

## Material Disposal, Del Monte Plant #35, Emeryville, California

TO: Steve Ronzone/Del Monte Foods

COPIES: Thomas Bender/The Bender Partnership  
Bern Baumgartner/CH2M HILL

FROM: Madeline Wall/CH2M HILL

DATE: May 5, 1997

At the conclusion of demolition activities at Plant #35 in Emeryville, two materials required off-site disposal. These two materials were soil containing petroleum hydrocarbons (diesel and motor oil) and concrete from the transformer room. These materials had not been removed from the property at the time the report, *Documentation of Completion of Final Remedial Activities at Del Monte Plant 35*, was issued (April 15, 1997). This memo serves as an addendum to that report.

### SOIL

Approximately 250 cubic yards (332 tons) of soil containing diesel and motor oil above the property-specific action levels (200 mg/kg for diesel and 500 mg/kg for motor oil) were disposed of at BFI's Vasco Road Landfill in Livermore, California. The soil resulted from excavations at twelve separate locations on the Del Monte Property. Please note that in the above referenced report, the total soil volume was estimated to be only 100 cubic yards. This was based on the sizes of the excavations. However, the actual quantity disposed was much larger because the excavated soil was loose (instead of compacted as it was in place) and the excavator loading the stockpiles into the trucks slightly overexcavated each area to be sure that the complete stockpile was removed. In addition, two 55-gallon drums of soil cuttings from an earlier Woodward-Clyde investigation were included with this soil disposal. Fifteen truckloads were transported on April 24, 1997 and two truck loads were transported on April 25, 1997. The waste hauling trailers were from Mid Coast in Livermore. The drivers were from Mid Coast, Da Rosa, and Gondry. The soil was transported under BFI's non-hazardous special waste manifests. Copies of the manifests are attached.

### CONCRETE

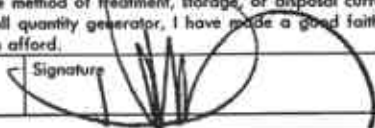
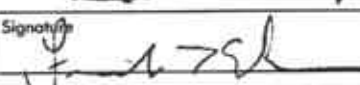
Approximately 72 tons of concrete from the transformer room were disposed of at Chemical Waste Management, Inc.'s Kettleman Hills Facility in Kettleman City, California on April 28, 1997. This waste was disposed of as a Toxic Substances Control Act (TSCA) waste due to the concentration of the PCBs (maximum of 82 ppm) in the transformer oil as measured by PG & E. PG & E also collected wipe samples of the concrete surface; no PCBs were detected in the wipe samples.

Five trucks (three from Mid Coast, one from Dillard, and one from Denbeste) transported the concrete under proper hazardous waste manifests in accordance with TSCA regulations. Copies of the manifests are attached. Since the concrete itself was under 50 ppm (the TSCA limit), the concrete was shipped as "waste environmentally hazardous substances, solid, N.O.S., UN 3077."

Because the concrete was TSCA-regulated, the regulations stipulated the following:

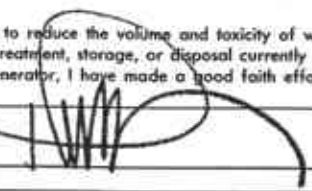

- The concrete was required to be shipped in kilograms. Since there were no scales at the site, the trucks were weighed at J & O's Commercial Tire Center (1107 5<sup>th</sup> Street, Oakland) and the difference between the gross and tare weights converted to kilograms (908 kg/ton). The five trucks totaled approximately 65,800 kilograms.
- Because the total weight of concrete was more than 5 tons, a hazardous waste fee account number (for disposal tax purposes) was required from the (state) Board of Equalization. A temporary number (HAHQ36056929) was obtained. This number was not obtained until after the trucks left the property since the Board of Equalization's computer system was down and they were unable to issue this number until 12:30. Kettleman Hills was notified of the missing number (Vicki in scheduling said that this would not be a problem) and was notified again when the number was issued.
- The manifest was required to indicate the date the transformer was removed from service. According to an October 31, 1996 letter from PG & E, the transformer was taken out of service in October 1996.
- Because the concrete was hauled by an independent third party, a confirmation telephone call to the disposal site to verify that the trucks had arrived was required within 24 hours. This call was made by CH2M HILL at 3:00 on April 28, 1997 (to Steve in receiving) and the conversation is documented in a telephone conversation record.

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>CA10010111471928</b>	Manifest Document No.	2. Page # of #	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address <b>DEL MONTE FOODS (Plant #35) P.O. BOX 193575 SAN FRANCISCO, CA 94111</b>					
4. Generator's Phone <b>(415) 247-3520</b>					
5. Transporter 1 Company Name <b>Mid Coast</b>			6. US EPA ID Number <b>CA1101810032832</b>		
7. Transporter 2 Company Name					
9. Designated Facility Name and Site Address <b>Chemical Waste Management, Inc. 35251 Old Skyline Road Kettleman City, CA 93239</b>					
10. US EPA ID Number <b>CA1000064161117</b>					
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol
a. <b>Waste environmentally hazardous substances, solid, N.O.S.; 9; UN3077; PGIII</b>		No.	Type		
				<b>131600</b>	<b>K</b>
b.					
c.					
d.					
15. Special Handling Instructions and Additional Information <b>Authorization # 366936 Date out of service: 10/96 Waste # 083503</b>					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the 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 federal, state and international laws.  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 <b>THOMAS BRICKER</b>		Signature 		Month	Day Year
				<b>01</b>	<b>12 18 97</b>
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature 		Month	Day Year
Printed/Typed Name <b>Frank Ekler</b>				<b>01</b>	<b>12 18 97</b>
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month	Day Year
Printed/Typed Name					
19. Discrepancy Indication Space					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name		Signature		Month	Day Year

DO NOT WRITE BELOW THIS LINE.

