6
---	---

 No.:

1

 TYPE:

H

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

MARC DONNO Signature: [Signature] Shipment Date: 050796
 Generator Authorized Agent Name Signature

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II - TRANSPORTER (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)

a. Name: AMERICAN CONSTRUCTION h. Name: _____
 b. Address: 567 Exchange Ct i. Address: _____
Livermore CA 94550
 c. Driver Name/Title: [Signature] j. Driver Name/Title: _____
 PRINT/TYPE PRINT/TYPE
 d. Phone No.: 510 447 2434 e. Truck No.: 623 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials.
 g. [Signature] Shipment Date:

--	--	--	--	--	--

 n. [Signature] Shipment Date:

--	--	--	--	--	--

Section III - DESTINATION (Generator completes a, b, c, d, destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] Receipt Date: 061096
 Name of Authorized Agent Signature

Section IV - ASBESTOS (Generator completes a-d, f, g, Operator completes e)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date:

--	--	--	--	--	--

 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908336

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: PISCO Marketing b. Generating Location: BP Station #1120
 c. Address: 2130 Professional Ct #100 d. Address: 4400 DUBLIN BLVD.
Roseville CA 95661 DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE: CA 405 04 2996 Containers: 04276
 j. Description of Waste: SOIL w/ HYDROCARBONS k. Quantity: 16 Units: Y No.: 1 TYPE: T

TYPE	
DM	METAL DRUM
DP	PLASTIC DRUM
B	BAG
BA	6 MIL. PLASTIC BAG or WRAP
T	TRUCK
O	OTHER

UNITS	
P	POUNDS
Y	YARDS
M ³	CUBIC METERS
Y ³	CUBIC YARDS
O	OTHER

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

Marc Donnot Signature: [Signature] Shipment Date: 050196
 Generator Authorized Agent Name

Section II TRANSPORTER (Generator completes a-1, Transporter completes a-1, b-1, c-1, d-1, e-1, f-1, g-1, h-1, i-1, j-1, k-1, l-1, m-1, n-1)

TRANSPORTER I	TRANSPORTER II
a. Name: <u>Gregg Trucking</u>	h. Name: _____
b. Address: _____	i. Address: _____
c. Driver Name/Title: _____	j. Driver Name/Title: <u>Bauer</u>
d. Phone No.: _____ e. Truck No.: _____	k. Phone No.: _____ l. Truck No.: <u>205</u>
f. Vehicle License No./State: _____	m. Vehicle License No./State: <u>9C42609</u>
g. Driver Signature: _____ Shipment Date: _____	n. Driver Signature: <u>[Signature]</u> Shipment Date: _____

Section III DESTINATION (Generator completes a-1, destination site completes a-1, b-1, c-1, d-1, e-1, f-1, g-1, h-1, i-1, j-1, k-1, l-1, m-1, n-1)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
BERNARD CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: [Signature] Signature: [Signature] Receipt Date: 050196

Section IV ASBESTOS (Generator completes a-1, b-1, c-1, d-1, e-1, f-1, g-1, h-1, i-1, j-1, k-1, l-1, m-1, n-1)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 908337

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Jasco Marketing b. Generating Location: BP Station #1120
 c. Address: 2133 Professional Ct. 700 d. Address: 6400 Durbin Blvd
Beaville Ca. 95661 Durbin Ca.
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers _____

j. Description of Waste: SIL W/HYDROCARBONS k. Quantity _____ Units _____ No. _____ TYPE _____

TYPE	
DM	METAL DRUM
DP	PLASTIC DRUM
B	BAG
BA	6 MIL. PLASTIC BAG or WRAP
T	TRUCK
O	OTHER
UNITS	
P	POUNDS
Y	YARDS
M ³	CUBIC METERS
Y ³	CUBIC YARDS
O	OTHER

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

Marc DONN-T _____ 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes I, II, III. Transporter I completes all of Section II. Transporter II completes I-IV)

TRANSPORTER I					TRANSPORTER II				
a. Name:	<u>American Construction</u>				h. Name:	_____			
b. Address:	<u>567 Exchange Ct Livermore CA 94550</u>				i. Address:	_____			
c. Driver Name/Title:	_____				j. Driver Name/Title:	_____			
d. Phone No.:	_____				k. Phone No.:	_____			
e. Truck No.:	<u>3</u>				l. Truck No.:	_____			
f. Vehicle License No./State:	_____				m. Vehicle License No./State:	_____			
Acknowledgement of Receipt of Materials.					Acknowledgement of Receipt of Materials.				
g. Driver Signature	<u>[Signature]</u>				n. Driver Signature	_____			
Shipment Date	_____				Shipment Date	_____			

Section III DESTINATION (Generator completes I, II, III. Destination Site completes I-IV)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: JASCO RD. d. Mailing Address _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes I, II, III, IV. Operator completes I-IV)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908338

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: fosco marketing b. Generating Location: BP Station #1120
 c. Address: 2130 Professional D. #100 d. Address: 6400 Dublin Blvd.
Roseville CA. 95661 Dublin CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
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 Containers: _____

j. Description of Waste: SOIL w/HYDROCARBONS k. Quantity:

16

 Units: Y No.:

1

 TYPE:

T

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

Marc Donnet Generator Authorized Agent Name [Signature] Signature 050196 Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II: TRANSPORTER (Transporter completes all of Section II)

TRANSPORTER I		TRANSPORTER II					
a. Name: <u>Cregs Trucking</u>	b. Address: <u>[Signature]</u>	h. Name: _____	i. Address: _____				
c. Driver Name/Title: <u>[Signature]</u>	d. Phone No.: <u>415 305 5780</u> Truck No.: <u>11</u>	j. Driver Name/Title: _____	k. Phone No.: _____ L. Truck No.: _____				
f. Vehicle License No./State: <u>FE-8724</u>	Acknowledgement of Receipt of Materials.						
g. <u>[Signature]</u> Shipment Date: <u>5/1/96</u>	n. _____ Shipment Date: <table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>						

Section III: DESTINATION (Generator completes all of Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] Name of Authorized Agent [Signature] Signature 050196 Receipt Date

Section IV: ASBESTOS (Generator completes all of Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908339

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: tosco MARKETING b. Generating Location: BP Station
 c. Address: 2132 Professional Dr #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916-774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	705	042996	04276
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 Containers: _____
 j. Description of Waste: Slur w/ HYDROCARBONS k. Quantity:

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 Units: Y No.: 1 TYPE: T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y	- CUBIC YARDS
O	- OTHER

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

James R Gray Signature 050296 Shipment Date
 Generator Authorized Agent Name

Section II TRANSPORTER (Generator completes all of Section II)

TRANSPORTER I
 a. Name: _____
 b. Address: _____
 c. Driver Name/Title: _____
 d. Phone No.: _____ e. Truck No.: _____
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
 g. Driver Signature: _____ Shipment Date: _____

TRANSPORTER II
 h. Name: Greys Trucking
 i. Address: POB 1626
SAN MARINO CA.
 j. Driver Name/Title: Perry Ashworth
 k. Phone No.: 415-445-9116 l. Truck No.: 39
 m. Vehicle License No./State: 9B11173 CA
 Acknowledgement of Receipt of Materials:
 n. Driver Signature: _____ Shipment Date: 050296

Section III DESTINATION (Generator completes all of Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____ Signature: _____ Receipt Date: _____

Section IV ASBESTOS (Generator completes all of Section IV)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908340

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: tosco marketing b. Generating Location: BP station 11120
 c. Address: 2132 Professional Dr. #100 d. Address: 6400 Dublin Blvd.
Roseville CA. 95661 Dublin CA.
 e. Phone No.: 916 774 3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	0429	96	0427	6
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 Containers: _____
 j. Description of Waste: SOIL w/HYDROCARBONS k. Quantity:

		16	4		1		T
--	--	----	---	--	---	--	---

 Units: _____ No.: _____ TYPE: _____

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

Mark Donnet Signature 050196 Shipment Date
 Generator Authorized Agent Name

- TYPE**
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
- UNITS**
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator completes I, Transporter I completes II, Transporter II completes II)

TRANSPORTER I
 a. Name: Gress Trucking
 b. Address: _____
 c. Driver Name/Title: _____
 d. Phone No.: _____ e. Truck No.: _____
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. _____
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: Bawa
 k. Phone No.: _____ l. Truck No.: 209
 m. Vehicle License No./State: 9C42409
 Acknowledgement of Receipt of Materials.
 n. Bawa _____
 Driver Signature Shipment Date

Section III DESTINATION (Generator completes I, Destination Site completes I, II)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco RP. d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. _____
 Name of Authorized Agent Signature 050196 Receipt Date

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 908341

Section I - GENERATOR (Generator completes all of Section I)

a. Generator Name: Exico Marketing b. Generating Location: BP Station #1120
 c. Address: 2132 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD.
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

C	A	4	0	5	0	4	2	9	9	6
---	---	---	---	---	---	---	---	---	---	---

0	4	2	7	6
---	---	---	---	---

 Containers: _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

j. Description of Waste: SILIC W/HYDROCARBONS k. Quantity: _____ Units: 16 No.: 1 TYPE: T

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

Mark Donnat Generator Authorized Agent Name Mark Donnat Signature 050296 Shipment Date

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II - TRANSPORTER (Transporter I completes I, II, III; Transporter II completes I-III)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Greggs Trucking</u>	b. Address: _____	a. Name: <u>Greggs Trucking</u>	b. Address: _____
c. Driver Name/Title: <u>J. C. Over</u>	d. Phone No.: _____	c. Driver Name/Title: _____	d. Phone No.: _____
e. Truck No.: <u>18</u>	f. Vehicle License No./State: <u>9C37040</u>	e. Truck No.: _____	f. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials: <u>Mark Donnat</u>		Acknowledgement of Receipt of Materials: _____	
<u>Mark Donnat</u> Driver Signature <u>050296</u> Shipment Date		_____ Driver Signature _____ Shipment Date	

Section III - DESTINATION (Generator completes I, II; Destination site completes III)

a. Site Name: BFI b. Physical Address: VASCO RD. Livermore CA. c. Phone No.: _____ d. Mailing Address: _____

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Mark Donnat Name of Authorized Agent Mark Donnat Signature 050296 Receipt Date

Section IV - ASBESTOS (Operator completes all of Section IV)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908342

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: tosco marketing b. Generating Location: BP Station
 c. Address: 2132 Professional Dr. #100 d. Address: 6400 DUBUN BLVD
Roseville CA. 95661 INDIAN CA.
 e. Phone No.: 916 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	04	29	96
----	-----	----	----	----

04	27	6
----	----	---

 Containers: _____

j. Description of Waste: soil w/ hydrocarbons k. Quantity:

--	--	--	--	--	--

 Units:

Y

 No.:

--	--	--	--

 TYPE:

T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Generator Authorized Agent Name: Mac Donno Signature: [Signature] Shipment Date:

05	01	96
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Section II: TRANSPORTER (Generator completes I, II, III; Transporter I completes I, II; Transporter II completes I, II, III)

TRANSPORTER I				TRANSPORTER II						
a. Name:	<u>Greg's Trucking</u>	h. Name:	_____							
b. Address:	<u>POB 1626</u> <u>SAN MATEO CA.</u>	i. Address:	_____							
c. Driver Name/Title:	<u>Perry Ashwood</u> <small>PRINT/TITLE</small>	j. Driver Name/Title:	_____							
d. Phone No.:	<u>415 343 5946</u>	k. Phone No.:	_____							
e. Truck No.:	<u>39</u>	l. Truck No.:	_____							
f. Vehicle License No./State:	<u>9B11173 CA.</u>	m. Vehicle License No./State:	_____							
Acknowledgement of Receipt of Materials.										
n. Driver Signature:	<u>[Signature]</u>	n. Driver Signature:	_____							
Shipment Date:	<table border="1"><tr><td>05</td><td>01</td><td>96</td></tr></table>	05	01	96	Shipment Date:	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td></tr></table>				
05	01	96								

Section III: DESTINATION (Generator completes I, II; Destination site completes I, II, III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: [Signature] Signature: [Signature] Receipt Date:

05	01	96
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Section IV: ASBESTOS (Generator completes I, II, III; Operator completes I, II, III, IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type: _____ Operator's Signature: _____ Date:

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f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908343

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: tasco Marketing b. Generating Location: BP Station #11120
 c. Address: 2130 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD.
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers _____
 j. Description of Waste: SIL W/ HYDROCARBONS k. Quantity

--	--	--	--	--	--

 Units

--	--	--	--	--	--

 No.

--	--	--	--	--	--

 TYPE

--	--	--	--	--	--

- TYPE**
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 ML. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
- UNITS**
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

Marc Donnet [Signature] 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes I, II and III; Transporter completes II and III)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct
Livermore CA. 94550
 c. Driver Name/Title: James Gray
 d. Phone No.: 510 447-2424 e. Truck No.: 607618
 f. Vehicle License No./State: AL362423
 Acknowledgement of Receipt of Materials.
 g. [Signature] 050196
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION (Generator completes I, II and III; Operator completes III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes I, II and III; Operator completes III)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908344

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: fosco marketing b. Generating Location: BP Station 11120
 c. Address: 2130 PROFESSIONAL BL. 100 d. Address: 6400 DUBLIN BLVD.
Roseville CA. 95661 Dublin CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE CA 405 042996 04276 Containers

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

 j. Description of Waste: SOIL w/ HYDROCARBONS k. Quantity 16 Units Y No. 1 TYPE T

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

Mary Donnat [Signature] 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER I (Generator completes a-d; Transporter I completes e-g) TRANSPORTER II (Generator completes a-d; Transporter II completes e-g)

TRANSPORTER I
 a. Name: Greys Trucking
 b. Address: POB 1626
San Mateo Ca.
 c. Driver Name/Title: Kelly Ashwood
 d. Phone No.: 415 343 5946 e. Truck No.: 39
 f. Vehicle License No./State: 9B11173 Ca.
 Acknowledgement of Receipt of Materials.
 g. [Signature] 050196
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-c; destination site completes d-f)

a. Site Name: BFI 1 c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA.

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d; Operator completes e-f)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908345

Section I GENERATOR (Generator I completes I, II and III)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP Station # 11120
 c. Address: 2130 Professional Dr d. Address: 6400 DUBLIN BVD
Roseville CA 95661 DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
----	-----	--------	-------

 Containers _____
 j. Description of Waste: SOIL w/HYDROCARBONS k. Quantity

		16	
--	--	----	--

 Units

Y			
---	--	--	--

 No.

1			
---	--	--	--

 TYPE

T			
---	--	--	--

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 8 MIL. PLASTIC BAG
 or WRAP
 T - TRUCK
 O - OTHER

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

Marc Demont [Signature] 050196
 Generator Authorized Agent Name Signature Shipment Date

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Transporter I completes I, II and III; Transporter II completes I-IV)

TRANSPORTER I
 a. Name: American Construction h. Name: _____
 b. Address: 567 Exchange Ct. i. Address: _____
Livermore CA 94550
 c. Driver Name/Title: _____ j. Driver Name/Title: _____
 d. Phone No.: 510 447-2484 e. Truck No.: 5 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 n. Acknowledgement of Receipt of Materials: _____
 o. [Signature]

--	--	--	--

 Shipment Date
 Driver Signature Shipment Date

Section III DESTINATION (Operator I completes I, II and III; Operator II completes I-IV)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco Rd. d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Operator I completes I, II and III; Operator II completes I-IV)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e.* Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908346

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tosco Marketing b. Generating Location: BP Station #1120
 c. Address: 2130 Professional Dr 100 d. Address: 6400 DUBLIN BLVD.
Roseville CA 95661 DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
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 Containers: _____
 j. Description of Waste: Soil w/ HYDROCARBONS k. Quantity:

--	--	--	--	--	--

 Units: Y No.

--	--	--	--

 TYPE:

--	--	--	--

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

Marc Donnot Signature
 Generator Authorized Agent Name
050196 Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 8 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Generator completes a-g; Transporter I completes h-g; Transporter II completes h-n)

TRANSPORTER I
 a. Name: Greys Trucking
 b. Address: _____
 c. Driver Name/Title: _____
 d. Phone No.: _____ e. Truck No.: _____
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. _____
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: Rama S. Dhanani
 k. Phone No.: _____ l. Truck No.: 215
 m. Vehicle License No./State: 9C42609
 Acknowledgement of Receipt of Materials.
 n. Behavi
023196
013196
 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-c; Operator completes d-e)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ Signature Marc Receipt Date 050196
 Name of Authorized Agent

Section IV ASBESTOS (Generator completes a-c; Operator completes d-e)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908347

Section I GENERATOR

a. Generator Name: fosco marketing b. Generating Location: BP Station # 1120
 c. Address: 2132 Professional Dr. 100 d. Address: 6700 Dublin Blvd
Roseville CA. 95661 Dublin CA.
 e. Phone No.: 916 734 3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	4	0	5	0	4	2	9	9	6
----	---	---	---	---	---	---	---	---	---

0	4	2	7	6
---	---	---	---	---

 Containers
 j. Description of Waste: Soil w/ hydrocarbons k. Quantity:

--	--	--	--	--	--	--	--	--	--

 Units: Y No.: 11 TYPE: T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

MARC DONNO [Signature]

0	5	0	1	9	6
---	---	---	---	---	---

 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct
Livermore CA. 94550

TRANSPORTER II
 h. Name: _____
 i. Address: _____

c. Driver Name/Title: SID 447-2484
 d. Phone No.: JAMES GRAY e. Truck No.: 1008/605
 f. Vehicle License No./State: A6362423
 Acknowledgement of Receipt of Materials.

T. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.

[Signature]

0	5	0	1	9	6
---	---	---	---	---	---

 Driver Signature Shipment Date

[Signature] _____
 Driver Signature Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature]

0	5	0	1	9	6
---	---	---	---	---	---

 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908348

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Josco Marketing b. Generating Location: BP Station #172
 c. Address: 2132 Professional Dr. Roseville CA 95601 d. Address: 6100 DUBLIN BLVD DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
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 Containers: _____

j. Description of Waste: Soil w/ hydrocarbons k. Quantity:

16

 Units: Y No.: 1 TYPE: T

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

Marc Donnot Generator Authorized Agent Name Signature 050196 Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Generator completes a-c; Transporter I completes e-g; Transporter II completes h-i)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Gregs Trucking</u>	b. Address: <u>201 E View San Mateo</u>	h. Name: _____	i. Address: _____
c. Driver Name/Title: <u>Dan Delgado</u>	d. Phone No.: <u>415 368 7800</u> PRINT/TYPER Truck No.: <u>11</u>	j. Driver Name/Title: _____	k. Phone No.: _____ PRINT/TYPER I. Truck No.: _____
f. Vehicle License No./State: <u>9B092241</u>	Acknowledgement of Receipt of Materials: _____	m. Vehicle License No./State: _____	Acknowledgement of Receipt of Materials: _____
g. <u>Dan Delgado</u> Driver Signature <u>5/1/96</u> Shipment Date		n. _____ Driver Signature _____ Shipment Date	

Section III DESTINATION (Generator completes a-c; Destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco Rd Livermore CA d. Mailing Address: _____
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Mey Name of Authorized Agent Signature 050196 Receipt Date

Section IV ASBESTOS (Generator completes a-c; g; Operator* completes e-f)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 908349

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: tasco marketing b. Generating Location: B P STADIUM 11120
 c. Address: 2132 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774 3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

 j. Description of Waste: SOIL w/HYDROCARBONS k. Quantity

16	Y
----	---

 Units

1	T
---	---

 No. TYPE

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

Marc Donnot Signature 056196 Shipment Date
 Generator Authorized Agent Name

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I	TRANSPORTER II
a. Name: <u>American Construction</u>	h. Name: _____
b. Address: <u>567 EXCHANGE CT</u> <u>Livermore CA 94550</u>	i. Address: _____
c. Driver Name/Title: <u>JAMES GRAY</u>	j. Driver Name/Title: _____
d. Phone No.: <u>510 447-2484</u> e. Truck No.: <u>6081610</u>	k. Phone No.: _____ l. Truck No.: _____
f. Vehicle License No./State: <u>AK362923</u>	m. Vehicle License No./State: _____
g. <u>James Gray</u> Signature <u>056196</u> Shipment Date	n. _____ Signature _____ Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____

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

f. Marc Donnot Signature 056196 Receipt Date
 Name of Authorized Agent

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908350

Section I GENERATOR (Generator complete all of Section I)

a. Generator Name: Lasco Marketing b. Generating Location: BP Station #1120
 c. Address: 2130 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers _____
 j. Description of Waste: soil w/ HYDROCARBONS k. Quantity

		16	Y			1		
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 Units No. TYPE
 TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

Marc Donndt Signature 050196 Shipment Date
 Generator Authorized Agent Name

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator complete a-c; Transporter I complete d-m; Transporter II complete h-l)

TRANSPORTER I
 a. Name: Greg Trucking
 b. Address: Shoreline
Sumner WA
 c. Driver Name/Title: Dan Delgrosso
 d. Phone No.: 415 3687560 PRINT/TYPE Truck No.: 11
 f. Vehicle License No./State: 9B09224
 Acknowledgement of Receipt of Materials.
 g. Dan Delgrosso

5	1	96
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 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ PRINT/TYPE l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____

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 Driver Signature Shipment Date

Section III DESTINATION (Generator complete a-c; Destination complete d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA.

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

f. _____ MCD

0	5	0	1	9	6
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 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete all of Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 Print/Type

f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908351

Section I GENERATOR

a. Generator Name: tasco marketing b. Generating Location: BP Station
 c. Address: 2130 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD
Rossmore CA 95061 DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	4	0	5	0	4	2	9	9	6
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0	4	2	7	6
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 Containers _____
 j. Description of Waste: Soil w/HYDROCARBONS k. Quantity

--	--	--	--	--	--	--	--	--	--

 Units

--	--	--	--	--	--	--	--	--	--

 No.

--	--	--	--	--	--	--	--	--	--

 TYPE

--	--	--	--	--	--	--	--	--	--

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Maive Dowd Generator Authorized Agent Name [Signature] Signature

0	5	0	1	9	6
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 Shipment Date

Section II TRANSPORTER

TRANSPORTER I	TRANSPORTER II																				
a. Name: <u>American Construction</u>	h. Name: _____																				
b. Address: <u>567 Exchange Ct.</u> <u>Livermore CA 94550</u>	i. Address: _____																				
c. Driver Name/Title: _____	j. Driver Name/Title: _____																				
d. Phone No.: <u>510 447 2484</u> e. Truck No.: <u>5</u>	k. Phone No.: _____ l. Truck No.: _____																				
f. Vehicle License No./State: _____	m. Vehicle License No./State: _____																				
Acknowledgement of Receipt of Materials.																					
g. <u>[Signature]</u> Driver Signature <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Shipment Date											n. _____ Driver Signature <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Shipment Date										

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] Name of Authorized Agent [Signature] Signature

0	5	0	1	9	6
---	---	---	---	---	---

 Receipt Date

Section IV ASBESTOS

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908352

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station
 c. Address: 2120 PROFESSIONAL DR 100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

j. Description of Waste: SOL W/ HYDROCARBONS k. Quantity

1	6
---	---

 Units

Y

 No.

1

 TYPE

T

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Mark Donnot Generator Authorized Agent Name
[Signature] Signature
050196 Shipment Date

Section II TRANSPORTER (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, nn, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Craig Trucking</u>	h. Name: <u>Bawa</u>		
b. Address: _____	i. Address: _____		
c. Driver Name/Title: _____	j. Driver Name/Title: <u>Bawa</u>		
d. Phone No.: _____	k. Phone No.: _____	l. Truck No.: <u>205</u>	
e. Truck No.: _____	m. Vehicle License No./State: <u>9C42U09</u>		
f. Vehicle License No./State: _____	Acknowledgement of Receipt of Materials.		
g. Driver Signature _____	n. Driver Signature _____	Shipment Date _____	

Section III DESTINATION (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, nn, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: TASCO RD
Livermore CA. d. Mailing Address: _____
 e. Discrepancy Indication Space: _____

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

f. Name of Authorized Agent _____ Signature [Signature] Receipt Date 050196

Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, nn, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908353

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: LASCO Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional Dr 100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers _____
 j. Description of Waste: Soil w/AMD/CARBONS k. Quantity

16	1	1	1
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 Units N No. 1 TYPE T
 TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
 UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

Marc Donnst [Signature] 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-c; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>American Construction</u>		h. Name: _____	
b. Address: <u>567 Exchange Ct</u> <u>Livermore CA 94550</u>		i. Address: _____	
c. Driver Name/Title: <u>James Gray</u> <u>driver</u>		l. Driver Name/Title: _____	
d. Phone No. <u>510 447 7884</u>	e. Truck No.: <u>608/618</u>	k. Phone No.: _____	PRINT/TITLE i. Truck No.: _____
f. Vehicle License No./State: <u>AL362923</u>		m. Vehicle License No./State: _____	
Acknowledgement of Receipt of Materials.		Acknowledgement of Receipt of Materials.	
g. <u>[Signature]</u> <u>050196</u>	Shipment Date	Driver Signature	Shipment Date

Section III DESTINATION (Generator completes a-c; destination site completes e-g)

a. Site Name: BFI Phone No.: _____
 b. Physical Address: LASCO RD.
Livermore CA Mailing Address: _____
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-c; g; Operator completes e-g)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908354

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station #1120
 c. Address: 2130 Professional Dr #100 d. Address: 6400 GLEN BLVD
Roseville CA 95661 Roseville CA
 e. Phone No.: 916 774-3200 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
 i. BFI WASTE CODE

CA	405	042996	04267
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 Containers _____
 j. Description of Waste: Soil w/ hydrocarbons k. Quantity

	16	Y	1	T
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 No. _____ TYPE _____
 TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG
 or WRAP
 T - TRUCK
 O - OTHER
 UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

Marc Dunnot [Signature] 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-c; Transporter I completes e-g; Transporter II completes f-h)

TRANSPORTER I		TRANSPORTER II						
a. Name: <u>Greg Trucking</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: _____					
b. Address: <u>POB 1626</u>	i. Address: _____	k. Phone No.: _____	l. Truck No.: _____					
c. Driver Name/Title: <u>Kelly Ashworth</u>	j. Driver Name/Title: _____	m. Vehicle License No./State: _____	n. _____					
d. Phone No.: <u>(415) 3435946</u>	k. Phone No.: _____	Acknowledgement of Receipt of Materials: _____	Shipment Date: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					
e. Truck No.: <u>39</u>	l. Truck No.: _____							
f. Vehicle License No./State: <u>9A B1173 CA</u>	m. Vehicle License No./State: _____							
g. <u>[Signature]</u> <u>050196</u>	n. _____							
Driver Signature	Shipment Date	Driver Signature	Shipment Date					

Section III DESTINATION (Generator completes a-c; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g; Operator completes e.)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 908355

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Inesco Marketing b. Generating Location: BP Station 1120
 c. Address: 7777 Professional Dr #100 d. Address: 6400 DUBLIN BLVD
DUBLIN CA 94568 DUBLIN CA
 e. Phone No.: 916 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04286
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 Containers _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

j. Description of Waste: Slur w/ HYDROCARBONS k. Quantity

	16	7	1		
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 Units

--	--	--	--	--	--

 No.

--	--	--	--	--	--

 TYPE

--	--	--	--	--	--

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

Marc Dounot Signature 050196 Shipment Date
 Generator Authorized Agent Name _____

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I	TRANSPORTER II
a. Name: <u>WILSON CONSTRUCTION</u>	h. Name: _____
b. Address: <u>567 EXCHANGE CT</u> <u>LIVERMORE CA 94550</u>	i. Address: _____
c. Driver Name/Title: <u>JAMES GRAY</u> <small>PRINT/TITLE</small>	j. Driver Name/Title: _____ <small>PRINT/TITLE</small>
d. Phone No.: <u>510 447-7484</u> e. Truck No.: <u>608668</u>	k. Phone No.: _____ l. Truck No.: _____
f. Vehicle License No./State: <u>AC362929</u>	m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.	
g. <u>James Gray</u> Signature <u>050196</u> Shipment Date	n. _____ Signature _____ Shipment Date

Section III DESTINATION (Generator completes a-c; Destination site completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO d. Mailing Address: _____
LIVERMORE CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. _____ Signature 050196 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
Print/Type _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908356

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: VASCO MARKETING b. Generating Location: B.P. Station 11720
 c. Address: 2127 Professors Dr. 100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA
 e. Phone No.: 916 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042796	042796
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 Containers: _____
 j. Description of Waste: SOIL WITH HYDROCARBONS k. Quantity:

	16	Y	11	T
--	----	---	----	---

 Units: _____ No.: _____ TYPE: _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Marc Donat Generator Authorized Agent Name
[Signature] Signature
050196 Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
 a. Name: Greg Trucking
 b. Address: 2081626
San Mateo Ca
 c. Driver Name/Title: Perry Ashwood
 d. Phone No.: (415) 345 5446 e. Truck No.: 39
 f. Vehicle License No./State: 9B11173 Ca
 Acknowledgement of Receipt of Materials.
 g. [Signature] Driver Signature
050196 Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 _____ Driver Signature
 _____ Shipment Date

Section III DESTINATION (Generator completes a-c; destination site completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] Name of Authorized Agent
[Signature] Signature
050196 Receipt Date

Section IV ASBESTOS (Generator completes a-c; Operator completes d-f)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908357

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP STATION 1120
 c. Address: 2135 Professional Dr 100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA

e. Phone No.: 916 774 3200 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04267
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: Soil w/IRON PARTICLES k. Quantity:

		16	
--	--	----	--

 Units:

Y	
---	--

 No.:

1

 TYPE:

T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Generator Authorized Agent Name: _____ Signature: _____ Shipment Date:

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Section II: TRANSPORTER (Generator complete a-c; Transporter I complete a-g; Transporter II complete h-n)

TRANSPORTER I		TRANSPORTER II													
a. Name: <u>American Construction</u>		h. Name: _____													
b. Address: <u>567 Exchange Ct</u>		i. Address: _____													
<u>Livermore CA 94550</u>															
c. Driver Name/Title: _____		j. Driver Name/Title: _____													
d. Phone No.: <u>510 447-2484</u>	e. Truck No.: <u>03</u>	k. Phone No.: _____	l. Truck No.: _____												
f. Vehicle License No./State: _____		m. Vehicle License No./State: _____													
Acknowledgement of Receipt of Materials: _____		Acknowledgement of Receipt of Materials: _____													
g. Driver Signature: <u>[Signature]</u>	Shipment Date: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							n. Driver Signature: _____	Shipment Date: <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						

Section III: DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____ Signature: [Signature] Receipt Date:

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Section IV: ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type: _____ Operator's Signature: _____ Date:

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 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908358

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station 11120
 c. Address: 2132 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04267
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 Containers

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

j. Description of Waste: SOIL w/HMXOCARBONS k. Quantity

16	Y	1	T
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 Units No. TYPE

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

MARC DONNOT [Signature]

050296

 Generator Authorized Agent Name Signature Shipment Date

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
 a. Name: Greg Trucking
 b. Address: P.O. Box 1426
SAN MARINO CA 91901
 c. Driver Name/Title: Tom Puller
 d. Phone No.: 562 408-2221 e. Truck No.: 550
 f. Vehicle License No./State: 5A111-5TAS716
DAVIS CA
 Acknowledgement of Receipt of Materials.
 g. [Signature]

050296

 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n.

