

ATTACHMENT 12

NRC FORM 314

TRANSFER AND DISPOSAL MANIFESTS

(6-2004)
10 CFR 30.36(j)(1); 40.42(j)(1);
70.38(j)(1); and 72.54(j)(1)

Estimated burden per response to comply with this mandatory collection request: 30 minutes. This submittal is used by NRC as part of the basis for its determination that the facility is released for unrestricted use. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F52), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocollects@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0028), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

CERTIFICATE OF DISPOSITION OF MATERIALS

LICENSEE NAME AND ADDRESS

LICENSE NUMBER

DOCKET NUMBER

LICENSE EXPIRATION DATE

A. LICENSE STATUS (Check the appropriate box)

- This license has expired. This license has not yet expired; please terminate it.

B. DISPOSAL OF RADIOACTIVE MATERIAL

(Check the appropriate boxes and complete as necessary. If additional space is needed, provide attachments)

The licensee, or any individual executing this certificate on behalf of the licensee, certifies that:

- 1. No radioactive materials have ever been procured or possessed by the licensee under this license.
- 2. All activities authorized by this license have ceased, and all radioactive materials procured and/or possessed by the licensee under this license number cited above have been disposed of in the following manner:
 - a. Transfer of radioactive materials to the licensee listed below:
 - b. Disposal of radioactive materials:
 - 1. Directly by the licensee:
 - 2. By licensed disposal site:
 - 3. By waste contractor:
 - c. All radioactive materials have been removed such that any remaining residual radioactivity is within the limits of 10 CFR Part 20, Subpart E, and is ALARA.

C. SURVEYS PERFORMED AND REPORTED

- 1. A radiation survey was conducted by the licensee. The survey confirms:
 - a. the absence of licensed radioactive materials
 - b. that any remaining residual radioactivity is within the limits of 10 CFR 20, Subpart E, and is ALARA.
- 2. A copy of the radiation survey results:
 - a. is attached; or b. is not attached (Provide explanation); or c. was forwarded to NRC on: _____ Date
- 3. A radiation survey is not required as only sealed sources were ever possessed under this license, and
 - a. The results of the latest leak test are attached; and/or
 - b. No leaking sources have ever been identified.

The person to be contacted regarding the information provided on this form:

NAME	TITLE	TELEPHONE (Include Area Code)	E-MAIL ADDRESS
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Mail all future correspondence regarding this license to:

C. CERTIFYING OFFICIAL

I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

PRINTED NAME AND TITLE	SIGNATURE	DATE
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WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECT. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.

ATTENTION SHIPPERS!

FREIGHT CHARGES ARE PREPAID ON THIS BILL OF LADING UNLESS MARKED COLLECT.



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STRAIGHT BILL OF LADING ORIGINAL - NOT NEGOTIABLE

Shipper No. 1

Page 1 of 1

CLYM ENVIRONMENTAL

Carrier No. 1

(Name of carrier)

(SCAC)

Date 10/20/04

On Collect on Delivery shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 4(b), Sec. 1.

TO: Consignee FAD AND DRUG ADMINISTRATION (MOD 1) Street 8301 MURKIRK RD. City LAUREL State MD Zip Code 20705

FROM: Shipper FAD AND DRUG ADMINISTRATION (FBS) Street 200 C ST. SW City WASHINGTON State DC Zip Code 20204 24 hr. Emergency Contact Tel. No. 888-299-2324 (CLYM)

Table with columns: No. of Units & Container Type, HM, BASIC DESCRIPTION, TOTAL QUANTITY, WEIGHT, RATE, CHARGES. Row 1: 5 GALW PAIL, X, RADIOACTIVE MATERIAL, EXCEPTED PACKAGE - LTD. QTY. OF MATERIAL, 7, UN - 2910, 4.2 (lbs), -

PLACARDS TENDERED: YES [] NO [X] Note - (1) Where the rate is dependent on value... (2) Where the applicable tariff provides... (3) Commodities requiring special or additional care... RECEIVED, subject to classifications and tariffs in effect on the date of the issue of this Bill of Lading...

SHIPPER FDA (FBS) CARRIER CLYM PER [Signature] DATE 10/20/04

ATTENTION SHIPPERS!

FREIGHT CHARGES ARE PREPAID ON THIS BILL OF LADING UNLESS MARKED COLLECT.

STRAIGHT BILL OF LADING

ORIGINAL NOT NEGOTIABLE

Shipper No. 1

Carrier No. 1

Page 1 of 1

CLYM ENVIRONMENTAL

(Name of carrier)

(SCAC)

Date 10/20/04

On Collect or Delivery shipments, the letters "COD" must appear before consignee's name or as otherwise provided in Item 430, Sec. 1.