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802. WITHIN CALIFORNIA, CALL 1-800-852-7550

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>CA C0011147928</b>		Manifest Document No. <b>12</b>		2. Page 1 <b>of 1</b>		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <b>DEL MONTE FOODS P.O. BOX 193575 SAN FRANCISCO, CA 94111</b>		(Plant #35)		3323418 HAHQ-600-39135					
4. Generator's Phone <b>415-247-3520</b>									
5. Transporter 1 Company Name <b>Mid Coast</b>		6. US EPA ID Number <b>CA TPD101032832</b>							
7. Transporter 2 Company Name		8. US EPA ID Number							
9. Designated Facility Name and Site Address <b>Chemical Waste Management, Inc. 35251 Old Skyline Road Kettleman City, CA 93239</b>		10. US EPA ID Number <b>CA TPD10106461117</b>							
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) <b>"Waste environmentally hazardous substances, solid, N.O.S.; 9; UN3077; PG III</b>				12. Containers		13. Total Quantity		14. Unit	
				No. Type		Quantity		Wt/Vol	
a.				1		13600		K	
b.						19500			
c.									
d.									
Additional Description for Materials (per 49 CFR 173.155) no conductivity from this former waste concrete and metals no other shipping P&GS									
15. Special Handling Instructions and Additional Information  <b>Authorization #366936</b> <b>Date out of service: 10/96</b> <b>Profile CR3503</b>									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the 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 federal, state and international laws.  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 <b>Thomas Bender</b>				Signature 				Month Day Year <b>01 4 28 1997</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name <b>Mike Lewis</b>				Signature 				Month Day Year <b>01 4 28 1997</b>	
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				Signature				Month Day Year	

DO NOT WRITE BELOW THIS LINE.

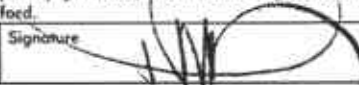
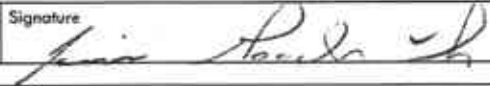
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IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. CIAICIA01111479128	Manifest Document No. 13	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address DEL MONTE FOODS (Print#35) P.O. BOX 193575 SAN FRANCISCO, CA 94111						
4. Generator's Phone 415 247-3520						
5. Transporter 1 Company Name Denbeste			6. US EPA ID Number CIAID91812511316132			
7. Transporter 2 Company Name						
8. US EPA ID Number						
9. Designated Facility Name and Site Address Chemical Waste Management, Inc. 35251 Old Skyline Road Kettleman City, CA 93239						
10. US EPA ID Number CIAIT101010161461117						
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol	
a. Waste environmentally hazardous substances, solid, N.O.S.; 9; UN3077; PGIII		No.	Type			
		11	DT	19500	K	
b.						
c.						
d.						
15. Special Handling Instructions and Additional Information a) concrete drums from storage room concrete wipe samples from 8 ppm PCBs Authorization # 366936 Date of out of service: 10/96 Permit CB 3503						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the 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 federal, state and international laws. 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 Thomas Bender		Signature 		Month 01	Day 28	Year 97
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Typed Name Gene Smith		Signature 		Month 01	Day 28	Year 97
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month	Day	Year
19. Discrepancy Indication Space 5/1/97 10:30am Rhonda at Kettleman Scales: discrepancy (>10%) on this manifest. is conversion math error in the field: should have been 33,160 pounds instead of 43,160pa (15,000 kg)						
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name		Signature		Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. <b>CA10001147912B</b>	Manifest Document No. <b>4</b>	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address <b>DEL MONTE FOODS P.O. BOX 193575 SAN FRANCISCO, CA 94111</b>		4. Generator's Phone <b>(415) 247-3520</b>			
5. Transporter 1 Company Name <b>Mid Coast</b>		6. US EPA ID Number <b>CA1010100121312</b>			
7. Transporter 2 Company Name		8. US EPA ID Number			
9. Designated Facility Name and Site Address <b>Chemical Waste Management, Inc. 35251 Old Skyline Road Kettleman City, CA 93239</b>		10. US EPA ID Number <b>CA101010106461117</b>			
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit	
a. <b>Waste environmentally hazardous substances, solid, N.O.S.; 9; UN3077; P6III</b>		No.   Type	<b>13,700<sup>05</sup></b>	<b>K</b>	
b.					
c.					
d.					
15. Special Handling Instructions and Additional Information <b>Authorization # 366936 Phone CB 3503</b>		<b>Date out of service: 10/96</b>			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the 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 federal, state and international laws.					
<p>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.</p>					
Printed/Typed Name <b>Thomas Bender</b>		Signature 		Month Day Year <b>04 28 97</b>	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <b>Jim Goodrich</b>		Signature 		Month Day Year <b>04 28 97</b>	
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		Signature		Month Day Year	

DO NOT WRITE BELOW THIS LINE.

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **CAC10011147928** Manifest Document No. **15** of **1**

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

3. Generator's Name and Mailing Address **DEL MONTE FOODS (PART #35)**  
**P.O. BOX 193575 SAN FRANCISCO, CA 94111**  
 4. Generator's Phone **415 747-3520**

5. Transporter 1 Company Name **Dillard** 6. US EPA ID Number **CA1019181161921909**  
 7. Transporter 2 Company Name \_\_\_\_\_ 8. US EPA ID Number \_\_\_\_\_

9. Designated Facility Name and Site Address **Chemical Waste Management, Inc.** 10. US EPA ID Number **CA11101010164161117**  
**35251 Old Skyline Road**  
**Kettleman City, CA 93239**

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Waste environmentally hazardous substances, Solid, N.O.S.; 9; UN3077; PGIII	11	DT	109900 <sup>CS</sup>	K
b.				
c.				
d.				

15. Special Handling Instructions and Additional Information  
**Authorization # 366936 Date out of service: 10/36**  
**PHIL CB 3502**

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the 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 federal, state and international laws.  
 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 **Thomas Bender** Signature \_\_\_\_\_ Month **01** Day **12** Year **1997**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **Ed Louse** Signature \_\_\_\_\_ Month **01** Day **12** Year **1997**

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 \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550

DO NOT WRITE BELOW THIS LINE.