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 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-c; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA 94550
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature]

050296

 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908359

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: vasco marketing b. Generating Location: BP Station 1120
 c. Address: 7130 Professional Dr. 100 Roseville CA 95661 d. Address: 6400 DUBLIN BLVD DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04270
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 Containers: _____
 j. Description of Waste: _____ k. Quantity:

16	Y	1	T
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 Units: No. TYPE
 TYPE: DM - METAL DRUM, DP - PLASTIC DRUM, B - BAG, BA - 6 MIL. PLASTIC BAG or WRAP, T - TRUCK, O - OTHER
 UNITS: P - POUNDS, Y - YARDS, M³ - CUBIC METERS, Y³ - CUBIC YARDS, O - OTHER

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

Marc DONNOT [Signature]

050296

 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-g; Transporter I complete a-g; Transporter II complete h-n)

TRANSPORTER I
 a. Name: Grey Trucking h. Name: _____
 b. Address: PO Box 1626 SAN MATEO i. Address: _____
 c. Driver Name/Title: Daryl Crockett j. Driver Name/Title: _____
 d. Phone No.: 415-343-6946 e. Truck No.: DC-3 k. Phone No.: _____ l. Truck No.: _____
 f. Vehicle License No./State: 9B09279 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials. Acknowledgement of Receipt of Materials.
 g. [Signature]

050296

 n. _____
 Driver Signature Shipment Date Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-f; destination site completes g-i)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD LIVERMORE CA. d. Mailing Address: _____
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. _____ [Signature]

050296

 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-c; Operator completes a-c)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
 e. Operator's Name & Title: _____ f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908360

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tasco Marketing b. Generating Location: BP Station 1120
 c. Address: 2130 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: (916) 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	042996
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 Containers: _____
 j. Description of Waste: _____ k. Quantity:

16	Y	1	T
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 Units: _____ No.: _____ TYPE: _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Marc Donnot Signature: [Signature] Shipment Date: 050296
 Generator Authorized Agent Name _____ Signature _____ Shipment Date _____

Section II TRANSPORTER (Generator completes a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Amgen Exchange TR</u>	h. Name: <u>Gregg Trucking</u>		
b. Address: <u>567 Exchange TR</u>	i. Address: <u>POB 11026</u>		
	<u>Livermore CA. 94550</u>		
c. Driver Name/Title: _____	j. Driver Name/Title: <u>FERRY HSHWORTH</u>		
d. Phone No.: <u>510 442-2444</u>	k. Phone No.: <u>(415) 343-5446</u>		
	l. Truck No.: <u>37</u>		
f. Vehicle License No./State: _____	m. Vehicle License No./State: <u>9B11173 CA</u>		
Acknowledgement of Receipt of Materials.		Acknowledgement of Receipt of Materials.	
g. Driver Signature: _____	n. Driver Signature: <u>[Signature]</u>	Shipment Date: <u>050296</u>	

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: [Signature] Receipt Date: 050296

Section IV ASBESTOS (Generator completes a-d; f, g; Operator* completes e)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908361

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tasco Marketing b. Generating Location: BF Station 11120
 c. Address: 2130 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: (916) 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
 i. BFI WASTE CODE:

CA	405	042996	047	56
----	-----	--------	-----	----

 Containers: _____
 j. Description of Waste: SOIL w/ HYDROCARBONS k. Quantity:

		16	Y	1	T
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 Units: _____ No.: _____ TYPE: _____
 TYPE: DM - METAL DRUM, DP - PLASTIC DRUM, B - BAG, BA - 6 MIL. PLASTIC BAG or WRAP, T - TRUCK or WRAP, O - OTHER
 UNITS: P - POUNDS, Y - YARDS, M³ - CUBIC METERS, Y³ - CUBIC YARDS, O - OTHER

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

MARC DONNOT Signature: [Signature] Shipment Date: 050796
 Generator Authorized Agent Name _____

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>[Signature]</u>	h. Name: <u>Gregg Trucking</u>	i. Address: <u>PO Box 602</u>	j. Driver Name/Title: <u>Tammy Ann</u>
b. Address: <u>[Signature]</u>	k. Phone No.: <u>415 242 5744</u>	Truck No.: <u>521</u>	m. Vehicle License No./State: <u>DAK 110 CA</u>
c. Driver Name/Title: _____	e. Truck No.: _____	Truck No.: _____	n. <u>[Signature]</u>
d. Phone No.: <u>[Signature]</u>			Shipment Date: <u>050796</u>
f. Vehicle License No./State: _____			
Acknowledgement of Receipt of Materials: _____		Acknowledgement of Receipt of Materials: _____	
g. Driver Signature: _____	Shipment Date: _____	Driver Signature: _____	Shipment Date: _____

Section III DESTINATION (Generator completes a-c; Destination site completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA.
 e. Discrepancy Indication Space: _____

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

f. Name of Authorized Agent: _____ Signature: [Signature] Receipt Date: 050796

Section IV ASBESTOS (Generator completes a-d; Operator completes e.)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908362

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Jasco Marketing b. Generating Location: B P Station #1170
 c. Address: 2132 Professional Dr #100 d. Address: 6400 DUBLIN ROAD
Roseville CA 95661 DUBLIN CA
 e. Phone No.: (916) 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	02276
----	-----	--------	-------

 Containers: _____

j. Description of Waste: SOIL w/ HYDROCARBONS k. Quantity:

		16	Y		1		
--	--	----	---	--	---	--	--

 Units: _____ No. _____ TYPE: _____

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

Marc Donnot Signature: [Signature] Shipment Date: 050296
 Generator Authorized Agent Name _____ Signature _____ Shipment Date _____

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
 a. Name: Greg Trucking
 b. Address: _____
 c. Driver Name/Title: Francisco Quevedo
 d. Phone No.: _____ a. Truck No.: 18
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: [Signature] 050296
 Driver Signature _____ Shipment Date _____

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____
 n. Driver Signature _____ Shipment Date _____

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____

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

f. Name of Authorized Agent: [Signature] Receipt Date: 050296
 Name of Authorized Agent _____ Signature _____ Receipt Date _____

Section IV ASBESTOS (Generator complete e-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 908363

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station 1120
 c. Address: 2130 Professional Dr #100 d. Address: 6400 DUBLIN BLVD
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: (916) 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	04	2996
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04	2996
----	------

 Containers

j. Description of Waste: Soil w/ hydrocarbons k. Quantity

16

 Units

Y

 No.

1

 TYPE

T

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

Marc Donnor Signature 050296 Shipment Date
 Generator Authorized Agent Name

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
V	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Generator completes a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I	
a. Name: <u>Green Trucking</u>	h. Name: <u>Green Trucking</u>
b. Address: <u>1111 Green St</u>	i. Address: <u>P.O. Box 1626</u>
<u>Livermore CA. 94530</u>	<u>SAN MATEO CA</u>
c. Driver Name/Title: _____	j. Driver Name/Title: <u>Daryl Crockett</u>
d. Phone No.: <u>925 447 2104</u>	k. Phone No.: <u>415-343-4746</u>
e. Truck No.: _____	l. Truck No.: _____
f. Vehicle License No./State: _____	m. Vehicle License No./State: <u>9B09279 CA1</u>
Acknowledgement of Receipt of Materials.	
g. _____	n. _____
Driver Signature	Shipment Date
Driver Signature	Shipment Date

Section III DESTINATION (Generator completes e-g; Destination site completes a-d)

a. Site Name: BET c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address _____
Livermore CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. MCG Signature 050296 Receipt Date
 Name of Authorized Agent

Section IV ASBESTOS (Generator completes e-d; f, g; Operator completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908364

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: RFP Station 11120
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBLIN BLVD
ROSEVILLE CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	042996
----	-----	--------	--------

 Containers: _____

j. Description of Waste: SOIL W/HYDRO CARBONS k. Quantity:

1	1	6
---	---	---

 Units:

Y	1	1	T
---	---	---	---

 No. _____ TYPE _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Marc Donnot _____ 061096
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 EXCHANGE CT.
LIVERMORE CA 94550
 c. Driver Name/Title: Bob
 d. Phone No.: 510 447-2484 e. Truck No.: 627
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA.

e. Discrepancy Indication Space: _____

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

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908365

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station #1120
 c. Address: 2130 Professional Dr. 700 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: (916) 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04288
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: SOIL W/ HYDROCARBONS k. Quantity:

1	6
---	---

 Units:

Y

 No.:

1

 TYPE:

T

- TYPE**
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
- UNITS**
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

Marc Donnot Signature 050296 Shipment Date
 Generator Authorized Agent Name _____

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Greg Trucking</u>	b. Address: <u>1000 W. Coy 7626</u> <u>San Mateo CA 94403</u>	i. Name: _____	j. Address: _____
c. Driver Name/Title: <u>Tom Phillips Driver</u>	d. Phone No.: <u>415 343 5018</u> Truck No.: <u>590</u>	k. Driver Name/Title: _____	l. Phone No.: _____ Truck No.: _____
f. Vehicle License No./State: <u>DASKU CA</u>	g. Acknowledgement of Receipt of Materials: _____	m. Vehicle License No./State: _____	n. Acknowledgement of Receipt of Materials: _____
g. Driver Signature: <u>[Signature]</u>	Shipment Date: <u>050296</u>	Driver Signature: _____	Shipment Date: _____

Section III DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.

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

f. Name of Authorized Agent: [Signature] Receipt Date: 050288

Section IV ASBESTOS (Generator completes a-d, f, g; Operator completes e.)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 908366

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: RIP Station #1120
 c. Address: 2130 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
 i. BFI WASTE CODE

CA	405	042996
----	-----	--------

042996

 Containers
 j. Description of Waste: _____ k. Quantity

16

 Units

Y

 No.

1

 TYPE

T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Marc Donnot [Signature] 050296
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I	TRANSPORTER II
a. Name: <u>Greg Trucking</u>	h. Name: _____
b. Address: <u>POB 11626</u> <u>San Mateo Ca.</u>	i. Address: _____
c. Driver Name/Title: <u>Perry Ashworth</u> <small>PRINT/TYPE</small>	j. Driver Name/Title: _____ <small>PRINT/TYPE</small>
d. Phone No.: <u>415 340 5946</u> e. Truck No.: <u>39</u>	k. Phone No.: _____ I. Truck No.: _____
f. Vehicle License No./State: <u>9B 11173 CA</u> Acknowledgement of Receipt of Materials.	m. Vehicle License No./State: _____ Acknowledgement of Receipt of Materials.
g. <u>[Signature]</u> <u>050296</u> <small>Driver Signature Shipment Date</small>	n. _____ <small>Driver Signature Shipment Date</small>

Section III DESTINATION (Generator completes a-c; destination site completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050296
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____

--	--	--	--	--	--

Print/Type Operator's Signature Date
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908367

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP station #1120
 c. Address: 2130 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD
Roseville CA. 95661 DUBLIN CA.

e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	4	0	5	0	4	2	9	9	6
----	---	---	---	---	---	---	---	---	---

 Containers:

0	4	2	9	6
---	---	---	---	---

 TYPE:

DM	-	METAL DRUM
DP	-	PLASTIC DRUM
B	-	BAG
BA	-	8 MIL. PLASTIC BAG or WRAP
T	-	TRUCK
O	-	OTHER

j. Description of Waste: Soil w/HYDROCARBONS k. Quantity:

1	6
---	---

 Units:

Y

 No.:

1

 TYPE:

T

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

Marc DONNOT Signature: [Signature] Shipment Date:

0	5	0	7	9	6
---	---	---	---	---	---

Section II: TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-i)

TRANSPORTER I		TRANSPORTER II													
a. Name: <u>Greg Trucking</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: _____												
b. Address: <u>P.O. Box 7626</u> <u>SAN MATEO CA</u>	k. Phone No.: _____	l. Truck No.: _____	m. Vehicle License No./State: _____												
c. Driver Name/Title: <u>Daryl Crockett</u>	n. _____	o. _____													
d. Phone No.: <u>415-345-6946</u> e. Truck No.: <u>DC-3</u>															
f. Vehicle License No./State: <u>9B09279</u>															
g. <u>[Signature]</u> Driver Signature	<table border="1"><tr><td>0</td><td>5</td><td>0</td><td>7</td><td>9</td><td>6</td></tr></table> Shipment Date	0	5	0	7	9	6	<u>[Signature]</u> Driver Signature	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Shipment Date						
0	5	0	7	9	6										

Section III: DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: TASCO RD d. Mailing Address: _____
WILKINSON CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: [Signature] Signature: [Signature] Receipt Date:

0	5	0	7	9	6
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Section IV: ASBESTOS (Generator completes a-d, f, g; Operator* completes e.)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908369

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station 1120
 c. Address: 2132 Professional Dr 100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996
----	-----	--------

042996

Containers

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG
 or WRAP
 T - TRUCK
 O - OTHER

j. Description of Waste: SOL w/4500 CARBONS k. Quantity

16

 Units

Y

 No.

1

 TYPE

T

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

MARC DONNOT
 Generator Authorized Agent Name

[Signature]
 Signature

--	--	--	--	--	--

 Shipment Date

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II complete h-n)

TRANSPORTER I

a. Name: GREG TRUCKING
 b. Address: PO Box 1626
San Mateo CA
 c. Driver Name/Title: Tom Phillips Driver
PRINT/TYPE
 d. Phone No.: 415 372 946 e. Truck No.: 290
 f. Vehicle License No./State: DAV 420 CA
 Acknowledgement of Receipt of Materials.
 g. [Signature]

050296

 Driver Signature Shipment Date

TRANSPORTER II

h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
PRINT/TYPE
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n.

--	--	--	--	--	--

 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-l)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: UASEO RD d. Mailing Address: _____
LIVERMORE CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature]

050296

 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908370

Section I GENERATOR (Generator completes a-d, Section II)

a. Generator Name: TASCO MARKETING b. Generating Location: B P Station # 11120
 c. Address: 2130 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD
ROCKVILLE CA. 95661 DUBLIN CA

e. Phone No.: (916) 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

G	A	Y	0	5	0	4	2	9	9	6
---	---	---	---	---	---	---	---	---	---	---

0	4	2	9	9	6
---	---	---	---	---	---

 Containers: _____
 j. Description of Waste: SOIL w/HYDROCARBONS k. Quantity:

 Units:

 No.:

 TYPE:

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

Max Donnet Signature

0	5	2	9	9	6
---	---	---	---	---	---

 Shipment Date

- TYPE**
- DM - METAL DRUM
 - DP - PLASTIC DRUM
 - B - BAG
 - BA - 6 MIL. PLASTIC BAG or WRAP
 - T - TRUCK
 - O - OTHER
- UNITS**
- P - POUNDS
 - Y - YARDS
 - M³ - CUBIC METERS
 - Y³ - CUBIC YARDS
 - O - OTHER

Section II TRANSPORTER (Generator completes a-d, Transporter I completes e-g, Transporter II completes h-i)

TRANSPORTER I

a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 Exchange Ct
Livermore CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510 477-2484 e. Truck No.: 623
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. Driver Signature: [Signature] Shipment Date:

--	--	--	--	--	--	--	--	--	--	--	--

TRANSPORTER II

h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. Driver Signature: _____ Shipment Date:

--	--	--	--	--	--	--	--	--	--	--	--

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: UASCO RD d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: _____ Signature: [Signature] Receipt Date:

--	--	--	--	--	--	--	--	--	--	--	--

Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908371

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tosco Marketing b. Generating Location: BP Station 1120
 c. Address: 2132 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: (916) 774-3200 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04288
----	-----	--------	-------

 Containers

j. Description of Waste: Soil w/ Hydrocarbons k. Quantity

		16	Y						
--	--	----	---	--	--	--	--	--	--

 Units No. TYPE

--	--	--	--	--	--	--	--	--	--

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Mace Donnot [Signature]

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 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-c; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I		TRANSPORTER II													
a. Name: <u>GREG TRUCKING</u>		h. Name: _____													
b. Address: <u>P.O. Box 1626</u> <u>San Mateo CA</u>		i. Address: _____													
c. Driver Name/Title: <u>Daryl Crockett</u>		j. Driver Name/Title: _____													
d. Phone No.: <u>415-343-6846</u>	e. Truck No.: <u>DC-3</u>	k. Phone No.: _____	l. Truck No.: _____												
f. Vehicle License No./State: <u>9B09279 CA</u>		m. Vehicle License No./State: _____													
Acknowledgement of Receipt of Materials.		Acknowledgement of Receipt of Materials.													
g. <u>[Signature]</u> <table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>								n. _____	<table border="1" style="display: inline-table;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						
Driver Signature	Shipment Date	Driver Signature	Shipment Date												

Section III DESTINATION (Generator completes a-c; Destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature]

--	--	--	--	--	--

 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d; g. Operator* completes e-f)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908372

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station #1120
 c. Address: 2130 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD.
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: (916) 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

C	Q	4	0	5	0	4	2	9	9	6
---	---	---	---	---	---	---	---	---	---	---

0	4	7	0	0
---	---	---	---	---

 Containers

j. Description of Waste: SOIL w/HYDROCARBONS k. Quantity:

--	--	--	--	--	--	--	--	--	--	--

 Units: Y No. 11 TYPE T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y	- CUBIC YARDS
O	- OTHER

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

Marc DONNOT [Signature] 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-d, Transporter I completes e-g, Transporter II completes h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Greg TRACKINGS</u>	b. Address: <u>POB 1626</u> <u>San Mateo Ca</u>	h. Name: _____	i. Address: _____
c. Driver Name/Title: <u>Kerry Ashworth</u>	d. Phone No.: <u>(415) 3435946</u> e. Truck No.: <u>39</u>	j. Driver Name/Title: _____	k. Phone No.: _____ l. Truck No.: _____
f. Vehicle License No./State: <u>9B11173 Ca</u>	g. <u>[Signature]</u> <u>050196</u> Driver Signature Shipment Date	m. Vehicle License No./State: _____	n. _____ <u>[Signature]</u> <u>050196</u> Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g, Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908373

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETNG p. Generating Location: BT Station
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916) 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
 i. BFI WASTE CODE

CA	405	042996	042	76
----	-----	--------	-----	----

 Containers _____
 j. Description of Waste: SOIL w/ HYDROCARBONS k. Quantity

1	16	Y	1	T
---	----	---	---	---

 Units No. TYPE
 TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
 UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

MARC DONNOT Signature 05/21/96 Shipment Date
 Generator Authorized Agent Name

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>AMERICAN CONSTRUCTION</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: _____
b. Address: <u>567 EXCHANGE CT.</u> <u>LIVERMORE CA 94550</u>	k. Phone No.: _____	l. Truck No.: _____	m. Vehicle License No./State: _____
c. Driver Name/Title: _____	e. Truck No.: _____	n. _____	o. _____
d. Phone No.: <u>510 447-2484</u>	f. Vehicle License No./State: _____	Signature	Signature
g. _____	Acknowledgement of Receipt of Materials.	Shipment Date	Shipment Date

Section III DESTINATION (Generator completes a-c; Destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
LIVERMORE CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. _____ Signature _____ Receipt Date _____
 Name of Authorized Agent

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
 f. Name and Address of Responsible Agency: _____ Operator's Signature _____ Date _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908325

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tosco Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional Dr 100 d. Address: 6400 DuSain Blvd
Knoxville GA 37961 DuSain GA
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: SSIC w/1140000000000000 Quantity:

		16			
--	--	----	--	--	--

 Units: Y No: 1 TYPE: T

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

Marc Donnot Paul J. Frost
 Generator Authorized Agent Name Signature Shipment Date:

0	5	0	1	7	6
---	---	---	---	---	---

- TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
- UNITS
 P - POUNDS
 Y - YARDS
 M - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I	TRANSPORTER II												
a. Name: <u>Greco Trucking</u>	h. Name: _____												
b. Address: <u>17245</u>	i. Address: _____												
c. Driver Name/Title: <u>Paul J. Frost</u>	j. Driver Name/Title: _____												
d. Phone No.: _____	k. Phone No.: _____												
e. Truck No.: <u>7</u>	l. Truck No.: _____												
f. Vehicle License No./State: <u>2-111</u>	m. Vehicle License No./State: _____												
g. Driver Signature: <u>Paul J. Frost</u>	n. Driver Signature: _____												
Shipment Date: <table border="1" style="display: inline-table;"><tr><td>0</td><td>5</td><td>0</td><td>1</td><td>7</td><td>6</td></tr></table>	0	5	0	1	7	6	Shipment Date: <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						
0	5	0	1	7	6								

Section III DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: BET c. Phone No.: _____
 b. Physical Address: WASCO RD d. Mailing Address: _____
Lawrence CO
 e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: _____ Signature: Marc Donnot Receipt Date:

0	5	0	1	7	6
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Section IV ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Print/Type: _____ Operator's Signature: _____ Date:

--	--	--	--	--	--

 f. Name and Address of Responsible Agency: _____
 g. Friable: Non-friable: Both _____ % friable: _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908326

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP Station #1120
 c. Address: 2150 PROFESSIONAL DR 100 d. Address: 6400 DUBLIN BLVD.
ROSEVILLE CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	64276
----	-----	--------	-------

 Containers: _____

j. Description of Waste: SOIL W/ HYDROCARBONS Quantity:

--	--	--	--	--	--	--	--

 Units:

--	--	--	--	--	--	--	--

 No.:

--	--	--	--	--	--	--	--

 TYPE:

--	--	--	--	--	--	--	--

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

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

Marc Bonnot Generator Authorized Agent Name
Pac Shoot Signature
050196 Shipment Date

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Transporter completes all of Section II)

TRANSPORTER I
 a. Name: Greg's Trucking
 b. Address: _____
 c. Driver Name/Title: _____
 d. Phone No.: _____ e. Truck No.: _____
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. Driver Signature: _____ Shipment Date: _____

TRANSPORTER II
 h. Name: GREG'S
 i. Address: _____
 j. Driver Name/Title: Rance Dhami
 k. Phone No.: _____ l. Truck No.: 205
 m. Vehicle License No./State: 9L42 1A09
 Acknowledgement of Receipt of Materials.
 n. Driver Signature: R Dhami Shipment Date: _____

Section III DESTINATION (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Operator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z.)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA.
 e. Discrepancy Indication Space: _____

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

f. Name of Authorized Agent: _____ Signature: Marc Bonnot Receipt Date: 050196

Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Operator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable International and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908327

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TDSCO Marketing b. Generating Location: B P Station 1120
 c. Address: 2130 Professional Ky. #100 d. Address: 6400 DUBLIN BLVD.
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	047996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: Soil w/ hydrocarbons k. Quantity:

	16	4	1	1
--	----	---	---	---

 Units:

--	--	--	--	--

 No.:

--	--	--	--	--

 TYPE:

--	--	--	--	--

 T
 TYPE: DM - METAL DRUM, DP - PLASTIC DRUM, B - BAG, BA - 5 MIL. PLASTIC BAG or WRAP, T - TRUCK, O - OTHER
 UNITS: P - POUNDS, Y - YARDS, M³ - CUBIC METERS, Y³ - CUBIC YARDS, O - OTHER

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

Marc Donnet Signature: [Signature] Shipment Date: 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER I

a. Name: American Construction
 b. Address: 567 Exchange Ct.
Livermore CA 94550
 c. Driver Name/Title: James Gray
 d. Phone No.: 510 447-7184 e. Truck No.: CO91618
 f. Vehicle License No./State: AG 26A723
 Acknowledgement of Receipt of Materials.

g. [Signature] Shipment Date: 050196
 Driver Signature Shipment Date

Section II TRANSPORTER II

h. Name: _____
 i. Address: _____
 Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.

n. _____ Shipment Date: _____
 Driver Signature Shipment Date

Section III DESTINATION (Destination completes all of Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] Receipt Date: 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Operator completes all of Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908328

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO MARKETING b. Generating Location: BP STATION # 1120
 c. Address: 2130 Professional Dr. 100 d. Address: DUNOO DUBLIN BLDG.
Roseville CA. 95661 DUBLIN CA.

e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
----	-----	--------	-------

 Containers _____
 j. Description of Waste: SDIL W/HYDROCARBONS k. Quantity

	16	4	1	T
--	----	---	---	---

 Units No. TYPE
 TYPE: DM - METAL DRUM, DP - PLASTIC DRUM, B - BAG, BA - 6 MIL. PLASTIC BAG or WRAP, T - TRUCK, O - OTHER
 UNITS: P - POUNDS, Y - YARDS, M³ - CUBIC METERS, Y³ - CUBIC YARDS, O - OTHER

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

Marc Donnot [Signature] 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-i)

TRANSPORTER I
 a. Name: Gregs Trucking
 b. Address: Shoreline
San Mateo CA
 c. Driver Name/Title: Dan DeLorenzo
 d. Phone No.: 415 365 1180 e. Truck No.: 11
 f. Vehicle License No./State: 7P 4274
 Acknowledgement of Receipt of Materials.
 g. [Signature] 5/1/96
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, g; Operator completes e-f)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOI** asbestos waste, complete only Sections I, II and III.

No. 908329

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TDSCO Marketing b. Generating Location: BP Station 1120
 c. Address: 2130 Professional Dr #100 d. Address: 6400 DUBLIN BLVD
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916 TTY 3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996
----	-----	--------

04276

 Containers _____

j. Description of Waste: Soil w/ HYDROCARBONS k. Quantity

16

 Units

4

 No.

1

 TYPE

T

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

Marc Donnot [Signature]

050196

 Generator Authorized Agent Name Signature Shipment Date

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator completes a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I	TRANSPORTER II							
a. Name: <u>American Construction</u>	h. Name: _____							
b. Address: <u>567 Exchange Ct</u> <u>Livermore CA 94550</u>	i. Address: _____							
c. Driver Name/Title: <u>James Hiron</u>	j. Driver Name/Title: _____							
d. Phone No.: <u>510 447 2484</u> e. Truck No.: <u>608618</u>	k. Phone No.: _____ l. Truck No.: _____							
f. Vehicle License No./State: <u>4960225</u>	m. Vehicle License No./State: _____							
g. <u>[Signature]</u> <table border="1" style="display: inline-table;"><tr><td>050196</td></tr></table> Driver Signature Shipment Date	050196	n. _____ <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Driver Signature Shipment Date						
050196								

Section III DESTINATION (Generator completes e-f; Destination site completes a-d)

a. Site Name: BFE c. Phone No.: _____
 b. Physical Address: UNSCO RD d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature]

050196

Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes e-f, g; Operator completes a.)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____
 Print/Type Operator's Signature Date
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908330

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: h2seo Marketing b. Generating Location: BP. Station # 11120
 c. Address: 2132 Professional Dr #100 d. Address: 6900 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3500 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
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 Containers:

DM - METAL DRUM	DP - PLASTIC DRUM
B - BAG	BA - 6 MIL. PLASTIC BAG
T - TRUCK	or WRAP
O - OTHER	

 j. Description of Waste: soil w/ hydrocarbons k. Quantity:

			16	Y		1	T
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GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if the waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Marc Donnet Paul Janet
 Generator Authorized Agent Name Signature
 Shipment Date: 050196

Section II TRANSPORTER (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Transporter completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Transporter II completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z.)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Greys Trucking</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: <u>Rama</u>
b. Address: _____	k. Phone No.: _____	l. Truck No.: <u>205</u>	m. Vehicle License No./State: <u>9C42409</u>
c. Driver Name/Title: _____	e. Truck No.: _____	n. <u>B. E. Lema</u>	o. _____
d. Phone No.: _____	g. _____	p. _____	q. _____
f. Vehicle License No./State: _____	Driver Signature	Driver Signature	Driver Signature
Acknowledgement of Receipt of Materials.	Shipment Date	Shipment Date	Shipment Date

Section III DESTINATION (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Destination Site completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z.)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vaseo RD d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Heup 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Asbestos Operator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z.)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
 e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908331

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TDSCO marketing b. Generating Location: BSP STATION 1120
 c. Address: 2130 PROFESSIONAL DR. #200 d. Address: 6400 DUBLIN BLVD.
ROSEVILLE CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774-3200 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers _____
 j. Description of Waste: SOIL w/14% HYDROCARBONS Quantity:

		16	
--	--	----	--

 Units:

Y			
---	--	--	--

 No.:

1			
---	--	--	--

 TYPE:

T			
---	--	--	--

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG of WRAP
 T - TRUCK
 O - OTHER

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

MARC DONNOT [Signature] 052496
 Generator Authorized Agent Name Signature Shipment Date

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Transporter I completes all of Section II; Transporter II completes a-1)

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 EXCHANGE CR.
LIVERMORE CA. 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510 447 2484 e. Truck No.: 623
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. [Signature]

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 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n.

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 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; Destination Site completes a-1)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] 052496
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-c; Asbestos Operator completes a-1)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908332

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: ToSCO MARKETING b. Generating Location: BP Station # 1120
 c. Address: 2130 Professional Dr d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916) 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	04	2996
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04	276
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 Containers: _____
 j. Description of Waste: SOL W/HYDROCARBONS k. Quantity:

1	6
---	---

 Units:

4

 No.:

1

 TYPE:

T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Mark Donnet Generator Authorized Agent Name [Signature] Signatory 050196 Shipment Date

Section II: TRANSPORTER (Generator completes I, Transporter completes II)

TRANSPORTER I
 a. Name: Greys trucking
 b. Address: 8061626
SAN MATEO Ca
 c. Driver Name/Title: Kerry Ashwood
 d. Phone No.: (415) 343 5446 e. Truck No.: 39
 f. Vehicle License No./State: 9B11173 Ca
 Acknowledgement of Receipt of Materials.
 g. [Signature] Driver Signature 050196 Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____ Driver Signature _____ Shipment Date

Section III: DESTINATION (Generator completes I, Destination fills complete II)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RP d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] Name of Authorized Agent [Signature] Signature 050196 Receipt Date

Section IV: ASBESTOS (Generator completes I, Operator completes II)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908333

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: ISCO MARKETING b. Generating Location: BP Station #1120
 c. Address: 2132 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD.
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916) 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	4	0	5	0	4	2	9	7	6
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 . Containers

0	4	2	7	6
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 TYPE
 j. Description of Waste: SOIL w/HYDROCARBONS k. Quantity

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 Units

--	--	--	--	--	--	--	--	--	--

 No.

--	--	--	--	--	--	--	--	--	--

 TYPE

--	--	--	--	--	--	--	--	--	--

 T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Maic Donnot [Signature]

0	5	2	4	9	6
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 Generator Authorized Agent Name Signature Shipment Date

Section II: TRANSPORTER (Transporter I completes all of Section II)

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 EXCHANGE CT
LIVERMORE CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510 447-2484 e. Truck No.: 623
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. [Signature]

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 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n.

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 Driver Signature Shipment Date

Section III: DESTINATION (Carrier completes all of Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature]

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 Name of Authorized Agent Signature Receipt Date

Section IV: ASBESTOS (Operator completes all of Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908334

Section I GENERATOR

a. Generator Name: IDSCO marketing b. Generating Location: BP Station #11120
 c. Address: 2130 Professional Ct. 100 d. Address: 6400 DUBLIN BLVD.
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
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 Containers: _____
 j. Description of Waste: SOL W/HYDROCARBONS Quantity:

1	6
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 Units: Y No.: 1 TYPE: T

- TYPE**
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
- UNITS**
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

Max DONNOT [Signature] 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER

TRANSPORTER I
 a. Name: Greys Trucking
 b. Address: Shoreline
San Mateo Ca
 c. Driver Name/Title: Dan Delgado
PRINT/TYPE
 d. Phone No.: 415 367 7860 e. Truck No.: 11
 f. Vehicle License No./State: 9B09224
 Acknowledgement of Receipt of Materials.
 g. Dan Delgado 51196
Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 j. Address: _____
 j. Driver Name/Title: _____
PRINT/TYPE
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
Driver Signature Shipment Date

Section III DESTINATION

a. Site Name: BFF c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050196
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____
Print/Type
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908335

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tosco Marketing b. Generating Location: B.P. Station #1120
 c. Address: 2130 Professional Ct #100 d. Address: 6400 DUBLIN Blvd.
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916) 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996
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 Containers

0	4	0	6
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 TYPE
 j. Description of Waste: Soil w/HYDROCARBONS k. Quantity 04276 Units 16 No. 1 TYPE T

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TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Marc Donno [Signature] 050296
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z, aa, ab, ac, ad, ae, af, ag, ah, ai, aj, ak, al, am, an, ao, ap, aq, ar, as, at, au, av, aw, ax, ay, az, ba, bb, bc, bd, be, bf, bg, bh, bi, bj, bk, bl, bm, bn, bo, bp, bq, br, bs, bt, bu, bv, bw, bx, by, bz, ca, cb, cc, cd, ce, cf, cg, ch, ci, cj, ck, cl, cm, cn, co, cp, cq, cr, cs, ct, cu, cv, cw, cx, cy, cz, da, db, dc, dd, de, df, dg, dh, di, dj, dk, dl, dm, dn, do, dp, dq, dr, ds, dt, du, dv, dw, dx, dy, dz, ea, eb, ec, ed, ee, ef, eg, eh, ei, ej, ek, el, em, en, eo, ep, eq, er, es, et, eu, ev, ew, ex, ey, ez, fa, fb, fc, fd, fe, ff, fg, fh, fi, fj, fk, fl, fm, fn, fo, fp, fq, fr, fs, ft, fu, fv, fw, fx, fy, fz, ga, gb, gc, gd, ge, gf, gg, gh, gi, gj, gk, gl, gm, gn, go, gp, gq, gr, gs, gt, gu, gv, gw, gx, gy, gz, ha, hb, hc, hd, he, hf, hg, hh, hi, hj, hk, hl, hm, hn, ho, hp, hq, hr, hs, ht, hu, hv, hw, hx, hy, hz, ia, ib, ic, id, ie, if, ig, ih, ii, ij, ik, il, im, in, io, ip, iq, ir, is, it, iu, iv, iw, ix, iy, iz, ja, jb, jc, jd, je, jf, jg, jh, ji, jj, jk, jl, jm, jn, jo, jp, jq, jr, js, jt, ju, jv, jw, jx, jy, jz, ka, kb, kc, kd, ke, kf, kg, kh, ki, kj, kl, km, kn, ko, kp, kq, kr, ks, kt, ku, kv, kw, kx, ky, kz, la, lb, lc, ld, le, lf, lg, lh, li, lj, lk, ll, lm, ln, lo, lp, lq, lr, ls, lt, lu, lv, lw, lx, ly, lz, ma, mb, mc, md, me, mf, mg, mh, mi, mj, mk, ml, mm, mn, mo, mp, mq, mr, ms, mt, mu, mv, mw, mx, my, mz, na, nb, nc, nd, ne, nf, ng, nh, ni, nj, nk, nl, nm, no, np, nq, nr, ns, nt, nu, nv, nw, nx, ny, nz, oa, ob, oc, od, oe, of, og, oh, oi, oj, ok, ol, om, on, oo, op, oq, or, os, ot, ou, ov, ow, ox, oy, oz, pa, pb, pc, pd, pe, pf, pg, ph, pi, pj, pk, pl, pm, pn, po, pp, pq, pr, ps, pt, pu, pv, pw, px, py, pz, qa, qb, qc, qd, qe, qf, qg, qh, qi, qj, qk, ql, qm, qn, qo, qp, qq, qr, qs, qt, qu, qv, qw, qx, qy, qz, ra, rb, rc, rd, re, rf, rg, rh, ri, rj, rk, rl, rm, rn, ro, rp, rq, rr, rs, rt, ru, rv, rw, rx, ry, rz, sa, sb, sc, sd, se, sf, sg, sh, si, sj, sk, sl, sm, sn, so, sp, sq, sr, ss, st, su, sv, sw, sx, sy, sz, ta, tb, tc, td, te, tf, tg, th, ti, tj, tk, tl, tm, tn, to, tp, tq, tr, ts, tt, tu, tv, tw, tx, ty, tz, ua, ub, uc, ud, ue, uf, ug, uh, ui, uj, uk, ul, um, un, uo, up, uq, ur, us, ut, uu, uv, uw, ux, uy, uz, va, vb, vc, vd, ve, vf, vg, vh, vi, vj, vk, vl, vm, vn, vo, vp, vq, vr, vs, vt, vu, vv, vw, vx, vy, vz, wa, wb, wc, wd, we, wf, wg, wh, wi, wj, wk, wl, wm, wn, wo, wp, wq, wr, ws, wt, wu, wv, ww, wx, wy, wz, xa, xb, xc, xd, xe, xf, xg, xh, xi, xj, xk, xl, xm, xn, xo, xp, xq, xr, xs, xt, xu, xv, xw, xx, xy, xz, ya, yb, yc, yd, ye, yf, yg, yh, yi, yj, yk, yl, ym, yn, yo, yp, yq, yr, ys, yt, yu, yv, yw, yx, yy, yz, za, zb, zc, zd, ze, zf, zg, zh, zi, zj, zk, zl, zm, zn, zo, zp, zq, zr, zs, zt, zu, zv, zw, zx, zy, zz)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct
Livermore CA. 94550
 c. Driver Name/Title: [Signature]
 d. Phone No.: 510 847 2484 e. Truck No.: 623
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. [Signature]

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 Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. [Signature]

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 Shipment Date

Section III DESTINATION (Generator completes a, b, c, destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 061096
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a, b, c, Operator completes e-f)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable, Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908336

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TISCO Marketing b. Generating Location: BP Station #1120
 c. Address: 2130 PROFESSIONAL CT #100 d. Address: 4400 DUBLIN BLVD.
ROSEVILLE CA 95661 DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	04	2996	04276
----	-----	----	------	-------

 Containers _____
 j. Description of Waste: SOIL W/ HYDROCARBONS k. Quantity

		16			
--	--	----	--	--	--

 Units

Y			
---	--	--	--

 No.

--	--	--	--	--	--

 TYPE

T			
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TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Marc Donnot Marc Donnot 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes I; Transporter I completes II; Transporter II completes I-III)

TRANSPORTER I
 a. Name: Greys Trucking
 b. Address: _____
 c. Driver Name/Title: _____ PRINT/TYPE
 d. Phone No.: _____ e. Truck No.: _____
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g.

--	--	--	--	--	--

 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: Rawa PRINT/TYPE
 k. Phone No.: _____ l. Truck No.: 205
 m. Vehicle License No./State: 9C42409
 Acknowledgement of Receipt of Materials.
 n. [Signature]

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 Driver Signature Shipment Date

Section III DESTINATION (Generator completes I-III; Destination site completes I-IV)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address _____
BERNARD CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes I-III; Operator completes I-IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III

No. 908337

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: JASCO MARKETING b. Generating Location: BP Station #1120
c. Address: 2135 PROFESSIONAL CT. 700 d. Address: 6400 DURBIN BLVD
Princeton CA. 95661 DURBIN CA.

e. Phone No.: 916 774-3200 f. Phone No.: _____
If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

C	A	4	0	5	0	4	2	9	9	6	0	4	2	7	6
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 Containers _____

j. Description of Waste: SIL W/HYDROCARBONS k. Quantity

				1	6
--	--	--	--	---	---

 Units

Y					
---	--	--	--	--	--

 No.

1					
---	--	--	--	--	--

 TYPE

T					
---	--	--	--	--	--

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

MAVE DONN-T Signature [Signature] Shipment Date 050196
Generator Authorized Agent Name _____

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

Section II TRANSPORTER (Generator completes I, II, III and IV; transporter I completes I, II, III and IV; transporter II completes II, III)

TRANSPORTER I
a. Name: American Construction
b. Address: 567 EXCHANGE CT
LIVERMORE CA 94550
c. Driver Name/Title: _____
d. Phone No.: _____ e. Truck No.: 3
f. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

TRANSPORTER II
h. Name: _____
i. Address: _____
j. Driver Name/Title: _____
k. Phone No.: _____ l. Truck No.: _____
m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.

g. [Signature] Shipment Date

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n. [Signature] Shipment Date

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Section III DESTINATION (Generator completes I, II, III and IV; destination site completes I, II, III)

a. Site Name: BFI c. Phone No.: _____
b. Physical Address: WILSON RD. d. Mailing Address _____
LIVERMORE CA

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] Receipt Date 050196
Name of Authorized Agent _____

Section IV ASBESTOS (Generator completes I, II, III and IV; destination site completes I, II, III)

a. Operator's Name: _____ b. Operator's Phone No.: _____
c. Operator's Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date

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f. Name and Address of Responsible Agency: _____
g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 908338

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TOSCO marketing b. Generating Location: BP Station #1120
 c. Address: 2130 Professional D. 100 d. Address: 6400 Dublin Blvd.
Breenville CA. 95661 Dublin CA.

e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	047996	04276
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 Containers _____
 j. Description of Waste: SOIL w/HYDROCARBONS k. Quantity

16

 Units Y No. 1 TYPE T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER
UNITS	
P	- POUNDS
Y	- YARDS
M	- CUBIC METERS
Y	- CUBIC YARDS
O	- OTHER

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

Marc Donnet Generator Authorized Agent Name
[Signature] Signature
050196 Shipment Date

Section II TRANSPORTER (Transporter I completes a. through g.; Transporter II completes h. through n.)

TRANSPORTER I			TRANSPORTER II		
a. Name: <u>Cregs Trucking</u>	b. Address: <u>Shelton</u>		h. Name: _____	i. Address: _____	
c. Driver Name/Title: _____	d. Phone No.: <u>415 3 5730</u>	e. Truck No.: <u>11</u>	j. Driver Name/Title: _____	k. Phone No.: _____	l. Truck No.: _____
f. Vehicle License No./State: <u>FB 49724</u>			m. Vehicle License No./State: _____		
g. Driver Signature: <u>[Signature]</u>			n. Driver Signature: _____		
Shipment Date: <u>5/1/96</u>			Shipment Date: _____		

Section III DESTINATION (Generator completes a. through d.; Destination Site completes e. through f.)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____ Signature: [Signature] Receipt Date: 050196

Section IV ASBESTOS (Generator completes a. through d.; Operator completes e. through f.)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908339

Section I GENERATOR (Complete all of Section I)

a. Generator Name: Tosco Marketing b. Generating Location: BP Station
 c. Address: 2132 Professional Dr #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916-774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	705	042996	04276
----	-----	--------	-------

 Containers

j. Description of Waste: Slur w/ HYDROCARBONS k. Quantity

1	6
---	---

 Units

Y

 No.

1

 TYPE

T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

James R Gray Generator Authorized Agent Name
James R Gray Signature
050296 Shipment Date

Section II TRANSPORTER I (Complete all of Section II) TRANSPORTER II (Complete II-1)

TRANSPORTER I
 a. Name: _____
 b. Address: _____
 c. Driver Name/Title: _____
 d. Phone No.: _____ e. Truck No.: _____
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials:
 g. _____
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: Greys Trucking
 i. Address: POB 1626
SAN MARINO CA.
 j. Driver Name/Title: Perry Ashwell
 k. Phone No.: 4153445916 l. Truck No.: 39
 m. Vehicle License No./State: 9B11173 CA
 Acknowledgement of Receipt of Materials:
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION (Complete all of Section III)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA

e. Discrepancy Indication Space: _____

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

f. _____
 Name of Authorized Agent Signature [Signature] Receipt Date

05	02	96
----	----	----

Section IV ASBESTOS (Complete all of Section IV)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
 Print/Type Operator's Signature _____ Date _____

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908340

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: tosco marketing b. Generating Location: BP station 1120
 c. Address: 2132 PROFESSIONAL DR. #100 d. Address: 6400 DUBLIN BLVD.
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774 3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: SOIL w/HYDROCARBONS k. Quantity:

16	Y
----	---

 Units:

1	T
---	---

 No.: _____ TYPE: _____
 l.

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

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

Mark Donnat Signature: _____ Shipment Date: 050196
 Generator Authorized Agent Name _____

Section II TRANSPORTER (Generator completes a-f; Transporter I completes g-i; Transporter II completes j-n)

TRANSPORTER I
 a. Name: Gress Trucking
 b. Address: _____
 c. Driver Name/Title: _____
 d. Phone No.: _____ e. Truck No.: _____
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. _____
 Driver Signature _____ Shipment Date _____

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: Bawa
 k. Phone No.: _____ l. Truck No.: 205
 m. Vehicle License No./State: 9C42409
 Acknowledgement of Receipt of Materials.
 n. B. Bawa _____
 Driver Signature _____ Shipment Date _____

Section III DESTINATION (Generator completes a-c; Destination completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RP. d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____
 Name of Authorized Agent _____ Signature: _____ Receipt Date: 050196

Section IV ASBESTOS (Generator completes a-d; Operator completes e-g)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-Friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908341

Section I GENERATOR (Generator completes this Section)

a. Generator Name: USCO MARKETING b. Generating Location: BP STATION #1120
 c. Address: 2132 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD.
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3200 f. Phone No.:

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.:

i. BFI WASTE CODE

C	A	4	0	5	0	4	2	9	9	6	0	4	2	7	6
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 Containers: _____
 j. Description of Waste: SOL W/ HYDROCARBONS k. Quantity:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Units: Y No. 1 TYPE: T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

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

MARC DONAT [Signature] 050296
 Generator Authorized Agent Name Signature Shipment Date

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Carrier completes this Section)

TRANSPORTER I		TRANSPORTER II	
a. Name:	<u>[Redacted]</u>	h. Name:	<u>Gregs Trucking</u>
b. Address:	<u>[Redacted]</u>	i. Address:	_____
c. Driver Name/Title:	<u>[Redacted]</u>	j. Driver Name/Title:	_____
d. Phone No.:	<u>[Redacted]</u>	k. Phone No.:	_____
e. Truck No.:	<u>18</u>	l. Truck No.:	_____
f. Vehicle License No./State:	<u>9C37040</u>	m. Vehicle License No./State:	_____
Acknowledgement of Receipt of Materials.		Acknowledgement of Receipt of Materials.	
<u>[Signature]</u>	<u>050296</u>	<u>[Signature]</u>	<u>_____</u>
Driver Signature	Shipment Date	Driver Signature	Shipment Date

Section III DESTINATION (Destination also completes this Section)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] 050296
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Operator completes this Section)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908342

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TDSCO Marketing b. Generating Location: BP Station
 c. Address: 2132 Professional Dr. #100 d. Address: 6400 DuBun Blvd
Roseville CA. 95661 San Bruno CA.
 e. Phone No.: 916 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
----	-----	--------	-------

 Containers _____ TYPE
 j. Description of Waste: soil w/ hydrocarbons k. Quantity _____ Units _____ No. _____ TYPE _____
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

Mark Donnot Generator Authorized Agent Name [Signature] Signature 050196 Shipment Date

Section II TRANSPORTER (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Transporter I completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Transporter II completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z.)

TRANSPORTER I
 a. Name: Bregs Trucking
 b. Address: POB 1626
San Mateo Ca.
 c. Driver Name/Title: Perry Ashwood
 d. Phone No.: (415) 343 5946 e. Truck No.: 39
 f. Vehicle License No./State: 9B 11123 Ca.
 Acknowledgement of Receipt of Materials.
 g. [Signature] Driver Signature 050196 Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____ Driver Signature _____ Shipment Date

Section III DESTINATION (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Destination completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z.)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address _____
Livermore CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] Name of Authorized Agent 050196 Receipt Date

Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Operator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z.)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908343

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TRISCO MARKETING b. Generating Location: BP Station #11120
 c. Address: 2132 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD.
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers _____

j. Description of Waste: SIL W/ HYDROCARBONS k. Quantity

--	--	--	--	--	--

 Units

--	--	--	--	--	--

 No.

--	--	--	--	--	--

 TYPE

--	--	--	--	--	--

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

MARC DONNET [Signature]

050196

 Generator Authorized Agent Name Signature Shipment Date

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Transporter I completes a-g and Transporter II completes h-n)

TRANSPORTER I		TRANSPORTER II								
a. Name: <u>American Construction</u>	h. Name: _____									
b. Address: <u>567 Exchange Ct</u> <u>Livermore CA 94550</u>	i. Address: _____									
c. Driver Name/Title: <u>JAMES GOON</u> <small>PRINT/TITLE</small>	j. Driver Name/Title: _____									
d. Phone No.: <u>510 447-2184</u>	k. Phone No.: _____									
e. Truck No.: <u>607618</u>	l. Truck No.: _____									
f. Vehicle License No./State: <u>AL367A23</u>	m. Vehicle License No./State: _____									
Acknowledgement of Receipt of Materials.		Acknowledgement of Receipt of Materials.								
g. <u>[Signature]</u> <table border="1"><tr><td>050196</td></tr></table> <small>Driver Signature Shipment Date</small>	050196	n. _____ <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> <small>Driver Signature Shipment Date</small>								
050196										

Section III DESTINATION (Operator completes a-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature]

050196

 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Operator completes a-f)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
Print/Type

f. Name and Address of Responsible Agency: _____



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908344

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: ISCO Marketing b. Generating Location: BP Station 11120
 c. Address: 2130 PROFESSIONAL DR. 100 d. Address: 6700 DUBLIN BLVD.
Roseville CA 95661 Dublin CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996
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04276

 Containers
 j. Description of Waste: Soln w/ HYDROCARBONS k. Quantity

16

 Units Y No.

1

 TYPE

T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Mary Donnat Generator Authorized Agent Name [Signature] Signature 050196 Shipment Date

Section II TRANSPORTER (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Transporter I completes e-g. Transporter II completes h-j.)

TRANSPORTER I
 a. Name: Greys Trucking
 b. Address: POB 1626
San Mateo Ca.
 c. Driver Name/Title: Kelly Ashworth
 d. Phone No.: 415 343 5946 e. Truck No.: 39
 f. Vehicle License No./State: 7B11123 Ca.
 Acknowledgement of Receipt of Materials.
 g. [Signature] Driver Signature 050196 Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____

Section III DESTINATION (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Destination site completes a-c.)

a. Site Name: BFI 1 c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address _____
Livermore CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] Name of Authorized Agent 050196 Receipt Date

Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z. Operator completes a-c.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908345

Section I GENERATOR

a. Generator Name: tosco MARKETING b. Generating Location: BP Station # 1120
 c. Address: 2130 Professional Dr d. Address: 6400 DUBLIN BWD
Riverdale CA 95661 DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
----	-----	--------	-------

 Containers _____
 j. Description of Waste: Soil w/ HYDROCARBONS k. Quantity

16

 Units

Y

 No.

1

 TYPE

T

- TYPE**
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
- UNITS**
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

More Donut _____

050196

 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER

TRANSPORTER I	TRANSPORTER II												
a. Name: <u>American Construction</u>	h. Name: _____												
b. Address: <u>567 Exchange Ct</u> <u>Livermore CA 94550</u>	i. Address: _____												
c. Driver Name/Title: _____	j. Driver Name/Title: _____												
d. Phone No.: <u>510 447-2484</u> e. Truck No.: <u>5</u>	k. Phone No.: _____ l. Truck No.: _____												
f. Vehicle License No./State: _____	m. Vehicle License No./State: _____												
g. <u>Hee</u> _____ <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Shipment Date							n. _____ <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Shipment Date						

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco RD. d. Mailing Address _____
Livermore CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ Blaker

050196

 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908346

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tosco Marketing b. Generating Location: BP Station #11120
 c. Address: 2130 Professional Dr 100 d. Address: 6400 DUBLIN BLVD.
Roseville CA 95661 DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
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 Containers: _____

j. Description of Waste: Soil w/ hydrocarbons k. Quantity:

1	6
---	---

 Units: Y No.:

1	1
---	---

 TYPE:

T

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

Marc Donnot Generator Authorized Agent Name [Signature] Signature 050196 Shipment Date

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator completes a-g; Transporter I completes h-g; Transporter II completes h-i)

TRANSPORTER I		TRANSPORTER II																			
a. Name: <u>Exegs Trucking</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: <u>Rana S Dhanu</u>																		
b. Address: _____	k. Phone No.: _____	l. Truck No.: <u>245</u>	PRINT/TYPE																		
c. Driver Name/Title: _____	e. Truck No.: _____	m. Vehicle License No./State: <u>9C 42099</u>	ACKNOWLEDGEMENT OF RECEIPT OF MATERIALS																		
d. Phone No.: _____	f. Vehicle License No./State: _____	g. <table border="1"><tr><td>0</td><td>2</td><td>3</td><td>1</td><td>9</td><td>6</td></tr></table>	0	2	3	1	9	6	n. <u>Bethawi</u> <table border="1"><tr><td>0</td><td>2</td><td>3</td><td>1</td><td>9</td><td>6</td></tr></table>	0	2	3	1	9	6						
0	2	3	1	9	6																
0	2	3	1	9	6																
ACKNOWLEDGEMENT OF RECEIPT OF MATERIALS	g. <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>							h. <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>							i. <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>						
Driver Signature	Shipment Date	Driver Signature	Shipment Date																		

Section III DESTINATION (Generator completes a-c; Destination Site completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature] Name of Authorized Agent 050196 Receipt Date

Section IV ASBESTOS (Generator completes a-c; Operator completes d-f)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908347

Section I GENERATOR

a. Generator Name: fosco Marketing b. Generating Location: BP Station # 1120
 c. Address: 2132 Professional Dr. 100 d. Address: 6400 Dublin Blvd
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774 3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
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 Containers _____ TYPE _____
 j. Description of Waste: Soil w/MDROCARBONS k. Quantity

116

 Units

Y

 No.

1

 TYPE

T

- TYPE**
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
- UNITS**
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

Marc Donnat Signature 050196 Shipment Date
 Generator Authorized Agent Name

Section II TRANSPORTER

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct
Livermore CA. 94550
 c. Driver Name/Title: James Gray
 d. Phone No.: 510 447-2484 e. Truck No.: 6087615
 f. Vehicle License No./State: A6362423
 Acknowledgement of Receipt of Materials.
 g. James Gray Signature 050196 Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____ Signature _____ Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address _____
Livermore CA

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. MCC Signature 050196 Receipt Date
 Name of Authorized Agent

Section IV ASBESTOS

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908348

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tosco Marketing b. Generating Location: BP Station #172
 c. Address: 2130 Professional Dr. Roseville CA 95661 d. Address: 6400 DUBLIN BLVD DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE: CA 405 042996 04276 Containers: _____
 j. Description of Waste: SOIL WITH DI CARBONS k. Quantity: _____ Units: 4 No.: 1 TYPE: T

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

Marc Donnot Signature: [Signature] Shipment Date: 050196
 Generator Authorized Agent Name

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER
UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

Section II TRANSPORTER (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z; Transporter I completes a-g; Transporter II completes h-n)

TRANSPORTER I
 a. Name: Gregs Trucking
 b. Address: 2400 View San Mateo
 c. Driver Name/Title: Dan Delamater
 d. Phone No.: 415 368 7860 e. Truck No.: 11
 f. Vehicle License No./State: 9R09224
 Acknowledgement of Receipt of Materials.
 g. Driver Signature: [Signature] Shipment Date: 5/1/96

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____ Shipment Date: _____

Section III DESTINATION (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z; Destination site completes a-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD LIVERMORE CA d. Mailing Address: _____
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: [Signature] Receipt Date: 050196

Section IV ASBESTOS (Generator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z; Operator completes a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, p, q, r, s, t, u, v, w, x, y, z)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 908349

Section I GENERATOR (Generator to complete all of Section I)

a. Generator Name: Tasco Marketing b. Generating Location: BP Station 11120
 c. Address: 2130 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774 3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	04276
----	-----	--------	-------

 Containers: _____
 j. Description of Waste: Soil w/ HYDROCARBONS k. Quantity:

16	Y	1	T
----	---	---	---

 Units: _____ No.: _____ TYPE: _____
 L - METAL DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

Marc Doucet Signature 050196 Shipment Date
 Generator Authorized Agent Name _____

Section II TRANSPORTER (Generator to complete 1-3; Transporter I to complete 4-5; Transporter II to complete 6-7)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 EXCHANGE CT
Livermore CA 94550
 c. Driver Name/Title: JAMES GRIFFIN
 d. Phone No.: 510 447 2484 e. Truck No.: 602760
 f. Vehicle License No./State: AL362423
 Acknowledgement of Receipt of Materials: _____
 g. [Signature] 050196 Shipment Date
 Driver Signature _____

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____
 n. _____ Shipment Date

Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____

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

f. [Signature] 050196 Receipt Date
 Name of Authorized Agent _____ Signature _____

Section IV ASBESTOS

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908350

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Jasco Marketing b. Generating Location: BP Station # 11120
 c. Address: 2130 Professional Dr #100 d. Address: 6400 DUBLIN BLVD
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	4	0	5	0	4	2	9	9	6	0	4	2	7	6
----	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 Containers: _____
 j. Description of Waste: SOIL W/HYDROCARBONS k. Quantity: _____ Units: Y No. 1 TYPE: _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Marc Donnat [Signature] 05/19/96
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes I, transporter II completes II)

TRANSPORTER I
 a. Name: Greg Trucking
 b. Address: Shanline
San Mateo CA
 c. Driver Name/Title: Dan Delgomo
 d. Phone No.: 415 365 7860 Truck No.: 11
 e. Vehicle License No./State: 9B09224
 Acknowledgement of Receipt of Materials.
 g. Dan Delgomo 5/1/96
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ I. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION (Carrier completes I, consignee completes II)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ [Signature] 05/19/96
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Operator completes all of Section IV)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908351

Section I GENERATOR

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station
 c. Address: 2130 PROFESSIONAL DR. #100 d. Address: 6400 DUBLIN BLVD
ROSELILLE CA 95061 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	4	0	5	0	4	2	9	9	6	0	4	2	7	6
----	---	---	---	---	---	---	---	---	---	---	---	---	---	---

 Containers: _____
 j. Description of Waste: SOIL W/ HYDROCARBONS k. Quantity:

1	1	6	7
---	---	---	---

 Units:

1	1	1	1
---	---	---	---

 No.: _____ TYPE:

T

 TYPE: DM - METAL DRUM, DP - PLASTIC DRUM, B - BAG, BA - 6 MIL. PLASTIC BAG or WRAP, T - TRUCK, O - OTHER
 UNITS: P - POUNDS, Y - YARDS, M³ - CUBIC METERS, Y³ - CUBIC YARDS, O - OTHER

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

MOVE DOWN Generator Authorized Agent Name: _____ Signature: [Signature] Shipment Date:

0	5	0	1	9	6
---	---	---	---	---	---

Section II TRANSPORTER

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 EXCHANGE CT.
LIVERMORE CA 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510 447 2484 e. Truck No.: 5
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. [Signature] Shipment Date:

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 TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____ Shipment Date:

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Section III DESTINATION

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD.
LIVERMORE CA. d. Mailing Address: _____
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: _____ Signature: [Signature] Receipt Date:

0	5	0	1	9	6
---	---	---	---	---	---

Section IV ASBESTOS

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
 e. Operator's* Name & Title: _____ Print/Type: _____ Operator's Signature: _____ Date:

--	--	--	--	--	--

 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908352

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station
 c. Address: 2130 Professional Dr 100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.:

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.:

i. BFI WASTE CODE

CA	405	04	299	6
----	-----	----	-----	---

04	27	6
----	----	---

 Containers

- TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG
 or WRAP
 T - TRUCK
 O - OTHER

j. Description of Waste: SIL W/AHYDROCARBONS k. Quantity

		1	6
--	--	---	---

 Units

Y			
---	--	--	--

 No.