# 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. 037275

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

a. Generator Name: Del Monte Foods b. Generating Location: Del Monte Plant #35  
 c. Address: P.O. Box 193515 d. Address: 1507 Park Avenue  
SAN FRANCISCO, CA 94111-5155 EMERYVILLE, CA 94608  
 e. Phone No.: (415) 247-3520 f. Phone No.: None

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

BFI WASTE CODE: 

CA	405	042397	00E27
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 Containers: \_\_\_\_\_

Description of Waste: Soil containing petroleum hydrocarbons (diesel and motor oil)

Quantity	Units	No.	TYPE
15	Y	17	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 Farber Signature 042597 Shipment Date

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

TRANSPORTER I		TRANSPORTER II	
l. Name: <u>Mid Coast</u>	h. Name: _____	l. Address: <u>Preston Avenue</u>	h. Address: _____
l. Address: <u>Livermore, CA</u>	l. Address: _____	l. Driver Name/Title: _____	l. Driver Name/Title: _____
l. Driver Name/Title: <u>William C. Tomlinson</u>	l. Driver Name/Title: _____	l. Phone No.: <u>(925) 443-8211</u>	l. Phone No.: _____
l. Phone No.: _____	l. Phone No.: _____	l. Truck No.: <u>90</u>	l. Truck No.: _____
l. Vehicle License No./State: <u>9A8622 CA</u>	l. Vehicle License No./State: _____	l. Acknowledgement of Receipt of Materials: <u>[Signature]</u>	l. Acknowledgement of Receipt of Materials: _____
l. Shipment Date: <u>042597</u>	l. Shipment Date: _____	l. Driver Signature: _____	l. Driver Signature: _____

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

Site Name: BFI Vasco Road Landfill c. Phone No.: (510) 447-0431  
 Physical Address: 4001 N. Vasco Road d. Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550 Livermore, CA 94550

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.

Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

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

Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_

Operator's\* Address: \_\_\_\_\_

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.

Operator's\* Name & Title: \_\_\_\_\_ Print/Type: \_\_\_\_\_ Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Responsible Agency: \_\_\_\_\_

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. **037277**

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

Generator Name: Del Monte Plant b. Generating Location: Del Monte Plant #35  
 Address: P.O. Box 195015 d. Address: 1350 Park Avenue  
San Francisco, CA 94115 Emeryville, CA 94608  
 Phone No.: (415) 247-3520 f. Phone No.: None

Owner of the generating facility differs from the generator, provide:  
 Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

BFI WASTE CODE: CA 405 04-2397 00627 Containers: \_\_\_\_\_  
 Description of Waste: Soil containing Petroleum Hydrocarbons (diesel and motor oil) k. Quantity: 15 Units: Y No.: 16 TYPE: DM

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: Thomas Bender Signature: \_\_\_\_\_ Shipment Date: 042597

- CONTAINERS**
- 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<sup>3</sup> - CUBIC METERS
  - Y<sup>3</sup> - CUBIC YARDS
  - O - OTHER

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

**TRANSPORTER I**

Name: Midcoast  
 Address: Preston Avenue  
Livermore, CA  
 Driver Name/Title: Harold Traxler  
 Phone No.: (510) 443-8211 e. Truck No.: 96  
 Vehicle License No./State: 9A B6752 CA  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_  
 Driver Signature: \_\_\_\_\_ Shipment Date: 042597

**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)

Name: BFI Vasco Road Landfill  
 Physical Address: 4001 N. Vasco Road  
Livermore, CA 94550

c. Phone No.: (510) 447-0491  
 d. Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550

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.

Signature of Authorized Agent: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

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

Operator's Name: \_\_\_\_\_ b. Operator's Phone No.: \_\_\_\_\_  
 Operator's Address: \_\_\_\_\_

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, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

Operator's Name & Title: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Responsible Agency: \_\_\_\_\_  
 Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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. 037276

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

a. Generator Name: Del Monte Foods b. Generating Location: Del Monte Plant #35  
 c. Address: P.O. Box 13505 d. Address: 1250 Park Avenue  
San Francisco, CA 94115-2575 Emeryville, CA 94608  
 e. Phone No.: (415) 247-3520 f. Phone No.: 1111

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

BFI WASTE CODE: 

CA	405	042							
----	-----	-----	--	--	--	--	--	--	--

 Containers: 

00627
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Description of Waste: Soil containing petroleum hydrocarbons (diesel and motor oil)

k. Quantity: 

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

 Units: Y No. 15 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.

Theresa Bender Signature 042497 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-d, Transporter I completes a-g, Transporter II completes h-i)

**TRANSPORTER I**  
 Name: Gandy Trucking  
 Address: 1520 Broadway Drive  
Walton, CA  
 Driver Name/Title: Mike Gandy  
 Phone No.: (916) 444-9131 PRINT/TYPE e. Truck No.: 9A  
 Vehicle License No./State: 2-36084 CA  
 Acknowledgement of Receipt of Materials:  
[Signature] 042497 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. \_\_\_\_\_ Shipment Date

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

Site Name: BFI Visco Ford Landfill c. Phone No.: (510) 447-0491  
 Physical Address: 4001 N. Visco Road d. Mailing Address: 4001 N. Visco Road  
Livermore, CA 94550 Livermore, CA 94550  
 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.

Name of Authorized Agent \_\_\_\_\_ Signature \_\_\_\_\_ 042497 Receipt Date

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

Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
 Operator's\* Address: \_\_\_\_\_  
 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.

Operator's\* Name & Title: \_\_\_\_\_ PRINT/TYPE \_\_\_\_\_ Operator's Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Name and Address \_\_\_\_\_  
 f. Responsible Agency: \_\_\_\_\_  
 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.