		1	
--	--	---	--

 TYPE

T			
---	--	--	--

- UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

Mark Donnot Generator Authorized Agent Name [Signature] Signature 050196 Shipment Date

Section II TRANSPORTER (Generator completes a; Transporter I completes b-g; Transporter II completes h-n)

TRANSPORTER I

TRANSPORTER II

a. Name: Creg Trucking
 b. Address: _____
 c. Driver Name/Title: _____
 d. Phone No.: _____ e. Truck No.: _____
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. Driver Signature _____ Shipment Date _____

h. Name: Rawa
 i. Address: _____
 j. Driver Name/Title: Rawa
 k. Phone No.: _____ l. Truck No.: 205
 m. Vehicle License No./State: 9C42409
 Acknowledgement of Receipt of Materials.
 n. Driver Signature _____ Shipment Date _____

Section III DESTINATION (Generator completes a-c; Destination site completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: TASCO RD
Livermore CA. d. Mailing Address: _____
 e. Discrepancy Indication Space: _____

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

f. Name of Authorized Agent [Signature] Signature 050196 Receipt Date

Section IV ASBESTOS (Generator completes a-d; Operator completes e-g)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908353

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Lasco Marketing b. Generating Location: BP Station
 c. Address: 2130 Professional Dr 100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA
 e. Phone No.: 916 774-3000 f. Phone No.:

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.:

i. BFI WASTE CODE

CA	405	042996	04276
----	-----	--------	-------

 Containers

j. Description of Waste: SILIC W/HYDROCARBONS k. Quantity

		16	
--	--	----	--

 Units

		1	
--	--	---	--

 No.

		1	
--	--	---	--

 TYPE

			T
--	--	--	---

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Marc Donnet Signature 050196 Shipment Date
 Generator Authorized Agent Name

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-i)

TRANSPORTER I	TRANSPORTER II
a. Name: <u>American Construction</u>	h. Name: _____
b. Address: <u>567 Exchange Ct</u> <u>Livermore CA 94550</u>	i. Address: _____
c. Driver Name/Title: <u>James Gray</u> <u>driver</u>	Driver Name/Title: _____
d. Phone No.: <u>510 447 7884</u> e. Truck No.: <u>608/618</u>	k. Phone No.: _____ i. Truck No.: _____
f. Vehicle License No./State: <u>AL267923</u>	m. Vehicle License No./State: _____
Acknowledgement of Receipt of Materials.	Acknowledgement of Receipt of Materials.
g. <u>James Gray</u> <u>050196</u> Driver Signature Shipment Date	Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-c; destination site completes d-f)

a. Site Name: BFI Phone No.: _____
 b. Physical Address: LASCO RD
Livermore CA Mailing Address: _____
 c. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050196
Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d; Operator completes e-g)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908354

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station #1120
 c. Address: 2132 PROFESSIONAL DR #100 d. Address: 6400 LA BATA BLVD
Roseville CA. 95661 San Jose CA.
 e. Phone No.: 916 774 3200 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
 i. BFI WASTE CODE:

CA	405	04	2996	04	267
----	-----	----	------	----	-----

 Containers: _____
 j. Description of Waste: SOIL W/ HYDROCARBONS k. Quantity:

16	7	0	0	0	0
----	---	---	---	---	---

 Units: _____ No. _____ TYPE: _____
 TYPE: DM - METAL DRUM, DP - PLASTIC DRUM, B - BAG, BA - 6 MIL. PLASTIC BAG or WRAP, T - TRUCK, O - OTHER
 UNITS: P - POUNDS, Y - YARDS, M³ - CUBIC METERS, Y³ - CUBIC YARDS, O - OTHER

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

Marc DUNN Signature: [Signature] Shipment Date: 050196
 Generator Authorized Agent Name _____ Signature _____ Shipment Date _____

Section II TRANSPORTER (Generator completes a-c; Transporter I completes e-g; Transporter II completes f-h)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Greg Trucking</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: _____
b. Address: <u>POB 1626</u>	i. Address: _____	k. Phone No.: _____	l. Truck No.: _____
c. Driver Name/Title: <u>Kelly Ashworth</u>	j. Driver Name/Title: _____	m. Vehicle License No./State: _____	n. _____
d. Phone No.: <u>(415) 343 5946</u>	k. Phone No.: _____	Acknowledgement of Receipt of Materials: _____	
e. Truck No.: <u>39</u>	l. Truck No.: _____	Signature: _____ Date: _____	
f. Vehicle License No./State: <u>STB 1173 CA</u>	m. Vehicle License No./State: _____	Signature: _____ Date: _____	
g. Driver Signature: <u>[Signature]</u> Date: <u>050196</u>		Signature: _____ Date: _____	

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: [Signature] Signature: _____ Receipt Date: 050196

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
 e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908355

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tasco Marketing b. Generating Location: BP Station 11120
 c. Address: 5130 Professional Dr #100 d. Address: 6400 DUBLIN BLVD
Livermore CA 94661 DUBLIN CA
 e. Phone No.: 916 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04276
----	-----	--------	-------

 Containers _____

TYPE	
DM	METAL DRUM
DP	PLASTIC DRUM
B	BAG
BA	6 MIL. PLASTIC BAG or WRAP
T	TRUCK
O	OTHER

j. Description of Waste: SOIL w/ HYDROCARBONS k. Quantity

	16	Y					
--	----	---	--	--	--	--	--

 Units No. TYPE

UNITS	
P	POUNDS
Y	YARDS
M ³	CUBIC METERS
Y ³	CUBIC YARDS
O	OTHER

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

Marc TOUNOT [Signature] 050196
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I			TRANSPORTER II		
a. Name: <u>Construction</u>	h. Name: _____		i. Address: _____		
b. Address: <u>567 Exchange Ct</u> <u>Livermore CA 94550</u>	j. Driver Name/Title: _____		k. Phone No.: _____		
c. Driver Name/Title: <u>James Gray</u>	e. Truck No.: <u>608618</u>		l. Truck No.: _____		
d. Phone No.: <u>510 447-7484</u>	f. Vehicle License No./State: <u>AK362423</u>		m. Vehicle License No./State: _____		
g. <u>[Signature]</u> <u>050196</u> Driver Signature Shipment Date			n. _____ Driver Signature Shipment Date		

Section III DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO
Livermore CA d. Mailing Address: _____
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050196
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g; Operator completes e)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908356

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station 1120
 c. Address: 2133 Professors Dr. 100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA
 e. Phone No.: 916 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

C	N	4	0	5	0	4	2	7	9	6
---	---	---	---	---	---	---	---	---	---	---

0	4	2	7	9	6
---	---	---	---	---	---

 Containers _____

j. Description of Waste: Soil w/ HYDROCARBONS k. Quantity

--	--	--	--	--	--

 Units

Y					
---	--	--	--	--	--

 No.

--	--	--	--	--	--

 TYPE

					T
--	--	--	--	--	---

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Marc Donnat [Signature]

0	5	0	1	9	6
---	---	---	---	---	---

 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator complete a-c; Transporter I complete e-g; Transporter II complete i-n)

TRANSPORTER I			TRANSPORTER II														
a. Name: <u>Greg Trucking</u>	b. Address: <u>7081626</u> <u>San Mateo Ca</u>		h. Name: _____	i. Address: _____													
c. Driver Name/Title: <u>Perry Ashwood</u>	d. Phone No.: <u>(415) 345 5446</u>	e. Truck No.: <u>39</u>	j. Driver Name/Title: _____	k. Phone No.: _____	l. Truck No.: _____												
f. Vehicle License No./State: <u>9B11173 Ca</u>	g. <u>[Signature]</u> <table border="1"><tr><td>0</td><td>5</td><td>0</td><td>1</td><td>9</td><td>6</td></tr></table> Driver Signature Shipment Date		0	5	0	1	9	6	m. Vehicle License No./State: _____	n. _____ <table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Driver Signature Shipment Date							
0	5	0	1	9	6												

Section III DESTINATION (Generator completes a-c; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: WASCO d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature]

0	5	0	1	9	6
---	---	---	---	---	---

 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d; Operator completes e-f)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Print/Type Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908357

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: ISP STATION 1120
 c. Address: 2130 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD
Livermore CA 94561 DUBLIN CA
 e. Phone No.: 925 774 3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04267
----	-----	--------	-------

 Containers

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

j. Description of Waste: Soil w/High CARBONS k. Quantity

16

 Units

Y

 No.

1

 TYPE

T

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

Generator Authorized Agent Name _____ Signature _____ Shipment Date

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Section II: TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I	TRANSPORTER II												
a. Name: <u>American Construction</u>	h. Name: _____												
b. Address: <u>507 Exchange Ct</u> <u>Livermore CA 94550</u>	i. Address: _____												
c. Driver Name/Title: _____	j. Driver Name/Title: _____												
d. Phone No.: <u>510 447-2484</u> e. Truck No.: <u>03</u>	k. Phone No.: _____ l. Truck No.: _____												
f. Vehicle License No./State: _____	m. Vehicle License No./State: _____												
Acknowledgement of Receipt of Materials.													
g. <u>[Signature]</u> <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Shipment Date							n. _____ <table border="1" style="display: inline-table;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> Shipment Date						

Section III: DESTINATION (Generator completes a-c; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature]

--	--	--	--	--	--

 Receipt Date

Section IV: ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date

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 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908358

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station 1120
 c. Address: 2132 PROFESSIONAL DR. #100 d. Address: 6400 DUBLIN BLVD
ROSEVILLE CA. 95661 DUBLIN CA.
 e. Phone No.: 916) 774-3200 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
 i. BFI WASTE CODE

CA	405	042996	04267
----	-----	--------	-------

 Containers _____
 j. Description of Waste: SOIL W/HMXOCARBONS k. Quantity

	16	Y			
--	----	---	--	--	--

 Units No. TYPE
 TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

MARC DONNUT [Signature] 050296
 Generator Authorized Agent Name Signature Shipment Date

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-j)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Greg Trucking</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: _____
b. Address: <u>P.O. Box 1140</u> <u>SAN MATEO CA 91901</u>	i. Address: _____	k. Phone No.: _____	l. Truck No.: _____
c. Driver Name/Title: <u>Tom Puller</u>	j. Driver Name/Title: _____	m. Vehicle License No./State: _____	n. _____
d. Phone No.: <u>510 498 2104</u> e. Truck No.: <u>SS0</u>	k. Phone No.: _____	Acknowledgement of Receipt of Materials.	
f. Vehicle License No./State: <u>510 573716</u> <u>DAVIS CA</u>	l. Truck No.: _____	Acknowledgement of Receipt of Materials.	
g. <u>[Signature]</u> <u>050296</u>	m. Vehicle License No./State: _____	n. _____	
Driver Signature Shipment Date	Driver Signature Shipment Date		

Section III DESTINATION (Generator completes a-c; Destination site completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address _____
LIVERMORE CA 94550
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050296
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908359

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Jasco Marketing b. Generating Location: BP Station 1120
 c. Address: 7130 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.:

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.:

i. BFI WASTE CODE

CA	405	042996	0427	6
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 Containers

TYPE	DM - METAL DRUM
	DP - PLASTIC DRUM
	B - BAG
	BA - 6 MIL. PLASTIC BAG or WRAP
	T - TRUCK
	O - OTHER

j. Description of Waste: _____ k. Quantity

		16	Y		1	T
--	--	----	---	--	---	---

 Units No. TYPE

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

Marc DONNOT [Signature]

050296

 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-c; Transporter I completes e-g; Transporter II completes h-j)

TRANSPORTER I
 a. Name: Greg Trucking
 b. Address: PO Box 1626
San Mateo
 c. Driver Name/Title: Daryl Crockett
 d. Phone No.: 415-343-6946 e. Truck No.: DC-3
 f. Vehicle License No./State: 9B09279
 Acknowledgement of Receipt of Materials.
 g. [Signature]

050296

 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; Destination site completes e-l)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____

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

f. _____ [Signature]

050296

 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-c; Operator completes d)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____
 f. Name and Address of Responsible Agency: _____
 Operator's Signature _____ Date _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908360

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station 11120
 c. Address: 2130 PROFESSIONAL DR. 100 d. Address: 6400 DUBLIN BLVD
ROSEVILLE CA. 95661 DUBLIN CA.
 e. Phone No.: (916) 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
 i. BFI WASTE CODE:

CA	405	042996	042996
----	-----	--------	--------

 Containers: _____
 j. Description of Waste: _____ k. Quantity:

16	Y	1	T
----	---	---	---

 Units: _____ No.: _____ TYPE: _____
 TYPE: DM - METAL DRUM, OP - PLASTIC DRUM, B - BAG, BA - 6 MIL. PLASTIC BAG or WRAP, T - TRUCK, O - OTHER
 UNITS: P - POUNDS, Y - YARDS, M³ - CUBIC METERS, Y³ - CUBIC YARDS, O - OTHER

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

MARC DONNOT [Signature] 050296
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-c; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Am...</u>	h. Name: <u>Gregg Trucking</u>	i. Address: <u>POB 11026</u>	j. Driver Name/Title: <u>PERRY H. HODDIN</u>
b. Address: <u>567 Gresham...</u>	i. Address: <u>SAN RAFAEL CA</u>	k. Phone No.: <u>(415) 393-5946</u>	l. Truck No.: <u>39</u>
c. Driver Name/Title: _____	j. Driver Name/Title: _____	m. Vehicle License No./State: <u>9B1173 CA</u>	n. _____
d. Phone No.: <u>510 442-2484</u>	e. Truck No.: _____	Acknowledgement of Receipt of Materials.	
f. Vehicle License No./State: _____	Acknowledgement of Receipt of Materials.		
g. _____	n. _____		
Driver Signature	Shipment Date	Driver Signature	Shipment Date

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
LIVERMORE CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. _____ [Signature] 050296
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908361

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: Tasco Marketing b. Generating Location: BF Station 11120
 c. Address: 2132 PROFESSIONAL DR. 100 d. Address: 6400 DUBLIN BLVD
ROSEVILLE CA. 95661 DUBLIN CA.
 e. Phone No.: 916) 774-3200 f. Phone No.:

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	04	2996
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04	2	36
----	---	----

 Containers

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG
 or WRAP
 T - TRUCK
 O - OTHER

j. Description of Waste: SOIL W/ HYDROCARBONS k. Quantity

	16	Y	1	T
--	----	---	---	---

 Units No. TYPE

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

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Marc Donnot [Signature] 050796
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I
 a. Name: [Crossed out]
 b. Address: [Crossed out]
 c. Driver Name/Title: _____
 d. Phone No.: [Crossed out] e. Truck No.: _____
 f. Vehicle License No./State: _____

TRANSPORTER II
 h. Name: Giggs Trucking
 i. Address: [Crossed out]
 j. Driver Name/Title: Jamie Williams
 k. Phone No.: 415-243-5794 l. Truck No.: 321
 m. Vehicle License No./State: DAK 162 CA

Acknowledgement of Receipt of Materials.
 g.

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 Driver Signature Shipment Date

Acknowledgement of Receipt of Materials.
 n. [Signature] 050796
 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-c; destination site completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address _____
LIVERMORE CA.

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050796
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d; f, g; Operator completes e, h)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____
 f. Name and Address _____
 of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908362

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: JASCO Marketing b. Generating Location: B P Station #1170
 c. Address: 2130 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA
 e. Phone No.: (916) 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

CA	405	042996	042996
----	-----	--------	--------

 Containers: _____
 j. Description of Waste: SOL W/HYDROCARBONS k. Quantity:

		16	Y		1		
--	--	----	---	--	---	--	--

 Units: _____ No.: _____ TYPE: _____
 TYPE: DM - METAL DRUM, DP - PLASTIC DRUM, B - BAG, BA - 6 MIL. PLASTIC BAG or WRAP, T - TRUCK, O - OTHER
 UNITS: P - POUNDS, Y - YARDS, M³ - CUBIC METERS, Y³ - CUBIC YARDS, O - OTHER

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

Marc Donnot Signature: [Signature] Shipment Date: 050296
 Generator Authorized Agent Name _____ Signature _____ Shipment Date _____

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-i)

TRANSPORTER I			TRANSPORTER II		
a. Name: <u>Greg Trucking</u>	h. Name: _____		i. Address: _____		
b. Address: _____	c. Driver Name/Title: <u>Francisco Quevedo</u>		Driver Name/Title: _____		
d. Phone No.: _____	e. Truck No.: <u>18</u>	k. Phone No.: _____		l. Truck No.: _____	
f. Vehicle License No./State: _____		m. Vehicle License No./State: _____			
n. _____		o. _____			
Driver Signature: <u>[Signature]</u>		Driver Signature: _____		Shipment Date: _____	

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: [Signature] Receipt Date: 050296

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
 e. Operator's* Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908363

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: RP Station 1120
 c. Address: 2130 Professional Dr #100 d. Address: 6400 DUBLIN BLVD
Mossville CA. 95661 DUBLIN CA.
 e. Phone No.: (916) 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	04	2996
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04	26	5
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 Containers

j. Description of Waste: SOIL w/ HYDRO CARBONS k. Quantity

		16	
--	--	----	--

 Units

Y			
---	--	--	--

 No.

	1		
--	---	--	--

 TYPE

T			
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DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG
 or WRAP
 T - TRUCK
 O - OTHER

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

Marc DONNOR Generator Authorized Agent Name [Signature] Signature 650796 Shipment Date

P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II: TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>[Signature]</u>	h. Name: <u>Greco Trucking</u>	i. Address: <u>P.O. Box 1626</u>	j. Driver Name/Title: <u>Daryl Crackett</u>
b. Address: <u>[Signature]</u>	i. Address: <u>SAN MATEO CA</u>	k. Phone No.: <u>415-343-4746</u>	k. Phone No.: <u>415-343-4746</u>
c. Driver Name/Title: _____	j. Driver Name/Title: _____	m. Vehicle License No./State: <u>9B09279 CA</u>	m. Vehicle License No./State: <u>9B09279 CA</u>
d. Phone No.: <u>415-343-4746</u>	k. Phone No.: <u>415-343-4746</u>	Acknowledgement of Receipt of Materials	
f. Vehicle License No./State: _____	m. Vehicle License No./State: _____	n. <u>[Signature]</u> <u>050296</u>	
g. <u>[Signature]</u> Shipment Date	n. <u>[Signature]</u> Shipment Date		

Section III: DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA.

e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate

f. [Signature] 050296
 Name of Authorized Agent Signature Receipt Date

Section IV: ASBESTOS (Generator completes a-d; Operator completes e-f)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908364

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: RP Station 1120
 c. Address: 2130 Professional Dr. #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916 774-3200 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	042996
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 Containers _____
 j. Description of Waste: SOIL W/HYDRO CARBONS k. Quantity

		16	Y				
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 Units No. TYPE

		1		T
--	--	---	--	---

 TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER
 UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

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

MARC DONNOT
Generator Authorized Agent Name

[Signature]
Signature

061096
Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
 a. Name: AMERICAN CONSTRUCTION
 b. Address: 567 Exchange Ct.
Livermore CA 94550
 c. Driver Name/Title: Bob
 d. Phone No.: 510-447-2484 e. Truck No.: 627
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 g. Driver Signature _____ Shipment Date

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TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. Driver Signature _____ Shipment Date

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Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____

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

f. Name of Authorized Agent _____ Signature _____
 Receipt Date

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Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date

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 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908365

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station #1120
 c. Address: 2130 Professional Dr. 700 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: (916) 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	4	0	5	0	4	2	9	9	6
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0	4	2	9	6
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 Containers

TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG
 or WRAP
 T - TRUCK
 O - OTHER

j. Description of Waste: Soil w/ HYDROCARBONS k. Quantity

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 Units

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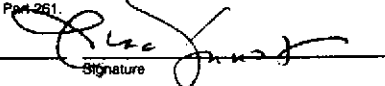
 No.

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 TYPE

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

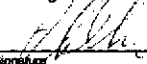
Marc DONNOT 
 Generator Authorized Agent Name Signature

0	5	0	2	9	6
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 Shipment Date

UNITS
 P - POUNDS
 Y - YARDS
 M³ - CUBIC METERS
 Y³ - CUBIC YARDS
 O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I
 a. Name: Greg Trucking
 b. Address: 1500 P.O. Box 7606
San Mateo CA 94408
 c. Driver Name/Title: Tom Phillips Driver
PRINT/TITLE
 d. Phone No.: 415 442 5019 Truck No.: 590
 f. Vehicle License No./State: DASH CA
 Acknowledgement of Receipt of Materials.
 g. 

0	5	0	2	9	6
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 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
PRINT/TITLE
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____

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 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-c; Destination completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD. d. Mailing Address _____
Livermore CA.

e. Discrepancy Indication Space: _____
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Asarler

0	5	0	2	9	6
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 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____

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Print/Type Operator's Signature Date

f. Name and Address of Responsible Agency: _____

g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908366

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: RP Station #1120
 c. Address: 2130 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA
 e. Phone No.: 916-774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04296
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 Containers _____
 j. Description of Waste: _____ k. Quantity

16

 Units

Y

 No.

1

 TYPE

T

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Marc DONNOT [Signature] 050296
 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I
 a. Name: Greg Trucking
 b. Address: PO Box 76
San Mateo CA
 c. Driver Name/Title: Perry Ashworth
 d. Phone No.: (415) 310 5946 e. Truck No.: 39
 f. Vehicle License No./State: 9B11173 CA
 Acknowledgement of Receipt of Materials.
 g. [Signature] 050296
 Driver Signature Shipment Date

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials.
 n. _____
 Driver Signature Shipment Date

Section III DESTINATION (Generator completes a-d; Destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: Vasco Rd. d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] 050296
 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is **NOT** asbestos waste, complete only Sections I, II and III.

No. 908367

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP station #1120
 c. Address: 2130 Professional Dr. 100 d. Address: 6400 DUBLIN BND
Roseville CA. 95661 DUBLIN CA.
 e. Phone No.: 916) 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
 i. BFI WASTE CODE:

CA	4	0	5	0	4	2	9	9	6
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0	4	2	9	6
---	---	---	---	---

 Containers: _____
 j. Description of Waste: Soil w/HYDROCARBONS k. Quantity:

 Units: Y No. 1 TYPE: T
 TYPE
 DM - METAL DRUM
 DP - PLASTIC DRUM
 B - BAG
 BA - 6 MIL. PLASTIC BAG or WRAP
 T - TRUCK
 O - OTHER

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

Marv DONNOT Signature: [Signature] Shipment Date:

0	5	0	2	9	6
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 Generator Authorized Agent Name Signature

Section II TRANSPORTER (Generator completes a-d, Transporter I completes e-g, Transporter II completes h-k)

TRANSPORTER I		TRANSPORTER II							
a. Name: <u>Greg Trucking</u>	h. Name: _____	i. Address: _____	j. Driver Name/Title: _____						
b. Address: <u>P.O. Box 1626</u> <u>SAN MATEO CA</u>	k. Phone No.: _____	l. Truck No.: _____	m. Vehicle License No./State: _____						
c. Driver Name/Title: <u>Daryl Crockett</u>	n. _____	o. _____							
d. Phone No.: <u>415-342-1946</u> Truck No.: <u>DC-3</u>									
f. Vehicle License No./State: <u>9B09279</u>									
g. <u>[Signature]</u> Shipment Date: <table border="1"><tr><td>0</td><td>5</td><td>0</td><td>2</td><td>9</td><td>6</td></tr></table>	0	5	0	2	9	6			
0	5	0	2	9	6				
Acknowledgement of Receipt of Materials.									

Section III DESTINATION (Generator completes a-d, destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: [Signature] Receipt Date:

0	5	0	2	9	6
---	---	---	---	---	---

Section IV ASBESTOS (Generator completes a-d, f, g, Operator* completes e.)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908369

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station 1120
 c. Address: 2132 Professional Dr 100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA.
 e. Phone No.: 916) 774-3200 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE

CA	405	042996	04270
----	-----	--------	-------

 Containers _____

j. Description of Waste: Sol w/4500 CARBONS k. Quantity

		16	8						
--	--	----	---	--	--	--	--	--	--

 Units No. TYPE

--	--	--	--	--	--	--	--	--	--

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

MAURICE DONNOT [Signature]
 Generator Authorized Agent Name Signature

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 Shipment Date

- TYPE
- DM - METAL DRUM
 - DP - PLASTIC DRUM
 - B - BAG
 - BA - 6 MIL. PLASTIC BAG or WRAP
 - T - TRUCK
 - O - OTHER
- UNITS
- P - POUNDS
 - Y - YARDS
 - M³ - CUBIC METERS
 - Y³ - CUBIC YARDS
 - O - OTHER

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I		TRANSPORTER II													
a. Name: <u>Gree Tracking</u>	h. Name: _____	i. Address: _____	i. Address: _____												
b. Address: <u>P.O. Box 1626</u> <u>San Mateo CA</u>	j. Driver Name/Title: _____	k. Phone No.: _____	l. Truck No.: _____												
c. Driver Name/Title: <u>Tom Phillips</u> Driver	m. Vehicle License No./State: _____	n. _____													
d. Phone No.: <u>415 372 5476</u> e. Truck No.: <u>290</u>	Acknowledgement of Receipt of Materials.														
f. Vehicle License No./State: <u>DAW4W CA</u>	g. <u>[Signature]</u> <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> Shipment Date														
g. <u>[Signature]</u> <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> Shipment Date								h. <u>[Signature]</u> <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> Shipment Date							

Section III DESTINATION (Generator complete a-d; destination site complete e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: WASCO RD d. Mailing Address _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. [Signature]

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 Receipt Date

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908370

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO Marketing b. Generating Location: B P Station # 11120
 c. Address: 2130 Professional Dr. 100 d. Address: 6400 DUBLIN BLVD
Roseville CA. 95661 DUBLIN CA
 e. Phone No.: (916) 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE: GA 4015 042996 04258 Containers:

DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

 j. Description of Waste: SOIL w/HYDROCARBONS k. Quantity: 16 Units: Y No.: 1 TYPE: 1

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

Mark Donnet Signature 052496 Shipment Date
 Generator Authorized Agent Name _____ Signature _____ Shipment Date _____

Section II TRANSPORTER (Generator completes a-c; Transporter I completes d-g; Transporter II completes h-n)

TRANSPORTER I
 a. Name: American Construction
 b. Address: 567 Exchange Ct.
Livermore CA. 94550
 c. Driver Name/Title: _____
 d. Phone No.: 510 447-2484 e. Truck No.: 623
 f. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____
 g. [Signature] Shipment Date: _____
 Driver Signature _____ Shipment Date _____

TRANSPORTER II
 h. Name: _____
 i. Address: _____
 j. Driver Name/Title: _____
 k. Phone No.: _____ l. Truck No.: _____
 m. Vehicle License No./State: _____
 Acknowledgement of Receipt of Materials: _____
 n. _____ Shipment Date: _____
 Driver Signature _____ Shipment Date _____

Section III DESTINATION (Generator completes a-c; destination site completes d-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: UNASCO RD d. Mailing Address: _____
Livermore CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature] Receipt Date: _____
 Name of Authorized Agent _____ Signature _____ Receipt Date _____

Section IV ASBESTOS (Generator completes a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's* Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908371

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO Marketing b. Generating Location: BP Station 11120
 c. Address: 2137 Professional Dr #100 d. Address: 6400 DUBLIN BLVD
Roseville CA 95661 DUBLIN CA
 e. Phone No. (916) 774-3200 f. Phone No.:

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____
 i. BFI WASTE CODE

CA	405	042996
----	-----	--------

042996

 Containers
 j. Description of Waste: Soil w/ Hydrocarbons k. Quantity

	16	Y
--	----	---

 Units

	1	T
--	---	---

 No.

--	--	--

 TYPE

--	--	--

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

Mace Donnot [Signature]

--	--	--	--	--

 Generator Authorized Agent Name Signature Shipment Date

Section II TRANSPORTER (Generator completes a-c; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I		TRANSPORTER II											
a. Name: <u>GREG TRUCKING</u>		h. Name: _____											
b. Address: <u>P.O. Box 1626</u> <u>San Mateo CA</u>		i. Address: _____											
c. Driver Name/Title: <u>Daryl Crackett</u>		j. Driver Name/Title: _____											
d. Phone No.: <u>415-343-6846</u>	e. Truck No.: <u>JK-3</u>	k. Phone No.: _____	l. Truck No.: _____										
f. Vehicle License No./State: <u>9B09279 Cal</u>		m. Vehicle License No./State: _____											
Acknowledgement of Receipt of Materials. <u>[Signature]</u> <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> Driver Signature Shipment Date							Acknowledgement of Receipt of Materials. <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> Driver Signature Shipment Date						

Section III DESTINATION (Generator completes a-c; Destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. [Signature]

--	--	--	--	--

 Name of Authorized Agent Signature Receipt Date

Section IV ASBESTOS (Generator completes a-d, f, g; Operator completes e)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature _____ Date _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908372

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING b. Generating Location: BP Station #11120
 c. Address: 2130 PROFESSIONAL DR. 100 d. Address: 6400 DUBLIN BLVD.
ROSEVILLE CA 95661 DUBLIN CA.
 e. Phone No.: (916) 774-3000 f. Phone No.: _____

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____ h. Owner's Phone No.: _____

i. BFI WASTE CODE:

C	Q	4	0	5	0	4	2	9	9	6
---	---	---	---	---	---	---	---	---	---	---

0	4	7	0	0
---	---	---	---	---

 Containers: _____

j. Description of Waste: SOIL w/ HYDROCARBONS k. Quantity:

--	--	--	--	--	--	--	--

 Units: Y No.:

--	--	--	--	--

 TYPE:

--	--	--	--	--

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

Marc DONNOT Signature: [Signature] Shipment Date: 050196
 Generator Authorized Agent Name _____

- TYPE**
- DM - METAL DRUM
 - DP - PLASTIC DRUM
 - B - BAG
 - BA - 6 MIL. PLASTIC BAG or WRAP
 - T - TRUCK
 - O - OTHER
- UNITS**
- P - POUNDS
 - Y - YARDS
 - M³ - CUBIC METERS
 - Y³ - CUBIC YARDS
 - O - OTHER

Section II TRANSPORTER (Generator completes a-d; Transporter I completes e-g; Transporter II completes h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>Greg TRACKINGS</u>	b. Address: <u>POB 11626</u> <u>SMITHLAND CA</u>	h. Name: _____	i. Address: _____
c. Driver Name/Title: <u>Perry Ashworth</u>	d. Phone No.: <u>415 343 5946</u> e. Truck No.: <u>39</u>	j. Driver Name/Title: _____	k. Phone No.: _____ l. Truck No.: _____
f. Vehicle License No./State: <u>9B11173 CA</u>	g. <u>[Signature]</u> Shipment Date: <u>050196</u>	m. Vehicle License No./State: _____	n. <u>[Signature]</u> Shipment Date: _____

Acknowledgement of Receipt of Materials. _____

Section III DESTINATION (Generator completes a-d; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
Livermore CA
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. Name of Authorized Agent: _____ Signature: [Signature] Receipt Date: 050196

Section IV ASBESTOS (Generator completes a-d, f, g; Operator completes e.)

a. Operator's Name: _____ b. Operator's Phone No.: _____
 c. Operator's Address: _____
 d. Special Handling Instructions and additional information: _____

OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

e. Operator's Name & Title: _____ Operator's Signature: _____ Date: _____
 f. Name and Address of Responsible Agency: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 908373

Section I GENERATOR (Generator completes all of Section I)

a. Generator Name: TASCO MARKETING p. Generating Location: B F Station
 c. Address: 2130 PROFESSIONAL DR #100 d. Address: 6400 DUBLIN BLVD
ROSEVILLE CA. 95661 DUBLIN CA.
 e. Phone No.: 916 774-3000 f. Phone No.: _____
 If owner of the generating facility differs from the generator, provide:
 g. Owner's Name: _____ h. Owner's Phone No.: _____
 i. BFI WASTE CODE

CA	405	042996	042	7/6
----	-----	--------	-----	-----

 Containers: _____
 j. Description of Waste: SOIL W/ HYDROCARBONS k. Quantity:

		16	Y		1		
--	--	----	---	--	---	--	--

 Units: _____ No.: _____ TYPE: _____

TYPE	
DM	- METAL DRUM
DP	- PLASTIC DRUM
B	- BAG
BA	- 6 MIL. PLASTIC BAG or WRAP
T	- TRUCK
O	- OTHER

UNITS	
P	- POUNDS
Y	- YARDS
M ³	- CUBIC METERS
Y ³	- CUBIC YARDS
O	- OTHER

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

MARC DONNOT Signature 058896 Shipment Date

Section II TRANSPORTER (Generator complete a-d; Transporter I complete e-g; Transporter II complete h-n)

TRANSPORTER I		TRANSPORTER II	
a. Name: <u>AMERICAN CONSTRUCTION</u>		h. Name: _____	
b. Address: <u>567 EXCHANGE CT</u> <u>LIVERMORE CA. 94550</u>		i. Address: _____	
c. Driver Name/Title: _____		j. Driver Name/Title: _____	
d. Phone No.: <u>510 447-2484</u> e. Truck No.: _____		k. Phone No.: _____ l. Truck No.: _____	
f. Vehicle License No./State: _____		m. Vehicle License No./State: _____	
Acknowledgement of Receipt of Materials. _____		Acknowledgement of Receipt of Materials. _____	
g. Driver Signature: _____	Shipment Date: _____	n. Driver Signature: _____	Shipment Date: _____

Section III DESTINATION (Generator completes a-c; destination site completes e-f)

a. Site Name: BFI c. Phone No.: _____
 b. Physical Address: VASCO RD d. Mailing Address: _____
LIVERMORE CA.
 e. Discrepancy Indication Space: _____
 I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 f. Name of Authorized Agent: _____ Signature: _____ Receipt Date: _____

Section IV ASBESTOS (Generator complete a-d, f, g; Operator* completes e.)

a. Operator's* Name: _____ b. Operator's* Phone No.: _____
 c. Operator's* Address: _____
 d. Special Handling Instructions and additional information: _____
 OPERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.
 e. Operator's* Name & Title: _____
 f. Name and Address of Responsible Agency: _____ Operator's Signature: _____ Date: _____
 g. Friable; Non-friable; Both _____ % friable _____ % nonfriable

* Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation, or both.



Sequoia Analytical

680 Chesapeake Drive
404 N. Wiget Lane
819 Striker Avenue, Suite 8

Redwood City, CA 94063
Walnut Creek, CA 94598
Sacramento, CA 95834

(415) 364-9600
(510) 988-9600
(916) 921-9600

FAX (415) 364-9233
FAX (510) 988-9673
FAX (916) 921-0100

Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Sample Matrix: Analysis Method: First Sample #:	Tosco, 6400 Dublin Blvd., Dublin Soil EPA 5030/3015 Mod./8020 604-0318	Sampled: Received: Reported:	Apr 3, 1996 Apr 3, 1996 Apr 5, 1996
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TOTAL PURGEABLE PETROLEUM HYDROCARBONS with BTEX DISTINCTION

Analyte	Reporting Limit mg/kg	Sample I.D. 604-0318 S-1	Sample I.D. 604-0319 S-2	Sample I.D. 604-0320 S-3	Sample I.D. 604-0321 S-4	Sample I.D. 604-0322 S-5	Sample I.D. 604-0323 S-6
Purgeable Hydrocarbons	1.0	14	2,700	1,100	470	1,800	40
Benzene	0.0050	0.12	3.2	0.90	2.1	N.D.	0.11
Toluene	0.0050	0.045	21	11	N.D.	N.D.	0.086
Ethyl Benzene	0.0050	0.12	34	11	10	11	0.89
Total Xylenes	0.0050	0.14	180	71	13	97	0.44
Chromatogram Pattern:		Gasoline	Gasoline	Gasoline	Gasoline	Gasoline	Gasoline

Quality Control Data

Report Limit Multiplication Factor:	2.0	1,000	200	50	1,000	10
Date Analyzed:	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96
Instrument Identification:	HP-22	HP-7	HP-7	HP-22	HP-7	HP-7
Surrogate Recovery, %: (QC Limits = 70-130%)	192	93	97	200	108	82

Purgeable Hydrocarbons are quantitated against a fresh gasoline standard.
Analytes reported as N.D. were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1210


Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Matrix: Soil Analysis Method: EPA 5030/8015 Mod./8020 First Sample #: 604-0324	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Reported: Apr 5, 1996
--	--	--

TOTAL PURGEABLE PETROLEUM HYDROCARBONS with BTEX DISTINCTION

Analyte	Reporting Limit mg/kg	Sample I.D. 604-0324 S-7	Sample I.D. 604-0325 S-8	Sample I.D. 604-0326 S-9	Sample I.D. 604-0327 S-10	Sample I.D. 604-0328 S-11	Sample I.D. 604-0329 S-12
Purgeable Hydrocarbons	1.0	42	N.D.	4.0	11	14	23
Benzene	0.0050	0.68	0.059	N.D.	0.015	0.032	0.14
Toluene	0.0050	0.61	0.0074	N.D.	0.26	N.D.	0.21
Ethyl Benzene	0.0050	1.4	0.011	0.073	0.15	0.25	0.52
Total Xylenes	0.0050	8.2	0.34	0.44	1.8	0.21	2.8
Chromatogram Pattern:		Gasoline	--	Gasoline	Gasoline	Gasoline	Gasoline

Quality Control Data

Report Limit Multiplication Factor:	5.0	1.0	1.0	1.0	2.5	5.0
Date Analyzed:	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96
Instrument Identification:	HP-7	HP-22	HP-7	HP-1	HP-18	HP-18
Surrogate Recovery, %: (QC Limits = 70-130%)	138	115	89	108	135	107

Purgeable Hydrocarbons are quantitated against a fresh gasoline standard.
Analytes reported as N.D. were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1210

Alan B. Kemp
Alan B. Kemp
Project Manager



Sequoia Analytical

680 Chesapeake Drive
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FAX (916) 921-0100

Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Matrix: Soil Analysis Method: EPA 5030/8015 Mod./8020 First Sample #: 604-0330	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Reported: Apr 5, 1996
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TOTAL PURGEABLE PETROLEUM HYDROCARBONS with BTEX DISTINCTION

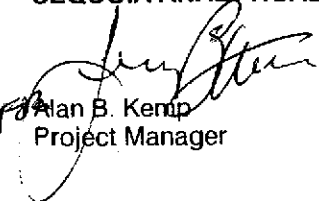
Analyte	Reporting Limit mg/kg	Sample I.D. 604-0330 S-13	Sample I.D. 604-0331 S-14	Sample I.D. 604-0332 S-15	Sample I.D. 604-0333 S-16	Sample I.D. 604-0334 S-17	Sample I.D. 604-0339 T1(A-D)
Purgeable Hydrocarbons	1.0	610	N.D.	N.D.	20	N.D.	N.D.
Benzene	0.0050	1.2	N.D.	N.D.	0.18	N.D.	0.019
Toluene	0.0050	5.4	N.D.	N.D.	0.0092	N.D.	N.D.
Ethyl Benzene	0.0050	9.3	N.D.	N.D.	0.37	N.D.	N.D.
Total Xylenes	0.0050	58	N.D.	N.D.	2.1	N.D.	0.015
Chromatogram Pattern:		Gasoline	--	--	Gasoline	--	--

Quality Control Data

Report Limit Multiplication Factor:	50	1.0	1.0	1.0	1.0	1.0
Date Analyzed:	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96
Instrument Identification:	HP-7	HP-22	HP-22	HP-1	HP-1	HP-1
Surrogate Recovery, %: (QC Limits = 70-130%)	141	120	119	110	109	111

Purgeable Hydrocarbons are quantitated against a fresh gasoline standard.
Analytes reported as N.D. were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1210 & #2000


Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Matrix: Soil Analysis Method: EPA 5030/8015 Mod./8020 First Sample #: 604-0340	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Reported: Apr 5, 1996
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TOTAL PURGEABLE PETROLEUM HYDROCARBONS with BTEX DISTINCTION

Analyte	Reporting Limit mg/kg	Sample I.D. 604-0340 T2(A-D)	Sample I.D. 604-0341 T3(A-D)	Sample I.D. 604-0342 SP-1(A-D)	Sample I.D. 604-0343 SP-2(A-D)	Sample I.D. 604-0344 SP-2(E-H)	Sample I.D. 604-0345 SP-2(I-L)
Purgeable Hydrocarbons	1.0	N.D.	N.D.	N.D.	6.8	30	22
Benzene	0.0050	N.D.	N.D.	N.D.	N.D.	0.0061	0.027
Toluene	0.0050	N.D.	N.D.	N.D.	0.012	0.047	0.11
Ethyl Benzene	0.0050	N.D.	N.D.	N.D.	0.037	0.27	0.40
Total Xylenes	0.0050	N.D.	N.D.	0.0068	0.22	1.8	2.0
Chromatogram Pattern:		--	--	--	Gasoline	Gasoline	Gasoline

Quality Control Data

Report Limit Multiplication Factor:	1.0	1.0	1.0	1.0	1.0	1.0
Date Analyzed:	4/5/96	4/5/96	4/4/96	4/4/96	4/4/96	4/4/96
Instrument Identification:	HP-1	HP-1	HP-5	HP-5	HP-5	HP-5
Surrogate Recovery, %: (QC Limits = 70-130%)	101	107	91	88	73	97

Purgeable Hydrocarbons are quantitated against a fresh gasoline standard.
Analytes reported as N.D. were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1271 & #2000

Alan B. Kemp
Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Matrix: Soil Analysis Method: EPA 5030/8015 Mod./8020 First Sample #: 604-0346	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Reported: Apr 3, 1996
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TOTAL PURGEABLE PETROLEUM HYDROCARBONS with BTEX DISTINCTION

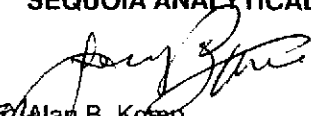
Analyte	Reporting Limit mg/kg	Sample I.D. 604-0346 SP-2(M-P)	Sample I.D. 604-0347 SP-2(Q-T)
Purgeable Hydrocarbons	1.0	N.D.	N.D.
Benzene	0.0050	N.D.	N.D.
Toluene	0.0050	N.D.	N.D.
Ethyl Benzene	0.0050	N.D.	N.D.
Total Xylenes	0.0050	0.0062	N.D.
Chromatogram Pattern:		--	--

Quality Control Data

Report Limit Multiplication Factor:	1.0	1.0
Date Analyzed:	4/4/96	4/4/96
Instrument Identification:	HP-5	HP-5
Surrogate Recovery, %: (QC Limits = 70-130%)	91	89

Purgeable Hydrocarbons are quantitated against a fresh gasoline standard.
Analytes reported as N.D. were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Matrix: Water Analysis Method: EPA 5030/8015 Mod./8020 First Sample #: 604-0337	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Reported: Apr 5, 1996
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TOTAL PURGEABLE PETROLEUM HYDROCARBONS with BTEX DISTINCTION

Analyte	Reporting Limit µg/L	Sample I.D. 604-0337 W-1	Sample I.D. 604-0338 W-2
Purgeable Hydrocarbons	50	14,000	130
Benzene	0.50	500	N.D.
Toluene	0.50	1,600	2.6
Ethyl Benzene	0.50	280	2.5
Total Xylenes	0.50	2,100	24
Chromatogram Pattern:		Gasoline	Gasoline

Quality Control Data

Report Limit Multiplication Factor:	20	1.0
Date Analyzed:	4/4/96	4/4/96
Instrument Identification:	HP-11	HP-11
Surrogate Recovery, %: (QC Limits = 70-130%)	98	95

Purgeable Hydrocarbons are quantitated against a fresh gasoline standard.
Analytes reported as N.D. were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Matrix: Soil Analysis Method: EPA 3550/8015 Mod. First Sample #: 604-0318	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Reported: Apr 5, 1996
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TOTAL EXTRACTABLE PETROLEUM HYDROCARBONS

Analyte	Reporting Limit mg/kg	Sample I.D. 604-0318 S-1	Sample I.D. 604-0319 S-2	Sample I.D. 604-0320 S-3	Sample I.D. 604-0321 S-4	Sample I.D. 604-0322 S-5	Sample I.D. 604-0323 S-6
Extractable Hydrocarbons	1.0	1.5	570	140	34	480	1.6
Chromatogram Pattern:		Unidentified Hydrocarbons <C15	Unidentified Hydrocarbons <C15	Diesel & Unidentified Hydrocarbons <C15	Unidentified Hydrocarbons <C15	Unidentified Hydrocarbons <C15	Unidentified Hydrocarbons <C15

Quality Control Data

Report Limit Multiplication Factor:	1.0	20	1.0	1.0	10	1.0
Date Extracted:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Date Analyzed:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Instrument Identification:	HP-3A	HP-3A	HP-3A	HP-3A	HP-3A	HP-3A

Extractable Hydrocarbons are quantitated against a fresh diesel standard.
Analytes reported as N.D. were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Matrix: Soil Analysis Method: EPA 3550/8015 Mod. First Sample #: 604-0324	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Reported: Apr 5, 1996
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TOTAL EXTRACTABLE PETROLEUM HYDROCARBONS

Analyte	Reporting Limit mg/kg	Sample I.D. 604-0324 S-7	Sample I.D. 604-0325 S-8	Sample I.D. 604-0326 S-9	Sample I.D. 604-0327 S-10	Sample I.D. 604-0328 S-11	Sample I.D. 604-0329 S-12
Extractable Hydrocarbons	1.0	N.D.	N.D.	75	1.0	2.1	3.1
Chromatogram Pattern:		--	--	Diesel & Unidentified Hydrocarbons <C15	Unidentified Hydrocarbons <C15	Unidentified Hydrocarbons <C15; >C24	Unidentified Hydrocarbons <C15

Quality Control Data

Report Limit Multiplication Factor:	10	10	1.0	1.0	10	1.0
Date Extracted:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Date Analyzed:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Instrument Identification:	HP-3A	HP-3A	HP-3A	HP-3B	HP-3B	HP-3B

Extractable Hydrocarbons are quantitated against a fresh diesel standard.
Analytes reported as N.D. were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sampled: Apr 3, 1996
 2855 Mitchell Drive, Suite 118 Sample Matrix: Soil Received: Apr 3, 1996
 Walnut Creek, CA 94598 Analysis Method: EPA 3550/8015 Mod. Reported: Apr 5, 1996
 Attention: Jeff Hess First Sample #: 604-0330

TOTAL EXTRACTABLE PETROLEUM HYDROCARBONS

Analyte	Reporting Limit mg/kg	Sample I.D. 604-0330 S-13	Sample I.D. 604-0331 S-14	Sample I.D. 604-0332 S-15	Sample I.D. 604-0333 S-16	Sample I.D. 604-0334 S-17	Sample I.D. 604-0339 T1(A-D)
Extractable Hydrocarbons	1.0	25	1.2	N.D.	56	N.D.	N.D.
Chromatogram Pattern:		Unidentified Hydrocarbons <C15	Diesel	--	Diesel & Unidentified Hydrocarbons <C15; >C24	--	--

Quality Control Data

Report Limit Multiplication Factor:	1.0	1.0	1.0	1.0	1.0	1.0
Date Extracted:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96	4/3/96
Date Analyzed:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Instrument Identification:	HP-3B	HP-3B	HP-3B	HP-3A	HP-3A	HP-3B

Extractable Hydrocarbons are quantitated against a fresh diesel standard.
 Analytes reported as N.D. were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
 Alan B. Kemp
 Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Matrix: Soil Analysis Method: EPA 3550/8015 Mod. First Sample #: 604-0340	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Reported: Apr 5, 1996
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TOTAL EXTRACTABLE PETROLEUM HYDROCARBONS

Analyte	Reporting Limit mg/kg	Sample I.D. 604-0340 T2(A-D)	Sample I.D. 604-0341 T3(A-D)
Extractable Hydrocarbons	1.0	N.D.	N.D.

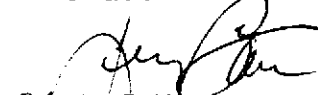
Chromatogram Pattern: --

Quality Control Data

Report Limit Multiplication Factor:	1.0	1.0
Date Extracted:	4/3/96	4/3/96
Date Analyzed:	4/4/96	4/4/96
Instrument Identification:	HP-3B	HP-3B

Extractable Hydrocarbons are quantitated against a fresh diesel standard.
Analytes reported as N.D. were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
Project Manager



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Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Sample Matrix: Analysis Method: First Sample #:	Tosco, 6400 Dublin Blvd., Dublin Soil EPA 3550/8015 Mod. 604-0335	Sampled: Received: Reported:	Apr 3, 1996 Apr 3, 1996 Apr 5, 1996
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TOTAL EXTRACTABLE PETROLEUM HYDROCARBONS AS HYDRAULIC FLUID

Analyte	Reporting Limit mg/kg	Sample I.D. 604-0335 S-18	Sample I.D. 604-0336 S-19
Extractable Hydrocarbons	10	N.D.	N.D.

Chromatogram Pattern: - -

Quality Control Data

Report Limit Multiplication Factor:	1.0	1.0
Date Extracted:	4/4/96	4/4/96
Date Analyzed:	4/5/96	4/5/96
Instrument Identification:	HP-3A	HP-3A

Extractable Hydrocarbons are quantitated against a fresh diesel standard.
Analytes reported as N.D. were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc.
2855 Mitchell Drive, Suite 118
Walnut Creek, CA 94598
Attention: Jeff Hess

Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
Sample Matrix: Soil
Analysis Method: EPA 3550/8015 Modified
First Sample #: 604-0342

Sampled: Apr 3, 1996
Received: Apr 3, 1996
Reported: Apr 5, 1996

FUEL FINGERPRINT

Analyte	Reporting Limit mg/kg	Sample I.D. 604-0342 SP-1(A-D)
Diesel (C10-C22)	1.0	N.I.
JP-4 (C8-C14)	1.0	N.I.
JP-5 (C10-C16)	1.0	N.I.
Kerosene (C10-C16)	1.0	N.I.
Motor Oil (> C16)	10	67
Paint Thinner (C10-C12)	1.0	N.I.
Unidentified Extractable Hydrocarbons	1.0	N.I.

Quality Control Data

Report Limit Multiplication Factor:	1.0
Date Extracted:	4/3/96
Date Analyzed:	4/4/96
Instrument Identification:	HP-3B

Unidentified Extractable Hydrocarbons are quantitated against a fresh diesel standard.
Analytes reported as N.I. (None Identified) were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



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Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Sample Matrix: Analysis Method: First Sample #:	Tosco, 6400 Dublin Blvd., Dublin Water EPA 3510/8015 Mod. 603-0337	Sampled: Received: Reported:	Apr 3, 1996 Apr 3, 1996 Apr 5, 1996
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TOTAL EXTRACTABLE PETROLEUM HYDROCARBONS

Analyte	Reporting Limit µg/L	Sample I.D. 603-0337 W-1	Sample I.D. 603-0338 W-2
Extractable Hydrocarbons	50	6200	130
Chromatogram Pattern:		Diesel & Unidentified Hydrocarbons <C15	Unidentified Hydrocarbons <C15

Quality Control Data

Report Limit Multiplication Factor:	1.3	1.7
Date Extracted:	4/3/96	4/3/96
Date Analyzed:	4/4/96	4/4/96
Instrument Identification:	HP-3B	HP-3B

Extractable Hydrocarbons are quantitated against a fresh diesel standard. Analytes reported as N.D. were not detected above the stated reporting limit.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc.
2855 Mitchell Drive, Suite 118
Walnut Creek, CA 94598
Attention: Jeff Hess

Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
Matrix Descript: Soil
Analysis Method: SM 5520 E&F (Gravimetric)
First Sample #: 604-0331

Sampled: Apr 3, 1996
Received: Apr 3, 1996
Extracted: Apr 4, 1996
Analyzed: Apr 4, 1996
Reported: Apr 5, 1996

TOTAL RECOVERABLE PETROLEUM OIL

Sample Number	Sample Description	Oil & Grease mg/kg (ppm)	Detection Limit Multiplication Factor
604-0331	S-14	N.D.	1.0
604-0332	S-15	N.D.	1.0
604-0334	S-17	N.D.	1.0

Detection Limits:

50

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
FOR Alan B. Kemp
Project Manager



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Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Matrix Descript: Water Analysis Method: SM 5520 B&F (Gravimetric) First Sample #: 604-0337	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Extracted: Apr 4, 1996 Analyzed: Apr 4, 1996 Reported: Apr 5, 1996
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TOTAL RECOVERABLE PETROLEUM OIL

Sample Number	Sample Description	Oil & Grease mg/L (ppm)	Detection Limit Multiplication Factor
604-0337	W-1	N.D.	1.0
604-0338	W-2	N.D.	1.0

Detection Limits:

5.0

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Soil, S-14 Analysis Method: EPA 5030/8010 Lab Number: 604-0331	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Analyzed: Apr 4, 1996 Reported: Apr 5, 1996
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HALOGENATED VOLATILE ORGANICS (EPA 8010)

Analyte	Detection Limit µg/kg	Sample Results µg/kg
Bromodichloromethane.....	5.0	N.D.
Bromoform.....	5.0	N.D.
Bromomethane.....	10	N.D.
Carbon tetrachloride.....	5.0	N.D.
Chlorobenzene.....	5.0	N.D.
Chloroethane.....	10	N.D.
2-Chloroethylvinyl ether.....	10	N.D.
Chloroform.....	5.0	N.D.
Chloromethane.....	10	N.D.
Dibromochloromethane.....	5.0	N.D.
1,2-Dichlorobenzene.....	5.0	N.D.
1,3-Dichlorobenzene.....	5.0	N.D.
1,4-Dichlorobenzene.....	5.0	N.D.
1,1-Dichloroethane.....	5.0	N.D.
1,2-Dichloroethane.....	5.0	N.D.
1,1-Dichloroethene.....	5.0	N.D.
cis-1,2-Dichloroethene.....	5.0	N.D.
trans-1,2-Dichloroethene.....	5.0	N.D.
1,2-Dichloropropane.....	5.0	N.D.
cis-1,3-Dichloropropene.....	5.0	N.D.
trans-1,3-Dichloropropene.....	5.0	N.D.
Methylene chloride.....	50	N.D.
1,1,2,2-Tetrachloroethane.....	5.0	N.D.
Tetrachloroethene.....	5.0	7.6
1,1,1-Trichloroethane.....	5.0	N.D.
1,1,2-Trichloroethane.....	5.0	N.D.
Trichloroethene.....	5.0	N.D.
Trichlorofluoromethane.....	5.0	N.D.
Vinyl chloride.....	10	N.D.

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
For Alan B. Kemp
Project Manager



**Sequoia
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Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Soil, S-15 Analysis Method: EPA 5030/8010 Lab Number: 604-0332	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Analyzed: Apr 4, 1996 Reported: Apr 5, 1996
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HALOGENATED VOLATILE ORGANICS (EPA 8010)

Analyte	Detection Limit µg/kg	Sample Results µg/kg
Bromodichloromethane.....	5.0	N.D.
Bromoform.....	5.0	N.D.
Bromomethane.....	10	N.D.
Carbon tetrachloride.....	5.0	N.D.
Chlorobenzene.....	5.0	N.D.
Chloroethane.....	10	N.D.
2-Chloroethylvinyl ether.....	10	N.D.
Chloroform.....	5.0	N.D.
Chloromethane.....	10	N.D.
Dibromochloromethane.....	5.0	N.D.
1,2-Dichlorobenzene.....	5.0	N.D.
1,3-Dichlorobenzene.....	5.0	N.D.
1,4-Dichlorobenzene.....	5.0	N.D.
1,1-Dichloroethane.....	5.0	N.D.
1,2-Dichloroethane.....	5.0	N.D.
1,1-Dichloroethene.....	5.0	N.D.
cis-1,2-Dichloroethene.....	5.0	N.D.
trans-1,2-Dichloroethene.....	5.0	N.D.
1,2-Dichloropropane.....	5.0	N.D.
cis-1,3-Dichloropropene.....	5.0	N.D.
trans-1,3-Dichloropropene.....	5.0	N.D.
Methylene chloride.....	50	N.D.
1,1,2,2-Tetrachloroethane.....	5.0	N.D.
Tetrachloroethene.....	5.0	N.D.
1,1,1-Trichloroethane.....	5.0	N.D.
1,1,2-Trichloroethane.....	5.0	N.D.
Trichloroethene.....	5.0	N.D.
Trichlorofluoromethane.....	5.0	N.D.
Vinyl chloride.....	10	N.D.