ORDER ONLY THROUGH BFI / UARCO CONTRACT GENERATOR RETAIN



# 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. 037274

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

Generator Name: Del Monte Fork b. Generating Location: Del Monte Plant # 3E

Address: P.O. Box 12575 d. Address: 150 Park Avenue  
San Francisco, CA 94111-575 Emeryville, CA 94608

Phone No.: (415) 247-3520 f. Phone No.: None

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

FI WASTE CODE: 

CA	405	04	23	97	00	627
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 Containers: \_\_\_\_\_ TYPE: \_\_\_\_\_

Description of Waste: Soil containing petroleum hydrocarbons (diesel and motor oil) k. Quantity: 

15	Y	14	7
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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.

Signature: Thomas Perrier Shipment Date: 042497

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

TRANSPORTER I  
Name: De Rosa Trucking

Address: 150 Park Avenue  
Emeryville, CA 94608

Name/Title: Mike De Rosa - owner  
Phone No.: (415) 597-5510 e. Truck No.: ??

State License No./State: 9B02147

Acknowledgement of Receipt of Materials.  
Signature: \_\_\_\_\_ Shipment Date: 042497

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.  
Signature: \_\_\_\_\_ Shipment Date: \_\_\_\_\_

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

Name: BFI Vasco Road Landfill

Address: 4001 N. Vasco Road  
Livermore, CA 94550

Phone No.: (510) 447-0491

Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.  
Authorized Agent Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

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

Operator's Name: \_\_\_\_\_ b. Operator's Phone No.: \_\_\_\_\_

Operator's Address: \_\_\_\_\_

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, packaged, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

Operator's Name & Title: \_\_\_\_\_ Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Responsible Agency: \_\_\_\_\_

Friable:  Non-friable;  Both \_\_\_\_\_ % friable \_\_\_\_\_ % nonfriable

\* 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. **037273**

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

a. Generator Name: Del Monte Foods b. Generating Location: Del Monte Plant #35  
 c. Address: P.O. Box 13575 d. Address: 1250 BLUE AVENUE  
SAN FRANCISCO, CA 94111 EMERYVILLE, CA 94608  
 e. Phone No.: (415) 247-3520 f. Phone No.: None

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	042397	00627
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 Containers: \_\_\_\_\_

Description of Waste: Soil containing petroleum Quantity: \_\_\_\_\_ Units: \_\_\_\_\_ No.: 13 TYPE: T  
and motor oil

CONTAINER 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: Thomas Fender Signature: \_\_\_\_\_ Shipment Date: 042497

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

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

**TRANSPORTER I**

l. Name: Miller h. Name: \_\_\_\_\_  
 m. Address: Livermore, CA i. Address: \_\_\_\_\_  
 Driver Name/Title: John Miller j. Driver Name/Title: \_\_\_\_\_  
 Phone No.: (510) 442-9511 k. Phone No.: \_\_\_\_\_  
 e. Truck No.: 1227 l. Truck No.: \_\_\_\_\_  
 Vehicle License No./State: 1A 11507 m. Vehicle License No./State: \_\_\_\_\_  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_  
 Driver Signature: John Miller n. \_\_\_\_\_  
 Shipment Date: 042497

**TRANSPORTER II**

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

Site Name: PEI Vasco Road Landfill c. Phone No.: (510) 447-0491  
 Physical Address: 4001 N. Vasco Road d. Mailing Address: 4001 N. Vasco Road  
LIVERMORE, CA 94550 LIVERMORE, CA 94550

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.

Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

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

Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
 Operator's\* Address: \_\_\_\_\_

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.

Operator's\* Name & Title: \_\_\_\_\_ Print/Type: \_\_\_\_\_ Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Name and Address: \_\_\_\_\_  
 Responsible Agency: \_\_\_\_\_

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. 037272

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

Generator Name: DELAKING FORD b. Generating Location: 1200 North Point #20

Address: PO BOX 12575 d. Address: 1200 North Point #20

Phone No.: (415) 47-3520 f. Phone No.: None

Owner of the generating facility differs from the generator, provide:  
Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

3FI WASTE CODE: EA 405 042397 00627 Containers: \_\_\_\_\_

Description of Waste: Oil containing jet/diesel hydrocarbons (diesel and motor oil) k. Quantity: 15 Units: Y No.: 12 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.

Generator Authorized Agent Name: Thomas Fender Signature: [Signature] Shipment Date: 042497

UNITS	
P	- POUNDS
Y	- YARDS
M <sup>3</sup>	- CUBIC METERS
Y <sup>3</sup>	- CUBIC YARDS
O	- OTHER

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

TRANSPORTER I  
Name: Mil Cort  
Address: Piston Avenue

TRANSPORTER II  
h. Name: \_\_\_\_\_  
i. Address: \_\_\_\_\_

Driver Name/Title: John Bohannon  
Phone No.: (510) 473-8211 e. Truck No.: 30

J. Driver Name/Title: \_\_\_\_\_  
k. Phone No.: \_\_\_\_\_ i. Truck No.: \_\_\_\_\_

Vehicle License No./State: TY 27-112  
Acknowledgement of Receipt of Materials: [Signature] Shipment Date: 042497

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)

Name: BFI Vasco Road Landfill  
Physical Address: 4001 N. Vasco Road  
Livermore, CA 94550

c. Phone No.: (510) 447-0491  
d. Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550

Repackaging 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.

Authorized Agent Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

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

Operator's Name: \_\_\_\_\_ b. Operator's Phone No.: \_\_\_\_\_

Operator's Address: \_\_\_\_\_

Special Handling Instructions and additional information: \_\_\_\_\_

Operator's Name & Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Responsible Agency: \_\_\_\_\_  
Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Fractureable:  Non-fractureable;  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 & BESTOS 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. 037271

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

Generator Name: Del Monte Foods b. Generating Location: Del Monte Mill #30  
 Address: P.O. Box 13515 d. Address: 150 Park Avenue  
San Francisco, CA 94111-3515 Emeryville, CA 94608  
 Phone No.: (415) 247-3520 f. Phone No.: NAE  
 Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_  
 If owner of the generating facility differs from the generator, provide:  
 Owner's Name: \_\_\_\_\_  
 BFI WASTE CODE: 

CA	40E	042397	00627
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 Containers: \_\_\_\_\_ TYPE: \_\_\_\_\_  
 Description of Waste: oil containing petroleum hydrocarbons (diesel and motor oil) Quantity: 

15	Y	1	1	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.  
 Morris Painter (Signature) 042497 (Shipment Date)  
 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**  
 Name: Mrs. Peck  
 Address: 150 Park Avenue  
Emeryville, CA  
 Driver Name/Title: Christine Peck  
 Phone No.: (510) 447-0491 e. Truck No.: \_\_\_\_\_  
 Vehicle License No./State: CA 46752  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_  
 Driver Signature: \_\_\_\_\_ (Signature) 042497 (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: \_\_\_\_\_ (Signature) \_\_\_\_\_ (Shipment Date)

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

Name: BFI Vasco Food Landfill c. Phone No.: (510) 447-0491  
 Physical Address: 4001 N. Vasco Road d. Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550 Livermore, CA 94550  
 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.  
 Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

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

Generator's Name: \_\_\_\_\_ b. Operator's Phone No.: \_\_\_\_\_  
 Generator's Address: \_\_\_\_\_  
 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, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.  
 Operator's Name & Title: \_\_\_\_\_ Print/Type: \_\_\_\_\_ Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Name and Address: \_\_\_\_\_  
 Responsible Agency: \_\_\_\_\_  
 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. 037270

### Section I

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

a. Generator Name: Del Monte Foods  
 b. Generating Location: Del Monte Plant #35  
 c. Address: P.O. Box 13575  
San Francisco, CA 94111-3575  
 d. Address: 1550 Park Avenue  
Emeryville, CA 94608

e. Phone No.: \_\_\_\_\_  
 f. Phone No.: 415-241-1000

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

g. Owner's Name: \_\_\_\_\_  
 h. Owner's Phone No.: \_\_\_\_\_

BFI WASTE CODE: CA 405 042397 00627  
 Description of Waste: Soil containing petroleum hydrocarbons (diesel and motor oil)  
 Containers: \_\_\_\_\_  
 Quantity: 15 Units: Y No.: 10 TYPE: 7

- 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<sup>3</sup> - CUBIC METERS
  - Y<sup>3</sup> - 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: Thomas Pender  
 Signature: \_\_\_\_\_  
 Shipment Date: 042497

### Section II

### TRANSPORTER (Generator completes a-c, Transporter I completes e-g, Transporter II completes i-n)

TRANSPORTER I  
 Name: De Rosa Trucking  
 Address: 1459 Robert Avenue  
Hayward, CA 94541

TRANSPORTER II  
 h. Name: \_\_\_\_\_  
 i. Address: \_\_\_\_\_

Driver Name/Title: \_\_\_\_\_  
 Phone No.: (415) 533-5510  
 Vehicle License No./State: 9B 0247  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_

Driver Name/Title: \_\_\_\_\_  
 k. Phone No.: \_\_\_\_\_  
 m. Vehicle License No./State: \_\_\_\_\_  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_

Signature: \_\_\_\_\_  
 Shipment Date: 042497

n. Driver Signature: \_\_\_\_\_  
 Shipment Date: \_\_\_\_\_

### Section III

### DESTINATION (Generator completes a-c, destination site completes e-f)

Name: BFI Vasco Road Landfill  
 Physical Address: 4001 N. Vasco Road  
Livermore, CA 94550

c. Phone No.: (510) 447-0891  
 d. Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550

Agency 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.

Authorized Agent: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Receipt Date: \_\_\_\_\_

### Section IV ASBESTOS (Generator complete a-d, g, Operator\* completes e.)

Operator's Name: \_\_\_\_\_  
 Operator's Address: \_\_\_\_\_  
 b. Operator's Phone No.: \_\_\_\_\_

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, packaged, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

Operator's Name & Title: \_\_\_\_\_  
 Print/Type: \_\_\_\_\_  
 Operator's Address: \_\_\_\_\_  
 Responsible Agency: \_\_\_\_\_  
 Operator's Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

Material is:  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.

GENERATOR RETAIN



# 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. 037269

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

Generator Name: Del Monte Foods  
 Address: P.O. Box 193575  
San Francisco, CA 94111-3575  
 Phone No.: (510)247-3520  
 b. Generating Location: Del Monte Plant #35  
 d. Address: 1250 Park Avenue  
Emeryville, CA 94608  
 f. Phone No.: None  
 h. Owner's Phone No.: \_\_\_\_\_

Owner of the generating facility differs from the generator, provide:  
 Owner's Name: \_\_\_\_\_  
 Owner's Phone No.: \_\_\_\_\_

WASTE CODE: CA 405 00627  
 Description of Waste: SOIL containing petroleum hydrocarbons (diesel and motor oil)  
 Quantity: 15 Units No. 09 TYPE T  
 CONTAINERS: \_\_\_\_\_  
 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<sup>3</sup> - CUBIC METERS, Y<sup>3</sup> - 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.

Thomas Bender (Signature)  
 Generator Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_  
 Shipment Date: 042497

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

**TRANSPORTER I**  
 Name: Condry Trucking  
 Address: 1520 Picardy Drive  
Stockton, CA 95203  
 Driver Name/Title: KEE GANN  
 Phone No.: (510) 447-2437 PRINT/TYPE \_\_\_\_\_  
 a. Truck No.: 27  
 Vehicle License No./State: 9/6647 CA  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Shipment Date: 042497

**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. \_\_\_\_\_  
 Driver Signature: \_\_\_\_\_ Shipment Date: \_\_\_\_\_

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

Name: Bel Vasco Road Landfill  
 Address: 4001 N. Vasco Road  
Livermore, CA 94550  
 c. Phone No.: (510) 447-0491  
 d. Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550  
 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.