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Soil, S-17 Analysis Method: EPA 5030/8010 Lab Number: 604-0334	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Analyzed: Apr 4, 1996 Reported: Apr 5, 1996
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HALOGENATED VOLATILE ORGANICS (EPA 8010)

Analyte	Detection Limit µg/kg	Sample Results µg/kg
Bromodichloromethane.....	5.0	N.D.
Bromoform.....	5.0	N.D.
Bromomethane.....	10	N.D.
Carbon tetrachloride.....	5.0	N.D.
Chlorobenzene.....	5.0	N.D.
Chloroethane.....	10	N.D.
2-Chloroethylvinyl ether.....	10	N.D.
Chloroform.....	5.0	N.D.
Chloromethane.....	10	N.D.
Dibromochloromethane.....	5.0	N.D.
1,2-Dichlorobenzene.....	5.0	N.D.
1,3-Dichlorobenzene.....	5.0	N.D.
1,4-Dichlorobenzene.....	5.0	N.D.
1,1-Dichloroethane.....	5.0	N.D.
1,2-Dichloroethane.....	5.0	N.D.
1,1-Dichloroethene.....	5.0	N.D.
cis-1,2-Dichloroethene.....	5.0	N.D.
trans-1,2-Dichloroethene.....	5.0	N.D.
1,2-Dichloropropane.....	5.0	N.D.
cis-1,3-Dichloropropene.....	5.0	N.D.
trans-1,3-Dichloropropene.....	5.0	N.D.
Methylene chloride.....	50	N.D.
1,1,2,2-Tetrachloroethane.....	5.0	N.D.
Tetrachloroethene.....	5.0	N.D.
1,1,1-Trichloroethane.....	5.0	N.D.
1,1,2-Trichloroethane.....	5.0	N.D.
Trichloroethene.....	5.0	N.D.
Trichlorofluoromethane.....	5.0	N.D.
Vinyl chloride.....	10	N.D.

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager





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Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Water, W-1 Analysis Method: EPA 5030/8010 Lab Number: 604-0337	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Analyzed: Apr 4, 1996 Reported: Apr 5, 1996
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HALOGENATED VOLATILE ORGANICS (EPA 8010)

Analyte	Detection Limit µg/L	Sample Results µg/L
Bromodichloromethane.....	5.0	N.D.
Bromoform.....	5.0	N.D.
Bromomethane.....	10	N.D.
Carbon tetrachloride.....	5.0	N.D.
Chlorobenzene.....	5.0	N.D.
Chloroethane.....	10	N.D.
2-Chloroethylvinyl ether.....	10	N.D.
Chloroform.....	5.0	N.D.
Chloromethane.....	10	N.D.
Dibromochloromethane.....	5.0	N.D.
1,3-Dichlorobenzene.....	5.0	N.D.
1,4-Dichlorobenzene.....	5.0	N.D.
1,2-Dichlorobenzene.....	5.0	N.D.
1,1-Dichloroethane.....	5.0	N.D.
1,2-Dichloroethane.....	5.0	N.D.
1,1-Dichloroethene.....	5.0	N.D.
cis-1,2-Dichloroethene.....	5.0	N.D.
trans-1,2-Dichloroethene.....	5.0	N.D.
1,2-Dichloropropane.....	5.0	N.D.
cis-1,3-Dichloropropene.....	5.0	N.D.
trans-1,3-Dichloropropene.....	5.0	N.D.
Methylene chloride.....	50	N.D.
1,1,2,2-Tetrachloroethane.....	5.0	N.D.
Tetrachloroethene.....	5.0	6.7
1,1,1-Trichloroethane.....	5.0	N.D.
1,1,2-Trichloroethane.....	5.0	N.D.
Trichloroethene.....	5.0	N.D.
Trichlorofluoromethane.....	5.0	N.D.
Vinyl chloride.....	10	N.D.

Analytes reported as N.D. were not present above the stated limit of detection. Because matrix effects and/or other factors required additional sample dilution, detection limits for this sample have been raised.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
Project Manager



Sequoia Analytical

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Innovative Technical Solutions, Inc.
2855 Mitchell Drive, Suite 118
Walnut Creek, CA 94598
Attention: Jeff Hess

Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
Sample Descript: Water, W-2
Analysis Method: EPA 5030/8010
Lab Number: 604-0338

Sampled: Apr 3, 1996
Received: Apr 3, 1996
Analyzed: Apr 4, 1996
Reported: Apr 5, 1996

HALOGENATED VOLATILE ORGANICS (EPA 8010)

Analyte	Detection Limit µg/L	Sample Results µg/L
Bromodichloromethane.....	0.50	N.D.
Bromoform.....	0.50	N.D.
Bromomethane.....	1.0	N.D.
Carbon tetrachloride.....	0.50	N.D.
Chlorobenzene.....	0.50	N.D.
Chloroethane.....	1.0	N.D.
2-Chloroethylvinyl ether.....	1.0	N.D.
Chloroform.....	0.50	N.D.
Chloromethane.....	1.0	N.D.
Dibromochloromethane.....	0.50	N.D.
1,3-Dichlorobenzene.....	0.50	N.D.
1,4-Dichlorobenzene.....	0.50	N.D.
1,2-Dichlorobenzene.....	0.50	N.D.
1,1-Dichloroethane.....	0.50	N.D.
1,2-Dichloroethane.....	0.50	N.D.
1,1-Dichloroethene.....	0.50	N.D.
cis-1,2-Dichloroethene.....	0.50	N.D.
trans-1,2-Dichloroethene.....	0.50	N.D.
1,2-Dichloropropane.....	0.50	N.D.
cis-1,3-Dichloropropene.....	0.50	N.D.
trans-1,3-Dichloropropene.....	0.50	N.D.
Methylene chloride.....	5.0	N.D.
1,1,2,2-Tetrachloroethane.....	0.50	N.D.
Tetrachloroethene.....	0.50	N.D.
1,1,1-Trichloroethane.....	0.50	N.D.
1,1,2-Trichloroethane.....	0.50	N.D.
Trichloroethene.....	0.50	N.D.
Trichlorofluoromethane.....	0.50	N.D.
Vinyl chloride.....	1.0	N.D.

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Sample Descript: Analysis Method: Lab Number:	Tosco, 6400 Dublin Blvd., Dublin Soil, SP-1(A-D) EPA 8240 604-0342	Sampled: Received: Extracted: Analyzed: Reported:	Apr 3, 1996 Apr 3, 1996 Apr 4, 1996 Apr 4, 1996 Apr 5, 1996
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VOLATILE ORGANICS by GC/MS (EPA 8240)

Analyte	Detection Limit µg/kg	Sample Results µg/kg
Acetone.....	500	N.D.
Benzene.....	100	N.D.
Bromodichloromethane.....	100	N.D.
Bromoform.....	100	N.D.
Bromomethane.....	100	N.D.
2-Butanone.....	500	N.D.
Carbon disulfide.....	100	N.D.
Carbon tetrachloride.....	100	N.D.
Chlorobenzene.....	100	N.D.
Chloroethane.....	100	N.D.
2-Chloroethyl vinyl ether.....	500	N.D.
Chloroform.....	100	N.D.
Chloromethane.....	100	N.D.
Dibromochloromethane.....	100	N.D.
1,1-Dichloroethane.....	100	N.D.
1,2-Dichloroethane.....	100	N.D.
1,1-Dichloroethene.....	100	N.D.
cis-1,2-Dichloroethene.....	100	N.D.
trans-1,2-Dichloroethene.....	100	N.D.
1,2-Dichloropropane.....	100	N.D.
cis-1,3-Dichloropropene.....	100	N.D.
trans-1,3-Dichloropropene.....	100	N.D.
Ethylbenzene.....	100	N.D.
2-Hexanone.....	500	N.D.
Methylene chloride.....	250	N.D.
4-Methyl-2-pentanone.....	500	N.D.
Styrene.....	100	N.D.
1,1,2,2-Tetrachloroethane.....	100	N.D.
Tetrachloroethene.....	100	N.D.
Toluene.....	100	N.D.
1,1,1-Trichloroethane.....	100	N.D.
1,1,2-Trichloroethane.....	100	N.D.
Trichloroethene.....	100	N.D.
Trichlorofluoromethane.....	100	N.D.

Analytes reported as N.D. were not present above the stated limit of detection.



Innovative Technical Solutions, Inc.
2855 Mitchell Drive, Suite 118
Walnut Creek, CA 94598
Attention: Jeff Hess

Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
Sample Descript: Soil, SP-1(A-D)
Analysis Method: EPA 8240
Lab Number: 604-0342

Sampled: Apr 3, 1996
Received: Apr 3, 1996
Extracted: Apr 4, 1996
Analyzed: Apr 4, 1996
Reported: Apr 5, 1996

VOLATILE ORGANICS by GC/MS (EPA 8240)

Analyte	Detection Limit µg/kg	Sample Results µg/kg
Vinyl acetate.....	100	N.D.
Vinyl chloride.....	100	N.D.
Total Xylenes	100	N.D.

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Soil, S-14 Analysis Method: EPA 8270 Lab Number: 604-0331	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Extracted: Apr 4, 1996 Analyzed: Apr 8, 1996 Reported: Apr 8, 1996
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SEMI-VOLATILE ORGANICS by GC/MS (EPA 8270)

Analyte	Detection Limit µg/kg	Sample Results µg/kg
Acenaphthene.....	100	N.D.
Acenaphthylene.....	100	N.D.
Aniline.....	100	N.D.
Anthracene.....	100	N.D.
Benzidine.....	2,500	N.D.
Benzoic Acid.....	500	N.D.
Benzo(a)anthracene.....	100	N.D.
Benzo(b)fluoranthene.....	100	N.D.
Benzo(k)fluoranthene.....	100	N.D.
Benzo(g,h,i)perylene.....	100	N.D.
Benzo(a)pyrene.....	100	N.D.
Benzyl alcohol.....	100	N.D.
Bis(2-chloroethoxy)methane.....	100	N.D.
Bis(2-chloroethyl)ether.....	100	N.D.
Bis(2-chloroisopropyl)ether.....	100	N.D.
Bis(2-ethylhexyl)phthalate.....	500	N.D.
4-Bromophenyl phenyl ether.....	100	N.D.
Butyl benzyl phthalate.....	100	N.D.
4-Chloroaniline.....	100	N.D.
2-Chloronaphthalene.....	100	N.D.
4-Chloro-3-methylphenol.....	100	N.D.
2-Chlorophenol.....	100	N.D.
4-Chlorophenyl phenyl ether.....	100	N.D.
Chrysene.....	100	N.D.
Dibenz(a,h)anthracene.....	100	N.D.
Dibenzofuran.....	100	N.D.
Di-N-butyl phthalate.....	500	N.D.
1,3-Dichlorobenzene.....	100	N.D.
1,4-Dichlorobenzene.....	100	N.D.
1,2-Dichlorobenzene.....	100	N.D.
3,3-Dichlorobenzidine.....	500	N.D.
2,4-Dichlorophenol.....	100	N.D.
Diethyl phthalate.....	100	N.D.
2,4-Dimethylphenol.....	100	N.D.
Dimethyl phthalate.....	100	N.D.
4,6-Dinitro-2-methylphenol.....	500	N.D.
2,4-Dinitrophenol.....	500	N.D.
2,4-Dinitrotoluene.....	100	N.D.
2,6-Dinitrotoluene.....	100	N.D.
Di-N-octyl phthalate.....	100	N.D.





Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Soil, S-14 Analysis Method: EPA 8270 Lab Number: 604-0331	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Extracted: Apr 4, 1996 Analyzed: Apr 8, 1996 Reported: Apr 8, 1996
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SEMI-VOLATILE ORGANICS by GC/MS (EPA 8270)

Analyte	Detection Limit µg/kg	Sample Results µg/kg
Fluoranthene.....	100	N.D.
Fluorene.....	100	N.D.
Hexachlorobenzene.....	100	N.D.
Hexachlorobutadiene.....	100	N.D.
Hexachlorocyclopentadiene.....	100	N.D.
Hexachloroethane.....	100	N.D.
Indeno(1,2,3-cd)pyrene.....	100	N.D.
Isophorone.....	100	N.D.
2-Methylnaphthalene.....	100	N.D.
2-Methylphenol.....	100	N.D.
4-Methylphenol.....	100	N.D.
Naphthalene.....	100	N.D.
2-Nitroaniline.....	500	N.D.
3-Nitroaniline.....	500	N.D.
4-Nitroaniline.....	500	N.D.
Nitrobenzene.....	100	N.D.
2-Nitrophenol.....	100	N.D.
4-Nitrophenol.....	500	N.D.
N-Nitrosodimethylamine.....	100	N.D.
N-Nitrosodiphenylamine.....	100	N.D.
N-Nitroso-di-N-propylamine.....	100	N.D.
Pentachlorophenol.....	500	N.D.
Phenanthrene.....	100	N.D.
Phenol.....	100	N.D.
Pyrene.....	100	N.D.
1,2,4-Trichlorobenzene.....	100	N.D.
2,4,5-Trichlorophenol.....	500	N.D.
2,4,6-Trichlorophenol.....	100	N.D.

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc.
2855 Mitchell Drive, Suite 118
Walnut Creek, CA 94598
Attention: Jeff Hess

Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
Sample Descript: Soil, S-15
Analysis Method: EPA 8270
Lab Number: 604-0332

Sampled: Apr 3, 1996
Received: Apr 3, 1996
Extracted: Apr 4, 1996
Analyzed: Apr 8, 1996
Reported: Apr 8, 1996

SEMI-VOLATILE ORGANICS by GC/MS (EPA 8270)

Analyte	Detection Limit µg/kg	Sample Results µg/kg
Acenaphthene.....	100	N.D.
Acenaphthylene.....	100	N.D.
Aniline.....	100	N.D.
Anthracene.....	100	N.D.
Benzidine.....	2,500	N.D.
Benzoic Acid.....	500	N.D.
Benzo(a)anthracene.....	100	N.D.
Benzo(b)fluoranthene.....	100	N.D.
Benzo(k)fluoranthene.....	100	N.D.
Benzo(g,h,i)perylene.....	100	N.D.
Benzo(a)pyrene.....	100	N.D.
Benzyl alcohol.....	100	N.D.
Bis(2-chloroethoxy)methane.....	100	N.D.
Bis(2-chloroethyl)ether.....	100	N.D.
Bis(2-chloroisopropyl)ether.....	100	N.D.
Bis(2-ethylhexyl)phthalate.....	500	N.D.
4-Bromophenyl phenyl ether.....	100	N.D.
Butyl benzyl phthalate.....	100	N.D.
4-Chloroaniline.....	100	N.D.
2-Chloronaphthalene.....	100	N.D.
4-Chloro-3-methylphenol.....	100	N.D.
2-Chlorophenol.....	100	N.D.
4-Chlorophenyl phenyl ether.....	100	N.D.
Chrysene.....	100	N.D.
Dibenz(a,h)anthracene.....	100	N.D.
Dibenzofuran.....	100	N.D.
Di-N-butyl phthalate.....	500	N.D.
1,3-Dichlorobenzene.....	100	N.D.
1,4-Dichlorobenzene.....	100	N.D.
1,2-Dichlorobenzene.....	100	N.D.
3,3-Dichlorobenzidine.....	500	N.D.
2,4-Dichlorophenol.....	100	N.D.
Diethyl phthalate.....	100	N.D.
2,4-Dimethylphenol.....	100	N.D.
Dimethyl phthalate.....	100	N.D.
4,6-Dinitro-2-methylphenol.....	500	N.D.
2,4-Dinitrophenol.....	500	N.D.
2,4-Dinitrotoluene.....	100	N.D.
2,6-Dinitrotoluene.....	100	N.D.
Di-N-octyl phthalate.....	100	N.D.





Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Sample Descript: Soil, S-15
Walnut Creek, CA 94598 Analysis Method: EPA 8270
Attention: Jeff Hess Lab Number: 604-0332
Sampled: Apr 3, 1996
Received: Apr 3, 1996
Extracted: Apr 4, 1996
Analyzed: Apr 8, 1996
Reported: Apr 8, 1996

SEMI-VOLATILE ORGANICS by GC/MS (EPA 8270)

Table with 3 columns: Analyte, Detection Limit (µg/kg), and Sample Results (µg/kg). Lists various organic compounds and their detection limits, with sample results mostly marked as N.D.

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL #1271

Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Sample Descript: Soil, S-17
Walnut Creek, CA 94598 Analysis Method: EPA 8270
Attention: Jeff Hess Lab Number: 604-0334

Sampled: Apr 3, 1996
Received: Apr 3, 1996
Extracted: Apr 4, 1996
Analyzed: Apr 8, 1996
Reported: Apr 8, 1996

SEMI-VOLATILE ORGANICS by GC/MS (EPA 8270)

Analyte	Detection Limit µg/kg	Sample Results µg/kg
Acenaphthene.....	100	N.D.
Acenaphthylene.....	100	N.D.
Aniline.....	100	N.D.
Anthracene.....	100	N.D.
Benzidine.....	2,500	N.D.
Benzoic Acid.....	500	N.D.
Benzo(a)anthracene.....	100	N.D.
Benzo(b)fluoranthene.....	100	N.D.
Benzo(k)fluoranthene.....	100	N.D.
Benzo(g,h,i)perylene.....	100	N.D.
Benzo(a)pyrene.....	100	N.D.
Benzyl alcohol.....	100	N.D.
Bis(2-chloroethoxy)methane.....	100	N.D.
Bis(2-chloroethyl)ether.....	100	N.D.
Bis(2-chloroisopropyl)ether.....	100	N.D.
Bis(2-ethylhexyl)phthalate.....	500	N.D.
4-Bromophenyl phenyl ether.....	100	N.D.
Butyl benzyl phthalate.....	100	N.D.
4-Chloroaniline.....	100	N.D.
2-Chloronaphthalene.....	100	N.D.
4-Chloro-3-methylphenol.....	100	N.D.
2-Chlorophenol.....	100	N.D.
4-Chlorophenyl phenyl ether.....	100	N.D.
Chrysene.....	100	N.D.
Dibenz(a,h)anthracene.....	100	N.D.
Dibenzofuran.....	100	N.D.
Di-N-butyl phthalate.....	500	N.D.
1,3-Dichlorobenzene.....	100	N.D.
1,4-Dichlorobenzene.....	100	N.D.
1,2-Dichlorobenzene.....	100	N.D.
3,3-Dichlorobenzidine.....	500	N.D.
2,4-Dichlorophenol.....	100	N.D.
Diethyl phthalate.....	100	N.D.
2,4-Dimethylphenol.....	100	N.D.
Dimethyl phthalate.....	100	N.D.
4,6-Dinitro-2-methylphenol.....	500	N.D.
2,4-Dinitrophenol.....	500	N.D.
2,4-Dinitrotoluene.....	100	N.D.
2,6-Dinitrotoluene.....	100	N.D.
Di-N-octyl phthalate.....	100	N.D.





Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Soil, S-17 Analysis Method: EPA 8270 Lab Number: 604-0334	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Extracted: Apr 4, 1996 Analyzed: Apr 8, 1996 Reported: Apr 8, 1996
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SEMI-VOLATILE ORGANICS by GC/MS (EPA 8270)

Analyte	Detection Limit µg/kg	Sample Results µg/kg
Fluoranthene.....	100	N.D.
Fluorene.....	100	N.D.
Hexachlorobenzene.....	100	N.D.
Hexachlorobutadiene.....	100	N.D.
Hexachlorocyclopentadiene.....	100	N.D.
Hexachloroethane.....	100	N.D.
Indeno(1,2,3-cd)pyrene.....	100	N.D.
Isophorone.....	100	N.D.
2-Methylnaphthalene.....	100	N.D.
2-Methylphenol.....	100	N.D.
4-Methylphenol.....	100	N.D.
Naphthalene.....	100	N.D.
2-Nitroaniline.....	500	N.D.
3-Nitroaniline.....	500	N.D.
4-Nitroaniline.....	500	N.D.
Nitrobenzene.....	100	N.D.
2-Nitrophenol.....	100	N.D.
4-Nitrophenol.....	500	N.D.
N-Nitrosodimethylamine.....	100	N.D.
N-Nitrosodiphenylamine.....	100	N.D.
N-Nitroso-di-N-propylamine.....	100	N.D.
Pentachlorophenol.....	500	N.D.
Phenanthrene.....	100	N.D.
Phenol.....	100	N.D.
Pyrene.....	100	N.D.
1,2,4-Trichlorobenzene.....	100	N.D.
2,4,5-Trichlorophenol.....	500	N.D.
2,4,6-Trichlorophenol.....	100	N.D.

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Soil, SP-1(A-D) Analysis Method: EPA 8270 Lab Number: 604-0342	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Extracted: Apr 4, 1996 Analyzed: Apr 8, 1996 Reported: Apr 8, 1996
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SEMI-VOLATILE ORGANICS by GC/MS (EPA 8270)

Analyte	Detection Limit µg/kg	Sample Results µg/kg
Acenaphthene.....	10,000	N.D.
Acenaphthylene.....	10,000	N.D.
Aniline.....	10,000	N.D.
Anthracene.....	10,000	N.D.
Benzidine.....	250,000	N.D.
Benzoic Acid.....	50,000	N.D.
Benzo(a)anthracene.....	10,000	N.D.
Benzo(b)fluoranthene.....	10,000	N.D.
Benzo(k)fluoranthene.....	10,000	N.D.
Benzo(g,h,i)perylene.....	10,000	N.E.
Benzo(a)pyrene.....	10,000	N.D.
Benzyl alcohol.....	10,000	N.D.
Bis(2-chloroethoxy)methane.....	10,000	N.D.
Bis(2-chloroethyl)ether.....	10,000	N.D.
Bis(2-chloroisopropyl)ether.....	10,000	N.D.
Bis(2-ethylhexyl)phthalate.....	50,000	N.D.
4-Bromophenyl phenyl ether.....	10,000	N.D.
Butyl benzyl phthalate.....	10,000	N.D.
4-Chloroaniline.....	10,000	N.D.
2-Chloronaphthalene.....	10,000	N.D.
4-Chloro-3-methylphenol.....	10,000	N.D.
2-Chlorophenol.....	10,000	N.D.
4-Chlorophenyl phenyl ether.....	10,000	N.D.
Chrysene.....	10,000	N.D.
Dibenz(a,h)anthracene.....	10,000	N.D.
Dibenzofuran.....	10,000	N.D.
Di-N-butyl phthalate.....	50,000	N.D.
1,3-Dichlorobenzene.....	10,000	N.D.
1,4-Dichlorobenzene.....	10,000	N.D.
1,2-Dichlorobenzene.....	10,000	N.D.
3,3-Dichlorobenzidine.....	50,000	N.D.
2,4-Dichlorophenol.....	10,000	N.D.
Diethyl phthalate.....	10,000	N.D.
2,4-Dimethylphenol.....	10,000	N.D.
Dimethyl phthalate.....	10,000	N.D.
4,6-Dinitro-2-methylphenol.....	50,000	N.D.
2,4-Dinitrophenol.....	50,000	N.D.
2,4-Dinitrotoluene.....	10,000	N.D.
2,6-Dinitrotoluene.....	10,000	N.D.
Di-N-octyl phthalate.....	10,000	N.D.



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Soil, SP-1(A-D) Analysis Method: EPA 8270 Lab Number: 604-0342	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Extracted: Apr 4, 1996 Analyzed: Apr 8, 1996 Reported: Apr 8, 1996
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SEMI-VOLATILE ORGANICS by GC/MS (EPA 8270)

Analyte	Detection Limit µg/kg	Sample Results µg/kg
Fluoranthene.....	10,000	N.D.
Fluorene.....	10,000	N.D.
Hexachlorobenzene.....	10,000	N.D.
Hexachlorobutadiene.....	10,000	N.D.
Hexachlorocyclopentadiene.....	10,000	N.D.
Hexachloroethane.....	10,000	N.D.
Indeno(1,2,3-cd)pyrene.....	10,000	N.D.
Isophorone.....	10,000	N.D.
2-Methylnaphthalene.....	10,000	N.D.
2-Methylphenol.....	10,000	N.D.
4-Methylphenol.....	10,000	N.D.
Naphthalene.....	10,000	N.D.
2-Nitroaniline.....	50,000	N.D.
3-Nitroaniline.....	50,000	N.D.
4-Nitroaniline.....	50,000	N.D.
Nitrobenzene.....	10,000	N.D.
2-Nitrophenol.....	10,000	N.D.
4-Nitrophenol.....	50,000	N.D.
N-Nitrosodimethylamine.....	10,000	N.D.
N-Nitrosodiphenylamine.....	10,000	N.D.
N-Nitroso-di-N-propylamine.....	10,000	N.D.
Pentachlorophenol.....	50,000	N.D.
Phenanthrene.....	10,000	N.D.
Phenol.....	10,000	N.D.
Pyrene.....	10,000	N.D.
1,2,4-Trichlorobenzene.....	10,000	N.D.
2,4,5-Trichlorophenol.....	50,000	N.D.
2,4,6-Trichlorophenol.....	10,000	N.D.

Analytes reported as N.D. were not present above the stated limit of detection. Because matrix effects and/or other factors required additional sample dilution, detection limits for this sample have been raised.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



Sequoia Analytical

680 Chesapeake Drive
404 N. Wiger Lane
819 Striker Avenue, Suite 8

Redwood City, CA 94063
Walnut Creek, CA 94598
Sacramento, CA 95834

(415) 364-9600
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FAX (916) 921-0100

Innovative Technical Solutions, Inc.
2855 Mitchell Drive, Suite 118
Walnut Creek, CA 94598
Attention: Jeff Hess

Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
Sample Descript: Soil
Analysis for: Lead
First Sample #: 604-0318

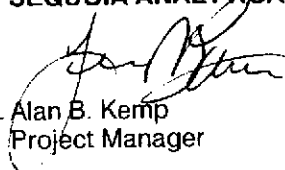
Sampled: Apr 3, 1996
Received: Apr 3, 1996
Digested: Apr 4, 1996
Analyzed: Apr 5, 1996
Reported: Apr 5, 1996

LABORATORY ANALYSIS FOR: Lead

Sample Number	Sample Description	Detection Limit mg/kg	Sample Result mg/kg
604-0318	S-1	2.5	3.5
604-0319	S-2	2.5	N.D.
604-0320	S-3	2.5	2.6
604-0321	S-4	2.5	N.D.
604-0322	S-5	2.5	N.D.
604-0323	S-6	2.5	N.D.
604-0324	S-7	2.5	4.8
604-0325	S-8	2.5	5.5
604-0326	S-9	2.5	5.3
604-0327	S-10	2.5	7.7
604-0328	S-11	2.5	9.7
604-0329	S-12	2.5	N.D.