Authorized Agent Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

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

Operator's Name: \_\_\_\_\_  
 Operator's Address: \_\_\_\_\_  
 b. Operator's Phone No.: \_\_\_\_\_

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, packaged, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

Operator's Name & Title: \_\_\_\_\_  
 Print/Type \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Responsible Agency: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Fragmentable:  Non-friable;  Both \_\_\_\_\_ % friable \_\_\_\_\_ % nonfriable

\* 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.

ONLY THROUGH BFI / UARCO CONTRACT

GENERATOR RETAIN

260-7208 5/93





# 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. 037268

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

a. Generator Name: Del Monte Foods b. Generating Location: Del Monte Plant #5  
 c. Address: P.O. Box 13575 d. Address: 1750 Park Avenue  
San Francisco, CA 94111-3575 Emeryville, CA 94608  
 e. Phone No.: (415) 747-3520 f. Phone No.: NONE  
 If owner of the generating facility differs from the generator, provide:  
 g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

BFI WASTE CODE: 

CA	405	042397	09627
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 Containers: \_\_\_\_\_

Description of Waste: Soil containing petroleum hydrocarbons (diesel and motor oil) Quantity: 

		15	Y	08	T
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 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: Thomas Bevier Signature: [Signature] Shipment Date: 

0	4	7	4	9	7
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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<sup>3</sup> - CUBIC METERS, Y<sup>3</sup> - CUBIC YARDS, O - OTHER

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

**TRANSPORTER I**  
 Name: Mid Coast  
 Address: Preston Av  
Livermore  
 Driver Name/Title: LJB Tracking PRINT/TYPE: \_\_\_\_\_  
 Phone No.: 449-8211 e. Truck No.: 1937  
 Vehicle License No./State: 9A71507  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_  
 Driver Signature: [Signature] Shipment Date: 

0	4	7	4	9	7
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**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: 

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

Site Name: BFI Vasco Road Landfill c. Phone No.: (510) 447-0491  
 Physical Address: 4001 N. Vasco Road d. Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550 Livermore, CA 94550  
 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.

Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: 

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

Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
 Operator's\* Address: \_\_\_\_\_  
 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, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

Operator's\* Name & Title: \_\_\_\_\_ PRINT/TYPE: \_\_\_\_\_ Operator's Signature: \_\_\_\_\_ Date: 

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

  
 Name and Address: \_\_\_\_\_  
 Responsible Agency: \_\_\_\_\_  
 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. 037257

### Section I

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

a. Generator Name: Del Monte Foods  
 b. Generating Location: Del Monte Plant #35  
 c. Address: P.O. Box 193575  
San Francisco, CA 94111-3575  
 d. Address: 1250 Park Avenue  
Emeryville, CA 94608  
 e. Phone No.: (415) 247-3520  
 f. Phone No.: None

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

g. Owner's Name: \_\_\_\_\_  
 h. Owner's Phone No.: \_\_\_\_\_

BFI WASTE CODE: CA 405 042397 00627  
 Description of Waste: Soil containing petroleum hydrocarbons (diesel and motor oil)  
 Quantity: 15 Units: Y No.: 07 TYPE: T

CONTAINERS	
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	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: Thomas Bender Signature: [Signature] Shipment Date: 042497

### Section II

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

TRANSPORTER I  
 Name: W. Coast  
 Address: Preston Avenue  
Livermore, CA  
 Driver Name/Title: John Bahaman  
 Phone No.: 415 932 11 Truck No.: 78  
 Vehicle License No./State: 4427472 / CA  
 Acknowledgement of Receipt of Materials:  
 Driver Signature: [Signature] Shipment Date: 042497

TRANSPORTER II  
 h. Name: \_\_\_\_\_  
 i. Address: \_\_\_\_\_  
 j. Driver Name/Title: \_\_\_\_\_  
 k. Phone No.: \_\_\_\_\_ 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)

Site Name: BFI Vasco Road Landfill  
 Physical Address: 4001 N. Vasco Road  
Livermore, CA 94550  
 c. Phone No.: (510) 447-0491  
 d. Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550

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.

Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

### Section IV

### ASBESTOS (Generator completes a-d, f, g; Operator completes e.)

Operator's Name: \_\_\_\_\_ b. Operator's Phone No.: \_\_\_\_\_  
 Operator's Address: \_\_\_\_\_  
 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, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.

Operator's Name & Title: \_\_\_\_\_ Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Responsible Agency: \_\_\_\_\_  
 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.

FOR USE ONLY THROUGH BFI / UARCO CONTRACT

GENERATOR RETAIN



# 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. 037266

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

a. Generator Name: Del Monte Foods b. Generating Location: Del Monte Fruit #35  
 c. Address: P.O. Box 1257 d. Address: 150 Park Avenue  
SAN FRANCISCO, CA 94111-3575 EMERYVILLE, CA 94608  
 e. Phone No.: (415) 247-2520 f. Phone No.: DUK  
 If owner of the generating facility differs from the generator, provide:  
 g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

BFI WASTE CODE: CA 405 042397 00627 Containers: \_\_\_\_\_ TYPE: \_\_\_\_\_  
 Description of Waste: SOIL CONTAINING PETROLEUM k. Quantity: \_\_\_\_\_ Units: \_\_\_\_\_ No.: \_\_\_\_\_ TYPE: \_\_\_\_\_  
Hydrocarbons (diesel and motor oil) 15 Y 06 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.  
Thomas Bender Signature 042497 Shipment Date  
 Generator Authorized Agent Name

CONTAINER 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<sup>3</sup> - CUBIC METERS, Y<sup>3</sup> - CUBIC YARDS, O - OTHER

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

TRANSPORTER I: Name: Mid Coast h. Name: \_\_\_\_\_  
 Address: Preston Avenue i. Address: \_\_\_\_\_  
Livermore, CA  
 Driver Name/Title: Walter Sullivan (Chris) j. Driver Name/Title: \_\_\_\_\_  
 Phone No.: (510) 447-8211 e. Truck No.: 910 k. Phone No.: \_\_\_\_\_ l. Truck No.: \_\_\_\_\_  
 Vehicle License No./State: 9A 86752 m. Vehicle License No./State: \_\_\_\_\_  
 Acknowledgement of Receipt of Materials. n. \_\_\_\_\_  
Walter Sullivan Signature 042497 Shipment Date  
 Driver Signature

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

Site Name: BFI Vasco Road Landfill c. Phone No.: (510) 447-0491  
 Physical Address: 4001 N. Vasco Road d. Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550 Livermore, CA 94550  
 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.  
 \_\_\_\_\_ Signature \_\_\_\_\_ Receipt Date

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

Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
 Operator's\* Address: \_\_\_\_\_  
 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.  
 Operator's\* Name & Title: \_\_\_\_\_ Print/Type \_\_\_\_\_ Operator's Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Name and Address: \_\_\_\_\_  
 Responsible Agency: \_\_\_\_\_  
 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. **037265**

### Section I

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

a. Generator Name: Del Monte Foods b. Generating Location: Del Monte Plant #35  
 c. Address: P.O. Box 193575 d. Address: 1250 Park Avenue  
San Francisco, CA 94111-575 Emeryville, CA 94608  
 e. Phone No.: (415) 247-3570 f. Phone No.: None

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

g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

1. BFI WASTE CODE: CA 405 042397 00627 Containers: \_\_\_\_\_ TYPE: \_\_\_\_\_  
 Description of Waste: Soil containing petroleum hydrocarbons (diesel and motor oil) 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.

Thomas Bender Signature 042497 Shipment Date

- CONTAINERS**
- 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<sup>3</sup> - CUBIC YARDS
  - O - OTHER

### Section II

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

**TRANSPORTER I**

Name: Mid Coast  
 Address: Preston Avenue  
Livermore, CA  
 Driver Name/Title: \_\_\_\_\_  
 Phone No.: (510) 449-9211 PRINT/TYPE Truck No.: \_\_\_\_\_  
 Vehicle License No./State: \_\_\_\_\_  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_  
 Driver Signature: \_\_\_\_\_ Shipment Date: 042497

**TRANSPORTER II**

h. Name: DA ROSA Trucking  
 i. Address: 1457 De Boer Ave  
Ripon, CA 95266  
 Driver Name/Title: Miguel Da Rosa  
 k. Phone No.: 209-579-5510 PRINT/TYPE l. Truck No.: 27  
 m. Vehicle License No./State: 9B02147  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_  
 n. Driver Signature: \_\_\_\_\_ Shipment Date: 042497

### Section III

### DESTINATION (Generator completes a-d; destination site completes e-f)

Site Name: BFI Vasco Road Landfill c. Phone No.: (510) 447-0271  
 Physical Address: 400 N. Vasco Road d. Mailing Address: 400 N. Vasco Road  
Livermore, CA 94550 Livermore, CA 94550

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.

Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

### Section IV

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

Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
 Operator's\* Address: \_\_\_\_\_

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.

Operator's\* Name & Title: \_\_\_\_\_ Print/Type \_\_\_\_\_ Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Responsible Agency: \_\_\_\_\_  
 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. **037263**

### Section I

### GENERATOR

(Generator completes all of Section I)

a. Generator Name: Del Monte Foods b. Generating Location: Del Monte Plant #35  
 c. Address: P.O. Box 13575 d. Address: 1250 Park Avenue  
San Francisco, CA 94111-3575 Emeryville, CA  
 e. Phone No.: (415) 747-3520 f. Phone No.: none

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 042397 00627  
 j. Description of Waste: soil containing petroleum hydrocarbons (diesel and motor oil)  
 Quantity: 15 Units: Y No.: 03 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.

Thomas Bender  
 Generator Authorized Agent Name Signature [Signature] Shipment Date: 042497

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

### Section II

### TRANSPORTER I

(Generator completes a-d, Transporter I completes e-g, Transporter II completes h-i)

a. Name: Mid Coast  
 b. Address: Preston Avenue  
Livermore, CA  
 c. Driver Name/Title: \_\_\_\_\_  
 d. Phone No.: (510) 449-9211 e. Truck No.: \_\_\_\_\_  
 f. Vehicle License No./State: \_\_\_\_\_  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_  
 g. Driver Signature: [Signature] Shipment Date: 042497

### TRANSPORTER II

h. Name: GONDY TRUCKS  
 i. Address: 1520 ACADY ST.  
STAN. CA. 95203  
 j. Driver Name/Title: Rick Gondy  
 k. Phone No.: (909) 744-9451 l. Truck No.: 94  
 m. Vehicle License No./State: 9C340641 CA.  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_  
 n. Driver Signature: [Signature] Shipment Date: 42497

### Section III

### DESTINATION

(Generator completes a-d, Destination site completes e-f)

a. Site Name: EFI Vasco Road Landfill c. Phone No.: (510) 447-0491  
 b. Physical Address: 4001 N. Vasco Road d. Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550 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.

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.

REORDER ONLY THROUGH BFI / UARCO CONTRACT

GENERATOR RETAIN





# 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. 037262

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

Generator Name: Del Monte Foods b. Generating Location: Del Monte Plant #35  
 Address: P.O. Box 193575 d. Address: 1750 Park Avenue  
San Francisco, CA 94111-3575 Emeryville, CA 94608  
 Phone No.: (415) 247-3520 f. Phone No.: NONE  
 If owner of the generating facility differs from the generator, provide:  
 Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

BFI WASTE CODE: CA 405 042397 00627 Containers: \_\_\_\_\_  
 Description of Waste: soil containing petroleum hydrocarbons (diesel and motoroil) k. Quantity: \_\_\_\_\_ Units: Y No.: 02 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: Thomas Bender Signature: \_\_\_\_\_ Shipment Date: 042497

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 <sup>3</sup>	- CUBIC YARDS
O	- OTHER

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

TRANSPORTER I  
 Name: Mid Coast  
 Address: Preston Avenue  
Livermore, CA  
 Driver Name/Title: John Buchanan  
 Phone No.: 949 8211 e. Truck No.: 38  
 Vehicle License No./State: 91Y274172 - CA  
 Acknowledgement of Receipt of Materials:  
 Driver Signature: \_\_\_\_\_ Shipment Date: 042497

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)

Site Name: BEI Vasco Road Landfill  
 Physical Address: 4001 N. Vasco Road  
Livermore, CA 94550  
 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.  
 Name of Authorized Agent: \_\_\_\_\_ Signature: \_\_\_\_\_ Receipt Date: \_\_\_\_\_

c. Phone No.: (510) 447-0491  
 d. Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550

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

Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
 Operator's\* Address: \_\_\_\_\_  
 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, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.  
 Operator's\* Name & Title: \_\_\_\_\_ Print/Type: \_\_\_\_\_ Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Responsible Agency: \_\_\_\_\_  
 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.