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
Project Manager



Sequoia Analytical

680 Chesapeake Drive
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Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Soil Analysis for: Lead First Sample #: 604-0330	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Digested: Apr 4, 1996 Analyzed: Apr 5, 1996 Reported: Apr 5, 1996
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LABORATORY ANALYSIS FOR: Lead

Sample Number	Sample Description	Detection Limit mg/kg	Sample Result mg/kg
604-0330	S-13	2.5	N.D.
604-0333	S-16	2.5	21
604-0343	SP-2(A-D)	2.5	N.D.
604-0344	SP-2(E-H)	2.5	N.D.
604-0345	SP-2(I-L)	2.5	N.D.
604-0346	SP-2(M-P)	2.5	N.D.
604-0347	SP-2(Q-T)	2.5	4.4

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
For Alan B. Kemp
Project Manager



Sequoia Analytical

680 Chesapeake Drive
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Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Sample Descript: Soil, S-14
Walnut Creek, CA 94598
Attention: Jeff Hess Lab Number: 604-0331

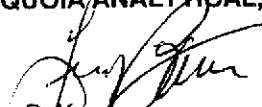
Sampled: Apr 3, 1996
Received: Apr 3, 1996
Digested: Apr 4, 1996
Analyzed: Apr 5, 1996
Reported: Apr 8, 1996

LUFT METALS

Analyte	Detection Limit mg/kg	Sample Results mg/kg
Cadmium.....	0.50	N.D.
Chromium.....	0.50	22
Lead.....	1.0	N.D.
Nickel.....	1.0	28
Zinc.....	1.0	28

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
Project Manager



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Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Sample Descript: Soil, S-15
Walnut Creek, CA 94598
Attention: Jeff Hess Lab Number: 604-0332

Sampled: Apr 3, 1996
Received: Apr 3, 1996
Digested: Apr 4, 1996
Analyzed: Apr 5, 1996
Reported: Apr 8, 1996

LUFT METALS

Analyte	Detection Limit mg/kg	Sample Results mg/kg
Cadmium.....	0.50	N.D.
Chromium.....	0.50	25
Lead.....	1.0	N.D.
Nickel.....	1.0	33
Zinc.....	1.0	30

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271

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Innovative Technical Solutions, Inc.
2855 Mitchell Drive, Suite 118
Walnut Creek, CA 94598
Attention: Jeff Hess

Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
Sample Descript: Soil, S-17
Lab Number: 604-0334


Sampled: Apr 3, 1996
Received: Apr 3, 1996
Digested: Apr 4, 1996
Analyzed: Apr 5, 1996
Reported: Apr 8, 1996

LUFT METALS

Analyte	Detection Limit mg/kg	Sample Results mg/kg
Cadmium.....	0.50	N.D.
Chromium.....	0.50	37
Lead.....	1.0	11
Nickel.....	1.0	90
Zinc.....	1.0	73

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
Project Manager



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Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Soil, T1(A-D) Lab Number: 604-0339	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Extracted: Apr 4, 1996 Analyzed: Apr 5, 1996 Reported: Apr 8, 1996
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LUFT METALS

Analyte	Detection Limit mg/kg	Sample Results mg/kg
Cadmium.....	0.50	N.D.
Chromium.....	0.50	24
Lead.....	1.0	N.D.
Nickel.....	1.0	34
Zinc.....	1.0	31

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
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Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Sample Descript: Soil, T2(A-D)
Walnut Creek, CA 94598
Attention: Jeff Hess Lab Number: 604-0340

Sampled: Apr 3, 1996
Received: Apr 3, 1996
Extracted: Apr 4, 1996
Analyzed: Apr 5, 1996
Reported: Apr 8, 1996

LUFT METALS

Analyte	Detection Limit mg/kg	Sample Results mg/kg
Cadmium.....	0.50	N.D.
Chromium.....	0.50	19
Lead.....	1.0	N.D.
Nickel.....	1.0	23
Zinc.....	1.0	26

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
Project Manager



Sequoia Analytical

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Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Soil, T3(A-D) Lab Number: 604-0341	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Extracted: Apr 4, 1996 Analyzed: Apr 5, 1996 Reported: Apr 8, 1996
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LUFT METALS

Analyte	Detection Limit mg/kg	Sample Results mg/kg
Cadmium.....	0.50	N.D.
Chromium.....	0.50	19
Lead.....	1.0	N.D.
Nickel.....	1.0	28
Zinc.....	1.0	28

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271

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Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Sample Descript: Water, W-1
Walnut Creek, CA 94598
Attention: Jeff Hess Lab Number: 604-0337

Sampled: Apr 3, 1996
Received: Apr 3, 1996
Digested: Apr 4, 1996
Analyzed: Apr 5, 1996
Reported: Apr 8, 1996

LUFT METALS

Analyte	Detection Limit mg/L	Sample Results mg/L
Cadmium.....	0.010	N.D.
Chromium.....	0.010	0.015
Lead.....	0.020	N.D.
Nickel.....	0.020	0.046
Zinc.....	0.020	0.071

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
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Innovative Technical Solutions, Inc.
2855 Mitchell Drive, Suite 118
Walnut Creek, CA 94598
Attention: Jeff Hess

Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
Sample Descript: Water, W-2
Lab Number: 604-0338

Sampled: Apr 3, 1996
Received: Apr 3, 1996
Digested: Apr 4, 1996
Analyzed: Apr 5, 1996
Reported: Apr 8, 1996

LUFT METALS

Analyte	Detection Limit mg/L	Sample Results mg/L
Cadmium.....	0.010	N.D.
Chromium.....	0.010	N.D.
Lead.....	0.020	N.D.
Nickel.....	0.020	N.D.
Zinc.....	0.020	0.033

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



Sequoia Analytical

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819 Striker Avenue, Suite 8	Sacramento, CA 95834	(916) 921-9600	FAX (916) 921-0100

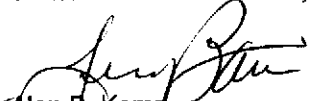
Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Soil, SP-1(A-D) Lab Number: 604-0342	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Extracted: Apr 4, 1996 Analyzed: 4/4 & 5/96 Reported: Apr 8, 1996
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CAM 17 METALS

Analyte	Detection Limit mg/kg	Sample Results mg/kg
Antimony.....	5.0	N.D.
Arsenic.....	5.0	8.1
Barium.....	0.50	83
Beryllium.....	0.50	N.D.
Cadmium.....	0.50	N.D.
Chromium (III).....	0.50	29
Cobalt.....	0.50	7.4
Copper.....	0.50	29
Lead.....	1.0	N.D.
Mercury.....	0.010	0.049
Molybdenum.....	0.50	1.9
Nickel.....	1.0	34
Selenium.....	5.0	N.D.
Silver.....	0.50	0.65
Thallium.....	5.0	N.D.
Vanadium.....	0.50	27
Zinc.....	1.0	45

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Water, W-1 Analysis Method: EPA 8270 Lab Number: 604-0337	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Extracted: Apr 4, 1996 Analyzed: Apr 8, 1996 Reported: Apr 9, 1996
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SEMI-VOLATILE ORGANICS by GC/MS (EPA 8270)

Analyte	Detection Limit µg/L	Sample Results µg/L
Acenaphthene.....	10	N.D.
Acenaphthylene.....	10	N.D.
Aniline.....	10	N.D.
Anthracene.....	10	N.D.
Benzidine.....	250	N.D.
Benzoic Acid.....	50	N.D.
Benzo(a)anthracene.....	10	N.D.
Benzo(b)fluoranthene.....	10	N.D.
Benzo(k)fluoranthene.....	10	N.D.
Benzo(g,h,i)perylene.....	10	N.D.
Benzo(a)pyrene.....	10	N.D.
Benzyl alcohol.....	10	36
Bis(2-chloroethoxy)methane.....	10	N.D.
Bis(2-chloroethyl)ether.....	10	N.D.
Bis(2-chloroisopropyl)ether.....	10	N.D.
Bis(2-ethylhexyl)phthalate.....	50	N.D.
4-Bromophenyl phenyl ether.....	10	N.D.
Butyl benzyl phthalate.....	10	N.D.
4-Chloroaniline.....	10	N.D.
2-Chloronaphthalene.....	10	N.D.
4-Chloro-3-methylphenol.....	10	N.D.
2-Chlorophenol.....	10	N.D.
4-Chlorophenyl phenyl ether.....	10	N.D.
Chrysene.....	10	N.D.
Dibenz(a,h)anthracene.....	10	N.D.
Dibenzofuran.....	10	N.D.
Di-N-butyl phthalate.....	50	N.D.
1,3-Dichlorobenzene.....	10	N.D.
1,4-Dichlorobenzene.....	10	N.D.
1,2-Dichlorobenzene.....	10	N.D.
3,3-Dichlorobenzidine.....	50	N.D.
2,4-Dichlorophenol.....	10	N.D.
Diethyl phthalate.....	10	N.D.
2,4-Dimethylphenol.....	10	11
Dimethyl phthalate.....	10	N.D.
4,6-Dinitro-2-methylphenol.....	50	N.D.
2,4-Dinitrophenol.....	50	N.D.
2,4-Dinitrotoluene.....	10	N.D.
2,6-Dinitrotoluene.....	10	N.D.
Di-N-octyl phthalate.....	10	N.D.



Innovative Technical Solutions, Inc.	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin	Sampled: Apr 3, 1996
2855 Mitchell Drive, Suite 118	Sample Descript: Water, W-1	Received: Apr 3, 1996
Walnut Creek, CA 94598	Analysis Method: EPA 8270	Extracted: Apr 4, 1996
Attention: Jeff Hess	Lab Number: 604-0337	Analyzed: Apr 8, 1996
		Reported: Apr 9, 1996

SEMI-VOLATILE ORGANICS by GC/MS (EPA 8270)

Analyte	Detection Limit µg/L	Sample Results µg/L
Fluoranthene.....	10	N.D.
Fluorene.....	10	N.D.
Hexachlorobenzene.....	10	N.D.
Hexachlorobutadiene.....	10	N.D.
Hexachlorocyclopentadiene.....	10	N.D.
Hexachloroethane.....	10	N.D.
Indeno(1,2,3-cd)pyrene.....	10	N.D.
Isophorone.....	10	N.D.
2-Methylnaphthalene.....	10	130
2-Methylphenol.....	10	11
4-Methylphenol.....	10	N.D.
Naphthalene.....	10	44
2-Nitroaniline.....	50	N.D.
3-Nitroaniline.....	50	N.D.
4-Nitroaniline.....	50	N.D.
Nitrobenzene.....	10	N.D.
2-Nitrophenol.....	10	N.D.
4-Nitrophenol.....	50	N.D.
N-Nitrosodimethylamine.....	10	N.D.
N-Nitrosodiphenylamine.....	10	N.D.
N-Nitroso-di-N-propylamine.....	10	N.D.
Pentachlorophenol.....	50	N.D.
Phenanthrene.....	10	N.D.
Phenol.....	10	25
Pyrene.....	10	N.D.
1,2,4-Trichlorobenzene.....	10	N.D.
2,4,5-Trichlorophenol.....	50	N.D.
2,4,6-Trichlorophenol.....	10	N.D.

Analytes reported as N.D. were not present above the stated limit of detection. Because matrix effects and/or other factors required additional sample dilution, detection limits for this sample have been raised.

SEQUOIA ANALYTICAL, #1271


Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. 2855 Mitchell Drive, Suite 118 Walnut Creek, CA 94598 Attention: Jeff Hess	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin Sample Descript: Water, W-2 Analysis Method: EPA 8270 Lab Number: 6030-4338	Sampled: Apr 3, 1996 Received: Apr 3, 1996 Extracted: Apr 4, 1996 Analyzed: Apr 8, 1996 Reported: Apr 9, 1996
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SEMI-VOLATILE ORGANICS by GC/MS (EPA 8270)

Analyte	Detection Limit µg/L	Sample Results µg/L
Acenaphthene.....	2.0	N.D.
Acenaphthylene.....	2.0	N.D.
Aniline.....	2.0	N.D.
Anthracene.....	2.0	N.D.
Benzidine.....	50	N.D.
Benzoic Acid.....	10	N.D.
Benzo(a)anthracene.....	2.0	N.D.
Benzo(b)fluoranthene.....	2.0	N.D.
Benzo(k)fluoranthene.....	2.0	N.D.
Benzo(g,h,i)perylene.....	2.0	N.D.
Benzo(a)pyrene.....	2.0	N.D.
Benzyl alcohol.....	2.0	N.D.
Bis(2-chloroethoxy)methane.....	2.0	N.D.
Bis(2-chloroethyl)ether.....	2.0	N.D.
Bis(2-chloroisopropyl)ether.....	2.0	N.D.
Bis(2-ethylhexyl)phthalate.....	10	N.D.
4-Bromophenyl phenyl ether.....	2.0	N.D.
Butyl benzyl phthalate.....	2.0	N.D.
4-Chloroaniline.....	2.0	N.D.
2-Chloronaphthalene.....	2.0	N.D.
4-Chloro-3-methylphenol.....	2.0	N.D.
2-Chlorophenol.....	2.0	N.D.
4-Chlorophenyl phenyl ether.....	2.0	N.D.
Chrysene.....	2.0	N.D.
Dibenz(a,h)anthracene.....	2.0	N.D.
Dibenzofuran.....	2.0	N.D.
Di-N-butyl phthalate.....	10	N.D.
1,3-Dichlorobenzene.....	2.0	N.D.
1,4-Dichlorobenzene.....	2.0	N.D.
1,2-Dichlorobenzene.....	2.0	N.D.
3,3-Dichlorobenzidine.....	10	N.D.
2,4-Dichlorophenol.....	2.0	N.D.
Diethyl phthalate.....	2.0	N.D.
2,4-Dimethylphenol.....	2.0	N.D.
Dimethyl phthalate.....	2.0	N.D.
4,6-Dinitro-2-methylphenol.....	10	N.D.
2,4-Dinitrophenol.....	10	N.D.
2,4-Dinitrotoluene.....	2.0	N.D.
2,6-Dinitrotoluene.....	2.0	N.D.
Di-N-octyl phthalate.....	2.0	N.D.



Innovative Technical Solutions, Inc.	Client Project ID: Tosco, 6400 Dublin Blvd., Dublin	Sampled: Apr 3, 1996
2855 Mitchell Drive, Suite 118	Sample Descript: Water, W-2	Received: Apr 3, 1996
Walnut Creek, CA 94598	Analysis Method: EPA 8270	Extracted: Apr 4, 1996
Attention: Jeff Hess	Lab Number: 6030-4338	Analyzed: Apr 8, 1996
		Reported: Apr 9, 1996

SEMI-VOLATILE ORGANICS by GC/MS (EPA 8270)

Analyte	Detection Limit µg/L	Sample Results µg/L
Fluoranthene.....	2.0	N.D.
Fluorene.....	2.0	N.D.
Hexachlorobenzene.....	2.0	N.D.
Hexachlorobutadiene.....	2.0	N.D.
Hexachlorocyclopentadiene.....	2.0	N.D.
Hexachloroethane.....	2.0	N.D.
Indeno(1,2,3-cd)pyrene.....	2.0	N.D.
Isophorone.....	2.0	N.D.
2-Methylnaphthalene.....	2.0	3.0
2-Methylphenol.....	2.0	N.D.
4-Methylphenol.....	2.0	N.D.
Naphthalene.....	2.0	3.5
2-Nitroaniline.....	10	N.D.
3-Nitroaniline.....	10	N.D.
4-Nitroaniline.....	10	N.D.
Nitrobenzene.....	2.0	N.D.
2-Nitrophenol.....	2.0	N.D.
4-Nitrophenol.....	10	N.D.
N-Nitrosodimethylamine.....	2.0	N.D.
N-Nitrosodiphenylamine.....	2.0	N.D.
N-Nitroso-di-N-propylamine.....	2.0	N.D.
Pentachlorophenol.....	10	N.D.
Phenanthrene.....	2.0	N.D.
Phenol.....	2.0	N.D.
Pyrene.....	2.0	N.D.
1,2,4-Trichlorobenzene.....	2.0	N.D.
2,4,5-Trichlorophenol.....	10	N.D.
2,4,6-Trichlorophenol.....	2.0	N.D.

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL, #1271


 Alan B. Kemp
 Project Manager



Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Matrix: Solid
Walnut Creek, CA 94598
Attention: Jeff Hess QC Sample Group: 6040318-49

Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	Benzene	Toluene	Ethyl Benzene	Xylenes
QC Batch#:	SP040496	SP040496	SP040496	SP040496
	8020EXA	8020EXA	8020EXA	8020EXA
Analy. Method:	EPA 8020	EPA 8020	EPA 8020	EPA 8020
Prep. Method:	EPA 5030	EPA 5030	EPA 5030	EPA 5030
Analyst:	K. Nill	K. Nill	K. Nill	K. Nill
MS/MSD #:	6040342	6040342	6040342	6040342
Sample Conc.:	N.D.	N.D.	N.D.	N.D.
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/4/96	4/4/96	4/4/96	4/4/96
Instrument I.D.#:	HP-5	HP-5	HP-5	HP-5
Conc. Spiked:	0.40 mg/kg	0.40 mg/kg	0.40 mg/kg	1.2 mg/kg
Result:	0.41	0.4	0.41	1.26
MS % Recovery:	103	100	103	105
Dup. Result:	0.38	0.37	0.38	1.19
MSD % Recov.:	95	93	95	99
RPD:	7.6	7.8	7.6	5.7
RPD Limit:	0-20	0-20	0-20	0-20

LCS #:	5LCS040496	5LCS040496	5LCS040496	5LCS040496
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/4/96	4/4/96	4/4/96	4/4/96
Instrument I.D.#:	HP-5	HP-5	HP-5	HP-5
Conc. Spiked:	20 µg/L	20 µg/L	20 µg/L	60 µg/L
LCS Result:	19	18	19	57
LCS % Recov.:	95	90	95	95

MS/MSD LCS Control Limits	55-145	47-149	47-155	56-140
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Please Note:

The LCS is a control sample of known, interferent-free matrix that is analyzed using the same reagents, preparation, and analytical methods employed for the samples. The matrix spike is an aliquot of sample fortified with known quantities of specific compounds and subjected to the entire analytical procedure. If the recovery of analytes from the matrix spike does not fall within specified control limits due to matrix interference, the LCS recovery is to be used to validate the batch.

** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



Sequoia Analytical

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Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Matrix: Solid
Wainut Creek, CA 94598
Attention: Jeff Hess QC Sample Group: 6040318-47

Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	Benzene	Toluene	Ethyl Benzene	Xylenes
Analy. Method:	EPA 8020	EPA 8020	EPA 8020	EPA 8020
Prep. Method:	EPA 5030	EPA 5030	EPA 5030	EPA 5030
Analyst:	N. Zahedi	N. Zahedi	N. Zahedi	N. Zahedi
MS/MSD #:	6040030	6040030	6040030	6040030
Prepared Date:	4/3/96	4/3/96	4/3/96	4/3/96
Analyzed Date:	4/3/96	4/3/96	4/3/96	4/3/96
Instrument I.D.#:	HP-1	HP-1	HP-1	HP-1
Conc. Spiked:	0.20 mg/kg	0.20 mg/kg	0.20 mg/kg	0.60 mg/kg
MS % Recovery:	81	82	85	86
MSD % Recov.:	89	92	94	96
RPD:	9.4	10	10	10
RPD Limit:	0-20	0-20	0-20	0-20

LCS #:	LCS040596	LCS040596	LCS040596	LCS040596
Prepared Date:	4/5/96	4/5/96	4/5/96	4/5/96
Analyzed Date:	4/5/96	4/5/96	4/5/96	4/5/96
Instrument I.D.#:	HP-1	HP-1	HP-1	HP-1
Conc. Spiked:	20 µg/L	20 µg/L	20 µg/L	60 µg/L
LCS % Recov.:	99	102	104	107

MS/MSD LCS Control Limits	55-145	47-149	47-155	56-140
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Please Note:

The LCS is a control sample of known, interferent-free matrix that is analyzed using the same reagents, preparation, and analytical methods employed for the samples. The matrix spike is an aliquot of sample fortified with known quantities of specific compounds and subjected to the entire analytical procedure. If the recovery of analytes from the matrix spike does not fall within specified control limits due to matrix interference, the LCS recovery is to be used to validate the batch.

** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

SEQUOIA ANALYTICAL, #2000

Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
 2855 Mitchell Drive, Suite 118 Matrix: Liquid
 Walnut Creek, CA 94598
 Attention: Jeff Hess QC Sample Group: 6040337-338 Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	Benzene	Toluene	Ethyl Benzene	Xylenes	Diesel	Oil & Grease
QC Batch#:	GC040496 802011A	GC040496 802011A	GC040496 802011A	GC040496 802011A	SP040396 8015EXA	SP040396 5520MDA
Analy. Method:	EPA 8020	EPA 8020	EPA 8020	EPA 8020	EPA 8015	SM 5520
Prep. Method:	EPA 5030	EPA 5030	EPA 5030	EPA 5030	EPA 3550	SM 5520
Analyst:	L. Huang	L. Huang	L. Huang	L. Huang	J. Dinsay	D. Newcomb
MS/MSD #:	6031873	6031873	6031873	6031873	BLK040396	BLK040396
Sample Conc.:	N.D.	N.D.	N.D.	N.D.	N.D.	N.D.
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/3/96	4/3/96
Analyzed Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/3/96	4/4/96
Instrument I.D.#:	HP-11	HP-11	HP-11	HP-11	GCHP-3A	Manual
Conc. Spiked:	20 µg/L	20 µg/L	20 µg/L	60 µg/L	300 µg/kg	100 µg/L
Result:	23	21	22	66	240	90
MS % Recovery:	115	96	110	108	80	90
Dup. Result:	23	21	22	65	240	90
MSD % Recov.:	115	96	110	106	80	90
RPD:	0.0	0.0	0.0	1.5	0.0	0.0
RPD Limit:	0-20	0-20	0-20	0-20	0-20	0-30

LCS #:	11LCS040496	11LCS040496	11LCS040496	11LCS040496	LCS040396	BLK040396
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/3/96	4/3/96
Analyzed Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/3/96	4/4/96
Instrument I.D.#:	HP-11	HP-11	HP-11	HP-11	GCHP-3A	Manual
Conc. Spiked:	20 µg/L	20 µg/L	20 µg/L	60 µg/L	300 µg/kg	100 µg/L
LCS Result:	24	21	22	66	240	96
LCS % Recov.:	120	105	110	110	80	96

MS/MSD LCS Control Limits	70-130	70-130	70-130	70-130	50-150	60-140
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Please Note:
 The LCS is a control sample of known, interferent-free matrix that is analyzed using the same reagents, preparation, and analytical methods employed for the samples. The matrix spike is an aliquot of sample fortified with known quantities of specific compounds and subjected to the entire analytical procedure. If the recovery of analytes from the matrix spike does not fall within specified control limits due to matrix interference, the LCS recovery is to be used to validate the batch.

** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
 Project Manager



Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Matrix: Solid
Walnut Creek, CA 94598
Attention: Jeff Hess QC Sample Group: 6040318-47

Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	Diesel	Diesel	Oil & Grease
QC Batch#:	SP040396	SP040496	SP040496
	8015EXA	8015EXA	5520MDA
Analy. Method:	EPA 8015	EPA 8015	EPA 5520
Prep. Method:	EPA 3550	EPA 3550	EPA 5520
Analyst:	J. Dinsay	J. Dinsay	D. Newcomb
MS/MSD #:	6040071	6040334	6040334
Sample Conc.:	N.D.	N.D.	N.D.
Prepared Date:	4/3/96	4/4/96	4/4/96
Analyzed Date:	4/3/96	4/4/96	4/4/96
Instrument I.D.#:	GCHP-3B	GCHP-3B	Manual
Conc. Spiked:	10 mg/kg	10 mg/kg	5000 mg/kg
Result:	8.5	8.7	5300
MS % Recovery:	85	87	106
Dup. Result:	9.4	11	5300
MSD % Recov.:	94	110	106
RPD:	10	2.3	0.0
RPD Limit:	0-20	0-20	0-30

LCS #:	LCS040396	LCS040496	BLK040496
Prepared Date:	4/3/96	4/4/96	4/4/96
Analyzed Date:	4/3/96	4/4/96	4/4/96
Instrument I.D.#:	GCHP-3B	GCHP-3B	Manual
Conc. Spiked:	10 mg/kg	10 mg/kg	5000 mg/kg
LCS Result:	9.6	8.4	48
LCS % Recov.:	96	84	96

MS/MSD LCS Control Limits	50-150	50-150	60-140
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SEQUOIA ANALYTICAL #1271

Alan B. Kemp
Alan B. Kemp
Project Manager

The LCS is a control sample of known, interferent-free matrix that is analyzed using the same reagents, preparation, and analytical methods employed for the samples. The matrix spike is an aliquot of sample fortified with known quantities of specific compounds and subjected to the entire analytical procedure. If the recovery of analytes from the matrix spike does not fall within specified control limits due to matrix interference, the LCS recovery is to be used to validate the batch.

** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference



Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Matrix: Solid
Walnut Creek, CA 94598
Attention: Jeff Hess QC Sample Group: 6040318-47

Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	1,1-Dichloro-ethene	Trichloro-ethene	Chloro-benzene
QC Batch#:	GC040496 801007A	GC040496 801007A	GC040496 801007A
Analy. Method:	EPA 8010	EPA 8010	EPA 8010
Prep. Method:	EPA 5030	EPA 5030	EPA 5030
Analyst:	I. Dalvand	I. Dalvand	I. Dalvand
MS/MSD #:	6032544	6032544	6032544
Sample Conc.:	N.D.	N.D.	N.D.
Prepared Date:	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/4/96	4/4/96	4/4/96
Instrument I.D.#:	HP-7	HP-7	HP-7
Conc. Spiked:	100 µg/L	100 µg/L	100 µg/L
Result:	83	66	77
MS % Recovery:	83	66	77
Dup. Result:	68	56	74
MSD % Recov.:	68	56	74
RPD:	20	16	4.0
RPD Limit:	0-30	0-30	0-30

LCS #:	LCS040496	LCS040496	LCS040496
Prepared Date:	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/4/96	4/4/96	4/4/96
Instrument I.D.#:	HP-7	HP-7	HP-7
Conc. Spiked:	100 µg/L	100 µg/L	100 µg/L
LCS Result:	8.1	8.9	8.6
LCS % Recov.:	81	89	86

MS/MSD			
LCS	28-167	35-146	38-150
Control Limits			

Please Note:

The LCS is a control sample of known, interferent-free matrix that is analyzed using the same reagents, preparation, and analytical methods employed for the samples. The matrix spike is an aliquot of sample fortified with known quantities of specific compounds and subjected to the entire analytical procedure. If the recovery of analytes from the matrix spike does not fall within specified control limits due to matrix interference, the LCS recovery is to be used to validate the batch.

** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



Sequoia Analytical

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404 N. Wiget Lane
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Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Matrix: Liquid
Walnut Creek, CA 94598
Attention: Jeff Hess

QC Sample Group: 6040337-338

Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	1,1-Dichloro-ethene	Trichloro-ethene	Chloro-benzene
QC Batch#:	GC040496	GC040496	GC040496
	801006A	801006A	801006A
Analy. Method:	EPA 8010	EPA 8010	EPA 8010
Prep. Method:	EPA 5030	EPA 5030	EPA 5030
Analyst:	I. Dalvand	I. Dalvand	I. Dalvand
MS/MSD #:	6040146	6040146	6040146
Sample Conc.:	N.D.	N.D.	N.D.
Prepared Date:	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/4/96	4/4/96	4/4/96
Instrument I.D.#:	HP-6	HP-6	HP-6
Conc. Spiked:	10 µg/L	10 µg/L	10 µg/L
Result:	9.0	9.4	8.3
MS % Recovery:	90	94	83
Dup. Result:	8.8	9.3	81
MSD % Recov.:	88	93	81
RPD:	2.2	1.1	2.4
RPD Limit:	0-30	0-30	0-30

LCS #:	LCS040496	LCS040496	LCS040496
Prepared Date:	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/4/96	4/4/96	4/4/96
Instrument I.D.#:	HP-6	HP-6	HP-6
Conc. Spiked:	10 µg/L	10 µg/L	10 µg/L
LCS Result:	9.5	9.4	8.6
LCS % Recov.:	95	94	86

MS/MSD LCS Control Limits	28-167	35-146	38-150
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Please Note:

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** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Matrix: Solid
Walnut Creek, CA 94598
Attention: Jeff Hess QC Sample Group: 6040318-47

Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	1,1-Dichloroethene	Trichloroethene	Benzene	Toluene	Chloro-benzene
QC Batch#:	SP040496 8240EXA	SP040496 8240EXA	SP040496 8240EXA	SP040496 8240EXA	SP040496 8240EXA
Analy. Method:	EPA 8240	EPA 8240	EPA 8240	EPA 8240	EPA 8240
Prep. Method:	EPA 8240	EPA 8240	EPA 8240	EPA 8240	EPA 8240
Analyst:	S. Le	S. Le	S. Le	S. Le	S. Le
MS/MSD #:	6040432	6040432	6040432	6040432	6040432
Sample Conc.:	N.D.	N.D.	N.D.	N.D.	N.D.
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/8/96	4/8/96	4/8/96	4/8/96	4/8/96
Instrument I.D.#:	GC/MS-2	GC/MS-2	GC/MS-2	GC/MS-2	GC/MS-2
Conc. Spiked:	2500 µg/kg	2500 µg/kg	2500 µg/kg	2500 µg/kg	2500 µg/kg
Result:	2220	2630	2540	2540	2270
MS % Recovery:	89	105	102	102	91
Dup. Result:	2390	3540	3460	2750	2430
MSD % Recov.:	96	142	138	110	97
RPD:	7.4	30	31	7.9	6.8
RPD Limit:	0-22	0-24	0-21	0-21	0-21

LCS #:	LCS040896	LCS040896	LCS040896	LCS040896	LCS040896
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/8/96	4/8/96	4/8/96	4/8/96	4/8/96
Instrument I.D.#:	GC/MS-2	GC/MS-2	GC/MS-2	GC/MS-2	GC/MS-2
Conc. Spiked:	50 µg/kg	50 µg/kg	50 µg/kg	50 µg/kg	50 µg/kg
LCS Result:	46	54	51	50	46
LCS % Recov.:	92	108	102	100	93

MS/MSD LCS Control Limits	DL-234	71-157	37-151	47-150	37-160
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Please Note:

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** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Matrix: Solid
Walnut Creek, CA 94598
Attention: Jeff Hess QC Sample Group: 6040318-47

Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	Phenol	2-Chlorophenol	1,4-Dichloro benzene	N-Nitroso-Di-N-propylamine	1,2,4-Trichloro benzene	4-Chloro-3 Methylphenol
QC Batch#:	SP04096	SP04096	SP04096	SP04096	SP04096	SP04096
	8270EXA	8270EXA	8270EXA	8270EXA	8270EXA	8270EXA
Analy. Method:	EPA 8270	EPA 8270	EPA 8270	EPA 8270	EPA 8270	EPA 8270
Prep. Method:	EPA 3550	EPA 3550	EPA 3550	EPA 3550	EPA 3550	EPA 3550
Analyst:	T. Granicher	T. Granicher	T. Granicher	T. Granicher	T. Granicher	T. Granicher
MS/MSD #:	6031886	6031886	6031886	6031886	6031886	6031886
Sample Conc.:	N.D.	N.D.	N.D.	N.D.	N.D.	N.D.
Prepared Date:	4/3/96	4/3/96	4/3/96	4/3/96	4/3/96	4/3/96
Analyzed Date:	4/10/96	4/10/96	4/10/96	4/10/96	4/10/96	4/10/96
Instrument I.D.#:	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1
Conc. Spiked:	5000 µg/kg	5000 µg/kg	2500 µg/kg	2500 µg/kg	2500 µg/kg	5000 µg/kg
Result:	4400	3600	1700	2400	2100	4750
MS % Recovery:	88	72	68	96	84	95
Dup. Result:	1300	1050	490	550	550	1050
MSD % Recov.:	26	21	20	22	22	21
RPD:	109	110	110	125	117	127
RPD Limit:	0-35	0-50	0-27	0-38	0-23	0-33

LCS #:	LCS040496	LCS040496	LCS040496	LCS040496	LCS040496	LCS040496
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/8/96	4/8/96	4/8/96	4/8/96	4/8/96	4/8/96
Instrument I.D.#:	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1
Conc. Spiked:	5000 µg/kg	5000 µg/kg	2500 µg/kg	2500 µg/kg	2500 µg/kg	5000 µg/kg
LCS Result:	4150	3750	1850	2450	2200	4350
LCS % Recov.:	83	75	74	98	88	87

MS/MSD LCS Control Limits	15-115	30-120	30-120	30-120	40-120	40-120
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Please Note
The LCS is a control sample of known, interferent-free matrix that is analyzed using the same reagents, preparation, and analytical methods employed for the samples. The matrix spike is an aliquot of sample fortified with known quantities of specific compounds and subjected to the entire analytical procedure. If the recovery of analytes from the matrix spike does not fall within specified control limits due to matrix interference, the LCS recovery is to be used to validate the batch.

** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
 2855 Mitchell Drive, Suite 118 Matrix: Solid
 Walnut Creek, CA 94598
 Attention: Jeff Hess QC Sample Group: 6040318-47 Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	Acenaphthene	4-Nitrophenol	2,4-Dinitro-toluene	Pentachloro-phenol	Pyrene
QC Batch#:	SP04096	SP04096	SP04096	SP04096	SP04096
	8270EXA	8270EXA	8270EXA	8270EXA	8270EXA
Analy. Method:	EPA 8270	EPA 8270	EPA 8270	EPA 8270	EPA 8270
Prep. Method:	EPA 3550	EPA 3550	EPA 3550	EPA 3550	EPA 3550
Analyst:	T. Granicher	T. Granicher	T. Granicher	T. Granicher	T. Granicher
MS/MSD #:	6031886	6031886	6031886	6031886	6031886
Sample Conc.:	N.D.	N.D.	N.D.	N.D.	N.D.
Prepared Date:	4/3/96	4/3/96	4/3/96	4/3/96	4/3/96
Analyzed Date:	4/10/96	4/10/96	4/10/96	4/10/96	4/10/96
Instrument I.D.#:	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1
Conc. Spiked:	2500 µg/kg	5000 µg/kg	2500 µg/kg	5000 µg/kg	2500 µg/kg
Result:	2500	5600	2750	7150	4250
MS % Recovery:	100	112	110	143	170
Dup. Result:	2500	5600	2750	7150	4250
MSD % Recov.:	100	112	110	143	170
RPD:	90	150	150	150	140
RPD Limit:	0-19	0-50	0-47	0-47	0-36

LCS #:	LCS040496	LCS040496	LCS040496	LCS040496	LCS040496
Prepared Date:	4/3/96	4/3/96	4/3/96	4/3/96	4/3/96
Analyzed Date:	4/8/96	4/8/96	4/8/96	4/8/96	4/8/96
Instrument I.D.#:	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1
Conc. Spiked:	2500 µg/kg	5000 µg/kg	2500 µg/kg	5000 µg/kg	2500 µg/kg
LCS Result:	2200	4400	2150	4950	2600
LCS % Recov.:	88	88	86	99	104

MS/MSD LCS Control Limits	47-145	DL-132	39-139	14-176	52-115
	50-140	30-120	30-110	30-110	50-115

Please Note:
 The LCS is a control sample of known, interferent-free matrix that is analyzed using the same reagents, preparation, and analytical methods employed for the samples. The matrix spike is an aliquot of sample fortified with known quantities of specific compounds and subjected to the entire analytical procedure. If the recovery of analytes from the matrix spike does not fall within specified control limits due to matrix interference, the LCS recovery is to be used to validate the batch.
 ** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
 Project Manager



Innovative Technical Solutions, Inc Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Matrix: Solid
Walnut Creek, CA 94598
Attention: Jeff Hess QC Sample Group: 6040318-47

Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	Acenaphthene	4-Nitrophenol	2,4-Dinitro-toluene	Pentachloro-phenol	Pyrene
QC Batch#:	SP04096 8270EXA	SP04096 8270EXA	SP04096 8270EXA	SP04096 8270EXA	SP04096 8270EXA
Analy. Method:	EPA 8270	EPA 8270	EPA 8270	EPA 8270	EPA 8270
Prep. Method:	EPA 3550	EPA 3550	EPA 3550	EPA 3550	EPA 3550
Analyst:	T. Granicher	T. Granicher	T. Granicher	T. Granicher	T. Granicher
MS/MSD #:	6031886	6031886	6031886	6031886	6031886
Sample Conc.:	N.D.	N.D.	N.D.	N.D.	N.D.
Prepared Date:	4/3/96	4/3/96	4/3/96	4/3/96	4/3/96
Analyzed Date:	4/10/96	4/10/96	4/10/96	4/10/96	4/10/96
Instrument I.D.#:	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1
Conc. Spiked:	2500 µg/kg	5000 µg/kg	2500 µg/kg	5000 µg/kg	2500 µg/kg
Result:	2500	5600	2750	7150	4250
MS % Recovery:	100	112	110	143	170
Dup. Result:	2500	5600	2750	7150	4250
MSD % Recov.:	100	112	110	143	170
RPD:	90	150	150	150	140
RPD Limit:	0-19	0-50	0-47	0-47	0-36

LCS #:	LCS040496	LCS040496	LCS040496	LCS040496	LCS040496
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/8/96	4/8/96	4/8/96	4/8/96	4/8/96
Instrument I.D.#:	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1
Conc. Spiked:	2500 µg/kg	5000 µg/kg	2500 µg/kg	5000 µg/kg	2500 µg/kg
LCS Result:	2200	4400	2150	4950	2600
LCS % Recov.:	88	88	86	99	104

MS/MSD LCS Control Limits	50-140	20-120	20-120	30-110	50-115
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Please Note:
The LCS is a control sample of known, interferent-free matrix that is analyzed using the same reagents, preparation, and analytical methods employed for the samples. The matrix spike is an aliquot of sample fortified with known quantities of specific compounds and subjected to the entire analytical procedure. If the recovery of analytes from the matrix spike does not fall within specified control limits due to matrix interference, the LCS recovery is to be used to validate the batch.

** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
 2855 Mitchell Drive, Suite 118 Matrix: Liquid
 Walnut Creek, CA 94598
 Attention: Jeff Hess QC Sample Group: 6040337-338 Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	Phenol	2-Chlorophenol	1,4-Dichloro benzene	N-Nitroso-Di-N-propylamine	1,2,4-Trichloro benzene	4-Chloro-3 Methylphenol
QC Batch#:	SP040496	SP040496	SP040496	SP040496	SP040496	SP040496
	8270EXA	8270EXA	8270EXA	8270EXA	8270EXA	8270EXA
Analy. Method:	EPA 8270	EPA 8270	EPA 8270	EPA 8270	EPA 8270	EPA 8270
Prep. Method:	EPA 3510	EPA 3510	EPA 3510	EPA 3510	EPA 3510	EPA 3510
Analyst:	T. Granicher	T. Granicher	T. Granicher	T. Granicher	T. Granicher	T. Granicher
MS/MSD #:	MS032996	MS032996	MS032996	MS032996	MS032996	MS032996
Sample Conc.:	N.D.	N.D.	N.D.	N.D.	N.D.	N.D.
Prepared Date:	3/29/96	3/29/96	3/29/96	3/29/96	3/29/96	3/29/96
Analyzed Date:	4/10/96	4/10/96	4/10/96	4/10/96	4/10/96	4/10/96
Instrument I.D.#:	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1
Conc. Spiked:	200 µg/L	200 µg/L	100 µg/L	100 µg/L	100 µg/L	200 µg/L
Result:	80	154	68	86	70	146
MS % Recovery:	40	77	68	86	70	73
Dup. Result:	88	128	60	74	68	146
MSD % Recov.:	44	64	60	74	68	73
RPD:	9.5	18	13	15	2.9	0.0
RPD Limit:	0-42	0-40	0-28	0-38	0-28	0-42

LCS #:	LCS040496	LCS040496	LCS040496	LCS040496	LCS040496	LCS040496
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/8/96	4/8/96	4/8/96	4/8/96	4/8/96	4/8/96
Instrument I.D.#:	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1
Conc. Spiked:	200 µg/L	200 µg/L	100 µg/L	100 µg/L	100 µg/L	200 µg/L
LCS Result:	104	158	76	88	86	182
LCS % Recov.:	52	79	76	88	86	91

MS/MSD LCS Control Limits	35-120	30-120	30-120	30-120	40-120	30-120
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Please Note:
 The LCS is a control sample of known, interferent-free matrix that is analyzed using the same reagents, preparation, and analytical methods employed for the samples. The matrix spike is an aliquot of sample fortified with known quantities of specific compounds and subjected to the entire analytical procedure. If the recovery of analytes from the matrix spike does not fall within specified control limits due to matrix interference, the LCS recovery is to be used to validate the batch.
 ** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
 Project Manager



Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Matrix: Liquid
Walnut Creek, CA 94598
Attention: Jeff Hess QC Sample Group: 6040337-338

Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	Acenaphthene	4-Nitrophenol	2,4-Dinitro-toluene	Pentachloro-phenol	Pyrene
QC Batch#:	SP040496 8270EXA	SP040496 8270EXA	SP040496 8270EXA	SP040496 8270EXA	SP040496 8270EXA
Analy. Method:	EPA 8270	EPA 8270	EPA 8270	EPA 8270	EPA 8270
Prep. Method:	EPA 3510	EPA 3510	EPA 3510	EPA 3510	EPA 3510
Analyst:	T. Granicher	T. Granicher	T. Granicher	T. Granicher	T. Granicher
MS/MSD #:	MS032996	MS032996	MS032996	MS032996	MS032996
Sample Conc.:	N.D.	N.D.	N.D.	N.D.	N.D.
Prepared Date:	3/29/96	3/29/96	3/29/96	3/29/96	3/29/96
Analyzed Date:	4/10/96	4/10/96	4/10/96	4/10/96	4/10/96
Instrument I.D.#:	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1
Conc. Spiked:	100 µg/L	200 µg/L	100 µg/L	200 µg/L	100 µg/L
Result:	36	58	80	196	88
MS % Recovery:	36	29	80	98	88
Dup. Result:	74	74	76	188	100
MSD % Recov.:	74	37	76	94	100
RPD:	69	24	5.1	4.2	13
RPD Limit:	0-31	0-50	0-38	0-50	0-31

LCS #:	LCS040496	LCS040496	LCS040496	LCS040496	LCS040496
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/8/96	4/8/96	4/8/96	4/8/96	4/8/96
Instrument I.D.#:	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1	GC/MS-1
Conc. Spiked:	100 µg/L	200 µg/L	100 µg/L	200 µg/L	100 µg/L
LCS Result:	92	88	84	186	110
LCS % Recov.:	92	44	84	93	110

MS/MSD LCS Control Limits	50-140	20-120	40-130	30-110	55-115
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Please Note:

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** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Project Manager



Sequoia Analytical

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404 N. Wiget Lane
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Redwood City, CA 94063
Walnut Creek, CA 94598
Sacramento, CA 95834

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(916) 921-9600

FAX (415) 364-9233
FAX (510) 988-9673
FAX (916) 921-0100

Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Matrix: Solid
Walnut Creek, CA 94598
Attention: Jeff Hess QC Sample Group: 6040318-47

Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	Chromium	Nickel	Zinc	Lead	Cadmium	Lead	Lead
QC Batch#:	ME04095	ME04095	ME04095	ME04095	ME04095	ME040496	ME040496
	6010MDA	6010MDA	6010MDA	6010MDA	6010MDA	6010MDA	6010MDA
Analy. Method:	EPA 6010	EPA 6010	EPA 6010	EPA 6010	EPA 6010	EPA7420	EPA7420
Prep. Method:	EPA 3050	EPA 3050	EPA 3050	EPA 3050	EPA 3050	EPA3050	EPA3050
Analyst:	J. Kelly	J. Kelly	J. Kelly	J. Kelly	J. Kelly	T. Le	T. Le
MS/MSD #:	6040318	6040318	6040318	6040318	6040318	6040318	6040342
Sample Conc.:	23	33	31	4.9	0.0	3.5	N.D.
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96
Instrument I.D.#:	MV-3	MV-3	MV-3	MV-3	MV-3	MV-1	MV-1
Conc. Spiked:	50 mg/kg	50 mg/kg	50 mg/kg	50 mg/kg	50 mg/kg	50 mg/kg	50 mg/kg
Result:	80	83	81	54	47	48	46
MS % Recovery:	114	100	100	98	94	90	92
Dup. Result:	78	81	82	55	50	48	46
MSD % Recov.:	110	96	102	100	100	90	92
RPD:	2.5	2.4	1.2	1.8	6.2	0.0	0.0
RPD Limit:	0-20	0-20	0-20	0-20	0-20	0-20	0-20

LCS #:	BLK040496	BLK040496	BLK040496	BLK040496	BLK040496	BLK040496	BLK040496
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96
Instrument I.D.#:	MV-3	MV-3	MV-3	MV-3	MV-3	MV-1	MV-1
Conc. Spiked:	50 mg/kg	50 mg/kg	50 mg/kg	50 mg/kg	50 mg/kg	50 mg/kg	50 mg/kg
LCS Result:	57	56	52	53	53	47	45
LCS % Recov.:	114	112	104	106	106	94	90

MS/MSD	75-125	75-125	75-125	75-125	75-125	75-125	75-125
LCS							
Control Limits							

Please Note:

The LCS is a control sample of known, interferent-free matrix that is analyzed using the same reagents, preparation, and analytical methods employed for the samples. The matrix spike is an aliquot of sample fortified with known quantities of specific compounds and subjected to the entire analytical procedure. If the recovery of analytes from the matrix spike does not fall within specified control limits due to matrix interference, the LCS recovery is to be used to validate the batch.

** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Alan B. Kemp
Project Manager



Sequoia Analytical

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Sacramento, CA 95834

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(510) 988-9600
(916) 921-9600

FAX (415) 364-9233
FAX (510) 988-9673
FAX (916) 921-0100

Innovative Technical Solutions, Inc. Client Project ID: Tosco, 6400 Dublin Blvd., Dublin
2855 Mitchell Drive, Suite 118 Matrix: Solid
Walnut Creek, CA 94598
Attention: Jeff Hess QC Sample Group: 6040318-47

Reported: Apr 11, 1996

QUALITY CONTROL DATA REPORT

Analyte:	Mercury	Silver
QC Batch#:	ME04095	ME04095
	7471MDA	6010MDA
Analy. Method:	EPA 7471	EPA 7760
Prep. Method:	EPA 7471	EPA 3050
Analyst:	T. Le	T. Le
MS/MSD #:	6040342	6040342
Sample Conc.:	0.049	0.65
Prepared Date:	4/4/96	4/4/96
Analyzed Date:	4/4/96	4/4/96
Instrument I.D.#:	MV-1	MV-1
Conc. Spiked:	0.13 mg/kg	50 mg/kg
Result:	0.19	52
MS % Recovery:	140	102
Dup. Result:	0.18	53
MSD % Recov.:	130	104
RPD:	5.4	1.9
RPD Limit:	0-20	0-20

LCS #:	BLK040496	BLK040496
Prepared Date:	4/4/96	4/4/96
Analyzed Date:	4/4/96	4/4/96
Instrument I.D.#:	MV-1	MV-1
Conc. Spiked:	0.13 mg/kg	50 mg/kg
LCS Result:	0.13	51
LCS % Recov.:	100	102

MS/MSD LCS Control Limits	85-115	75-125
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** MS=Matrix Spike, MSD=MS Duplicate, RPD=Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Project Manager



Innovative Technical Solutions, Inc. Client Project ID: **Tosco, 6400 Dublin Blvd., Dublin**
2855 Mitchell Drive, Suite 118 Matrix: **Liquid**
Walnut Creek, CA 94598
Attention: Jeff Hess QC Sample Group: **6040337-338**

Reported: **Apr 11, 1996**

QUALITY CONTROL DATA REPORT

Analyte:	Chromium	Nickel	Zinc	Lead	Cadmium
QC Batch#:	ME040495	ME040495	ME040495	ME040495	ME040495
	2007MDA	2007MDA	2007MDA	2007MDA	2007MDA
Analy. Method:	EPA 200.7	EPA 200.7	EPA 200.7	EPA 200.7	EPA 200.7
Prep. Method:	EPA 200.7	EPA 200.7	EPA 200.7	EPA 200.7	EPA 200.7
Analyst:	J. Kelly	J. Kelly	J. Kelly	J. Kelly	J. Kelly
MS/MSD #:	6040337	6040337	6040337	6040337	6040337
Sample Conc.:	0.015	0.046	0.071	0.0	0.0
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96
Instrument I.D.#:	MV-3	MV-3	MV-3	MV-3	MV-3
Conc. Spiked:	1.0 mg/L	1.0 mg/L	1.0 mg/L	1.0 mg/L	1.0 mg/L
Result:	0.99	1.0	0.95	0.86	0.91
MS % Recovery:	98	95	88	86	91
Dup. Result:	0.99	0.98	0.96	0.91	0.96
MSD % Recov.:	98	93	89	91	96
RPD:	0.0	2.0	1.0	5.6	5.3
RPD Limit:	0-20	0-20	0-20	0-20	0-20

LCS #:	BLK040496A	BLK040496A	BLK040496A	BLK040496A	BLK040496A
Prepared Date:	4/4/96	4/4/96	4/4/96	4/4/96	4/4/96
Analyzed Date:	4/5/96	4/5/96	4/5/96	4/5/96	4/5/96
Instrument I.D.#:	MV-3	MV-3	MV-3	MV-3	MV-3
Conc. Spiked:	1.0 mg/L	1.0 mg/L	1.0 mg/L	1.0 mg/L	1.0 mg/L
LCS Result:	1.1	1.1	1.0	1.0	1.0
LCS % Recov.:	110	110	100	100	100

MS/MSD LCS Control Limits	75-125	75-125	75-125	75-125	75-125
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** MS=Matrix Spike, MSD=MS Duplicate, RPD=Relative % Difference

SEQUOIA ANALYTICAL, #1271

Alan B. Kemp
Project Manager



2855 Mitchell Drive, Suite 118
Walnut Creek, California 94598
(510) 256-8898 (Tel), (510) 256-8998 (Fax)

PROJECT NAME: Tosco-Dublin
PROJECT NUMBER: 96-100
SITE LOCATION: 6400 Dublin Blvd, Dublin

CHAIN OF CUSTODY

DATE: 4/3/96
PAGE: 1 of 5

SAMPLE ID.	SAMPLE DEPTH	DATE	TIME	NUMBER OF CONTAINERS	TYPE OF CONTAINERS	SAMPLE MATRIX	ANALYSIS											SPECIAL INSTRUCTIONS/ NOTES/COMMENTS	TOTAL NUMBER OF ANALYSES
							TPH as Gas/BTEX - 8015/8020	TPH as Diesel - 8015	TEPH - 8015	TRPH - 418.1	Oil and Grease - 5520 D&F	LUFT Metals (Cd, Cr, Ni, Pb, Zn)	CAM 17 Metals	VOCs - 8240	SVOCS - 8270	Total Pb			
SUSPENDED SOLIDS - 11 SUSPENDED SOLIDS - 12		4/3/96	1308	1	SS	SS	✓	✓										6040318	
			1311	1	SS	SS	✓	✓										6040319	
			1315	1	SS	SS	✓	✓										6040320	
			1319	1	SS	SS	✓	✓										6040321	
			1327	1	SS	SS	✓	✓										6040322	
			1330	1	SS	SS	✓	✓										6040323	
			1343	1	SS	SS	✓	✓										6040324	
			1345	1	SS	SS	✓	✓										6040325	
			1350	1	SS	SS	✓	✓										6040326	
			1353	1	SS	SS	✓	✓										6040327	
			1356	1	SS	SS	✓	✓										6040328	
			1358	1	SS	SS	✓	✓										6040329	
TOTAL NUMBER OF CONTAINERS				TOTAL TESTS															

3 @ 31

SAMPLED BY: Jeff Hess SPECIAL INSTRUCTIONS/COMMENTS: 24 hr TAP
SIGNATURE: _____

RELINQUISHED BY: Jeff Hess Jeff Hess RELINQUISHED BY: _____ RELINQUISHED BY: _____
Printed Name Signature Printed Name Signature Printed Name Signature
Company Date and Time Company Date and Time Company Date and Time
ITSI 4/3/96 7:10pm
RECEIVED BY: _____ RECEIVED BY: _____ RECEIVED BY: Kevin Molander Kevin Molander
Printed Name Signature Printed Name Signature Printed Name Signature
Company Date and Time Company Date and Time Company Date and Time
SEGNOIA 4/5/96 19:10

SEND RESULTS TO: _____

ITSI 2855 Mitchell Drive, Suite 118
Walnut Creek, California 94598
(510) 256-8898 (Tel), (510) 256-8998 (Fax)

PROJECT NAME: Tosco-Dublin
PROJECT NUMBER: 96-100
SITE LOCATION: 6400 Dublin Blvd, Dublin

CHAIN OF CUSTODY

DATE: 4/3/96
PAGE: 2 of 5

SAMPLE I.D.	SAMPLE DEPTH	DATE	TIME	NUMBER OF CONTAINERS	TYPE OF CONTAINERS	SAMPLE MATRIX	ANALYSIS											TOTAL NUMBER OF ANALYSES
							TPH as Gas/TEX - 8015/8020	TPH as Diesel - 8015	TEPH - 8015	TRPH - 418.1	Oil and Grease - 5520 D&F	LUFT Metals (Cd, Cr, Ni, Pb, Zn)	CAM 17 Metals	VOCs - 8240	SVOCs - 8270	Total Pb	TPH hydraulic oil	
S-13		4/3/96	1401	1	SS	S	✓	✓										6040330
S-14			1406	1	SS	S	✓	✓		✓	✓							6040331
S-15			1410	1	SS	S	✓	✓		✓	✓							6040332
S-16			1505	1	SS	S	✓	✓		✓	✓							6040333
S-17	4'		1625	1	SS	S	✓	✓		✓	✓							6040334
S-18	8'		1656	1	SS	S	✓			✓	✓							6040335
S-19	8'		1659	1	SS	S	✓											6040336
W-1			1430	5	3 VOCs 2 VOFs 2 IL	W	✓	✓		✓	✓							6040337 A-E
W-2			1450	8	3 VOCs 2 VOFs 2 IL	W	✓	✓		✓	✓							6040338 A-H

TOTAL NUMBER OF CONTAINERS: _____ TOTAL TESTS: _____

SAMPLED BY: Jeff Hess SPECIAL INSTRUCTIONS/COMMENTS: 24-hr TAT
SIGNATURE: _____

RELINQUISHED BY: <u>Jeff Hess</u> Printed Name: _____ Signature: _____ Company: <u>ITSI</u> Date and Time: <u>4/3/96 7:10pm</u>	RELINQUISHED BY: _____ Printed Name: _____ Signature: _____ Company: _____ Date and Time: _____	RELINQUISHED BY: _____ Printed Name: _____ Signature: _____ Company: _____ Date and Time: _____
RECEIVED BY: _____ Printed Name: _____ Signature: _____ Company: _____ Date and Time: _____	RECEIVED BY: _____ Printed Name: _____ Signature: _____ Company: _____ Date and Time: _____	RECEIVED BY: <u>Kevin Mulander</u> Printed Name: <u>Kevin Mulander</u> Signature: <u>Kevin Mulander</u> Company: <u>SEGUDIA</u> Date and Time: <u>4/3/96 19:10</u>

SEND RESULTS TO: _____



PROJECT NAME: Tosco-Dublin
PROJECT NUMBER: 96-100
SITE LOCATION: 6400 Dublin Blvd, Dublin

DATE: 4/3/96
PAGE: 3 of 5

CHAIN OF CUSTODY

SAMPLE ID	SAMPLE DEPTH	DATE	TIME	NUMBER OF CONTAINERS	TYPE OF CONTAINERS	SAMPLE MATRIX	ANALYSIS										SPECIAL INSTRUCTIONS/ NOTES/ COMMENTS	TOTAL NUMBER OF ANALYSES
							TPH as Gas/BTEX - 8015/8020	TPH as Diesel - 8015	TEPH - 8015	TRPH - 418.1	Oil and Grease - 5520 D&F	LUFT Metals (Cd, Cr, Ni, Pb, Zn)	CAM 17 Metals	VOCs - 8240	SVOCs - 8270			
T1A	8'	4/3/96	1535	1	SS	S	✓	✓				✓				6040339A-D	Composite to 1 sample	
T1B	4'		1537	1	SS	S	✓	✓				✓						
T1C	4'		1545	1	SS	S	✓	✓				✓						
T1D	8'		1548	1	SS	S	✓	✓				✓						
T2A	4'			1557	1	SS	S	✓	✓				✓			6040340A-D	Composite to 1 sample	
T2B	8'			1600	1	SS	S	✓	✓				✓					
T2C	4'			1609	1	SS	S	✓	✓				✓					
T2D	8'			1612	1	SS	S	✓	✓				✓					
T3A	4'			1621	1	SS	S	✓	✓				✓			6040341A-D	Composite to 1 sample	
T3B	8'			1625	1	SS	S	✓	✓				✓					
T3C	4'			1632	1	SS	S	✓	✓				✓					
T3D	8'			1635	1	SS	S	✓	✓				✓					
TOTAL NUMBER OF CONTAINERS				12	TOTAL TESTS													

SAMPLED BY: [Signature]
SIGNATURE: _____
RELINQUISHED BY: [Signature]
Printed Name: Jeff Hess
Signature: _____
Company: ITSI
Date and Time: 4/3/96 7:10 pm

SPECIAL INSTRUCTIONS/COMMENTS: 24-hr TAT
RELINQUISHED BY: _____
Printed Name: _____
Signature: _____
Company: _____
Date and Time: _____

RECEIVED BY: _____
Printed Name: _____
Signature: _____
Company: _____
Date and Time: _____

RECEIVED BY: _____
Printed Name: _____
Signature: _____
Company: _____
Date and Time: _____

RECEIVED BY: [Signature]
Printed Name: K. Molander
Signature: _____
Company: Sep.
Date and Time: 4/3/96 19:10

SEND RESULTS TO: _____



2855 Mitchell Drive, Suite 118
Walnut Creek, California 94598
(510) 256-8898 (Tel), (510) 256-8998 (Fax)

9604094

PROJECT NAME: TOSCO - Dublin
PROJECT NUMBER: 96-100
SITE LOCATION: 6400 Dublin Blvd, Dublin

CHAIN OF CUSTODY

DATE: 4/3/96
PAGE: 4 of 5

SAMPLE I.D.	SAMPLE DEPTH	DATE	TIME	NUMBER OF CONTAINERS	TYPE OF CONTAINERS	SAMPLE MATRIX	ANALYSIS											SPECIAL INSTRUCTIONS/ NOTES/ COMMENTS	TOTAL NUMBER OF ANALYSES		
							TPH as Gas/BTEX - 8015/8020	TPH as Diesel - 8015	TEPH - 8015	TRPH - 418.1	Oil and Grease - 5520 D&F	LUFT Metals (Cd, Cr, Ni, Pb, Zn)	CAM 17 Metals	VOCs - 8240	SVOCs - 8270	Total Pb					
SP-1 A		4/3/96	1733	1	Aoz	S	✓		✓						✓	✓	✓	6040342	Composite to one sample		
B							✓		✓						✓	✓	✓	A-D			
C							✓		✓						✓	✓	✓				
D							✓		✓						✓	✓	✓				
SP-2 A			1740				✓								✓	✓	✓	6040343	Composite to one sample		
B							✓								✓	✓	✓	A-D			
C							✓								✓	✓	✓				
D							✓								✓	✓	✓				
E			1745				✓								✓	✓	✓	6040344	Composite to one sample		
F							✓								✓	✓	✓	A-D			
G							✓								✓	✓	✓				
H							✓								✓	✓	✓				
TOTAL NUMBER OF CONTAINERS				12	TOTAL TESTS																

SAMPLED BY: [Signature] SPECIAL INSTRUCTIONS/COMMENTS: 24-hr TAT

RELINQUISHED BY: Jeff Hess [Signature] RELINQUISHED BY: _____ RELINQUISHED BY: _____
 Printed Name Signature Printed Name Signature Printed Name Signature
 Company Date and Time Company Date and Time Company Date and Time

RECEIVED BY: _____ RECEIVED BY: _____ RECEIVED BY: K. McArthur [Signature]
 Printed Name Signature Printed Name Signature Printed Name Signature
 Company Date and Time Company Date and Time Company Date and Time

SEND RESULTS TO: _____



9604094

CHAIN OF CUSTODY

PROJECT NAME: Tosco - Dublin

DATE: 4/3/96

PROJECT NUMBER: 96-100

PAGE: 5 of 5

SITE LOCATION: 6400 Dublin Blvd, Dublin

SAMPLE ID	SAMPLE DEPTH	DATE	TIME	NUMBER OF CONTAINERS	TYPE OF CONTAINERS	SAMPLE MATRIX	ANALYSIS										TOTAL NUMBER OF ANALYSES			
							TPH as Gas/BTEX - 8015/8020	TPH as Diesel - 8015	TEPH - 8015	TRPH - 418.1	Oil and Grease - 5520 D&F	LUFT Metals (Cd, Cr, Ni, Pb, Zn)	CAM 17 Metals	VOCs - 8240	SVOCs - 8270	Total Pb		SPECIAL INSTRUCTIONS/ NOTES/ COMMENTS		
SP-2 <u>1URR0023TKLI</u>		<u>4/3/96</u>	<u>1750</u>	<u>1</u>	<u>4oz</u>	<u>S</u>	<input checked="" type="checkbox"/>											6040345 } Composite to one sample (A-D) 6040346 } Composite to one sample (A-D) 6040347 } Composite to one sample (A-D)		
			<u>1755</u>				<input checked="" type="checkbox"/>													
				<u>1800</u>				<input checked="" type="checkbox"/>												
								<input checked="" type="checkbox"/>												
				<u>17</u>	<u>TOTAL TESTS</u>															
SAMPLED BY: <u>[Signature]</u> SIGNATURE:							SPECIAL INSTRUCTIONS/COMMENTS: <u>24-hr TAA</u>													
RELINQUISHED BY: <u>Jeff Hess</u> Printed Name Signature <u>ITSI</u> <u>4/3/96 7:10pm</u> Company Date and Time				RELINQUISHED BY: _____ Printed Name Signature				RELINQUISHED BY: _____ Printed Name Signature												
RECEIVED BY: _____ Printed Name Signature _____ Company Date and Time				RECEIVED BY: _____ Printed Name Signature _____ Company Date and Time				RECEIVED BY: <u>K. Molander</u> Printed Name Signature <u>Seq</u> <u>4/3/96 19:10</u> Company Date and Time												
SEND RESULTS TO: _____																				