DERIVED ONLY THROUGH BFI / UARCO CONTRACT GENERATOR RETAIN



# 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. 037261

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

a. Generator Name: Del Monte Foods b. Generating Location: Del Monte Plant #35  
 c. Address: P.O. Box 193575 d. Address: 1250 Park Avenue  
San Francisco, CA 94111-3575 Emeryville, CA 94608  
 e. Phone No.: (415) 424-2700 f. Phone No.: no phone  
 If owner of the generating facility differs from the generator, provide:  
 g. Owner's Name: \_\_\_\_\_ h. Owner's Phone No.: \_\_\_\_\_

BFI WASTE CODE: CA 405 04 2397 00 627 Containers: \_\_\_\_\_  
 Description of Waste: Soil containing petroleum hydrocarbons (diesel and motor oil) k. Quantity: 15 Units: Y No.: 01 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<sup>3</sup> - CUBIC METERS
  - Y<sup>3</sup> - 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.

Thomas Bender Signature \_\_\_\_\_ Shipment Date: 042497

## Section II TRANSPORTER (Generator complete a-d; Transporter I complete a-g; Transporter II complete b-h)

TRANSPORTER I

Name: Midwest h. Name: \_\_\_\_\_  
 Address: Preston Ave i. Address: \_\_\_\_\_  
Livermore  
 Driver Name/Title: Christine Truelove j. Driver Name/Title: \_\_\_\_\_  
 Phone No.: 510 449 8211 k. Phone No.: \_\_\_\_\_  
 e. Truck No.: 96 l. Truck No.: \_\_\_\_\_  
 Vehicle License No./State: 9A86752 m. Vehicle License No./State: \_\_\_\_\_  
 Acknowledgement of Receipt of Materials: \_\_\_\_\_  
Christine Truelove n. \_\_\_\_\_  
 Driver Signature Shipment Date: 042497 Driver Signature Shipment Date: \_\_\_\_\_

## Section III DESTINATION (Generator completes a-d; destination site completes a-f)

Site Name: BFI Vasco Road Landfill c. Phone No.: (510) 447-0491  
 Physical Address: 4001 N Vasco Road d. Mailing Address: 4001 N Vasco Road  
Livermore, CA 94550 Livermore, CA 94550  
 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.  
 \_\_\_\_\_  
 Name of Authorized Agent Signature \_\_\_\_\_ Receipt Date: \_\_\_\_\_

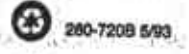
## Section IV ASBESTOS (Generator completes a-d, f, g; Operator\* completes a-e)

Operator's\* Name: \_\_\_\_\_ b. Operator's\* Phone No.: \_\_\_\_\_  
 Operator's\* Address: \_\_\_\_\_  
 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.  
 Operator's\* Name & Title: \_\_\_\_\_ Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Name and Address of Responsible Agency: \_\_\_\_\_  
 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.

ORDER ONLY THROUGH BFI / UARCO CONTRACT

GENERATOR RETAIN





# NON-HAZARDOUS SPECIAL WASTE & BESTOS 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. 037264

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

a. Generator Name: Del Monte Foods  
 b. Generating Location: Del Monte Plant #35  
 Address: P.O. Box 133575  
 d. Address: 1250 Park Avenue  
San Francisco, CA 94111-3575  
Emeryville, CA 94608  
 e. Phone No.: (415) 247-3570  
 f. Phone No.: DUK  
 If owner of the generating facility differs from the generator, provide:  
 g. Owner's Name: \_\_\_\_\_  
 h. Owner's Phone No.: \_\_\_\_\_

BFI WASTE CODE: CA 405 042397 00627  
 Description of Waste: Soil containing petroleum hydrocarbons (diesel and motor oil)  
 Containers: \_\_\_\_\_  
 TYPE: \_\_\_\_\_  
 k. Quantity: \_\_\_\_\_ Units: \_\_\_\_\_ No.: 04 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.  
 Thomas Berrier  
 Generator Authorized Agent Name \_\_\_\_\_ Signature \_\_\_\_\_  
 Shipment Date: 042497

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

TRANSPORTER I  
 Name: Mid Coast  
 Address: Preston Avenue  
Livermore, CA  
 Driver Name/Title: L. B. Trucking  
 Phone No.: (510) 449-8211 e. Truck No.: 1937  
 Vehicle License No./State: 9A71507  
 Acknowledgement of Receipt of Materials.  
 Signature: \_\_\_\_\_ Shipment Date: 042497

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-j)

Site Name: FBI Vasco Road Landfill  
 Physical Address: 4001 N. Vasco Road  
Livermore, CA 94550  
 c. Phone No.: (510) 447-0491  
 d. Mailing Address: 4001 N. Vasco Road  
Livermore, CA 94550

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.

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

Operator's Name: \_\_\_\_\_ b. Operator's Phone No.: \_\_\_\_\_  
 Operator's Address: \_\_\_\_\_  
 Social 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, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and government regulations.  
 Operator's Name & Title: \_\_\_\_\_  
 Name and Address: \_\_\_\_\_  
 Responsible Agency: \_\_\_\_\_  
 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 ONLY THROUGH BFI / UARCO CONTRACT  
 GENERATOR RETAIN