TO: Consignee CLYM ENVIRONMENTAL
Street 5104 PEGASUS CT.
City FREDERICK State MO Zip Code 21704

FROM: Shipper FOOD AND DRUG ADMINISTRATION (FDA)
Street 200 C ST. SW
City WASHINGTON State DC Zip Code 20204
24 hr. Emergency Contact Tel. No. 888-289-2324 (CLYM)

Table with columns: No. of Units & Container Type, HM, BASIC DESCRIPTION, TOTAL QUANTITY, WEIGHT, RATE, CHARGES. Row 1: 5 GALLON PAIL, RADIOACTIVE MATERIAL, EXCEPTED PACKAGES - LTD. QTY. OF MATERIAL, 7, UN-2910, 10.6 (bs).

PLACARDS TENDERED: YES [] NO [x]

Note (1) Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property... (2) Where the applicable tariff provisions specify a limitation of the carrier's liability... (3) Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation.

REMIT C.O.D. TO: ADDRESS COD Amt: \$
COPIES: PREPAID [] COLLECT [] \$
TOTAL CHARGES: FREIGHT CHARGES
FREIGHT PREPAID (checked) when bill is checked []
Check box if charges are to be collect []

RECEIVED, subject to classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under contract agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

SHIPPER FDA (FDA)
PER [Signature]
CARRIER CLYM
PER [Signature]
DATE 10/20/04

CLYM ENVIRONMENTAL SERVICES, LLC
5104 PEGASUS CT. FREDERICK, MD 21704
Phone 301-694-6000 Fax 301-694-6797
QUALITY ASSURANCE PROGRAM
CHAIN OF CUSTODY

Material Location: Food and Drug Administration 200 C St. SW Washington, DC 20204

Material Type: Radium check source, DU chips

Date: 10/20/04

Time: 0500

Material Amount: N/A

Collector's Name: F. Watts

Field Information / Special Instruction: _____

Chain of Possession

1. [Signature] CLYM 10/20/04
Signature Company Date

2. _____
Signature Company Date

3. _____
Signature Company Date

Shipped By: [Signature] FDA 10/20/04
Signature Company Date

Shipped Via: _____
Mail Fed-Ex CLYM Other

Sample Received By: [Signature] FDA 10/20/04
Signature Company Date

FORM 540 Radiological Assistance, Consulting, and Engineering, LLC
UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST SHIPPING PAPER
 (Include Area Code)

1. EMERGENCY TELEPHONE NUMBER (800-424-9300)
 ORGANIZATION (800-424-9300)

2. IS THIS AN EXCLUSIVE USE SHIPMENT?
 YES NO

3. TOTAL NUMBER OF PACKAGES LISTED ON THIS MANIFEST: 6

4. DOES EPA REGULATED WASTE REQUIRING A MANIFEST ACCOMPANY THIS SHIPMENT?
 YES NO

5. SHIPPER - NAME AND FACILITY: Radiological Assistance, Consulting, and Engineering, LLC
 200 C Street SW, Washington, DC 20004

6. CARRIER - Name and Address: T-State Motor Transit Co., 4010 N. 10th St, Joplin, MO 64802

7. FORM 540 AND 541A (PAGE(S))
 FORM 540 AND 541A (PAGE(S))
 FORM 540 AND 541A (PAGE(S))

8. MANIFEST NUMBER (Include Area Code): 901-725-0890

9. SHIPMENT NUMBER (Include Area Code): 43092

10. CARRIER TELEPHONE NUMBER (Include Area Code): 414-885-5111

11. SHIPPER TELEPHONE NUMBER (Include Area Code): 202-462-8708

12. DOT LABEL - RADIOACTIVE

13. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number, and any additional information)

14. PHYSICAL AND CHEMICAL FORM

15. TRANSPORT INDEX

16. EPA MANIFEST NUMBER

17. EPA MANIFEST NUMBER

18. TOTAL PACKAGE ACTIVITY (mCi)

19. TOTAL WEIGHT (Use appropriate units)

20. NUMBER OF PACKAGES

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22. SOURCE #2

23. SOURCE #3

24. SOURCE #4

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814. SOURCE #794

815. SOURCE

APPROVED BY OMB NO. 3150-0184
 EXPIRES: 3/31/2004

Estimated burden per response to comply with this information collection request: 45 minutes. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimates to the Records Management Branch (7-4 ES), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by Internet e-mail to rlg@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NRC-10502, (7-50-8194), Office of Management and Budget, Washington, DC 20503. If a name used to impose an information collection does not display a currently valid OMB control number, the NRC may not contact or sponsor, and a person is not required to respond to, this information collection.

SHIPPER ID NUMBER		SHIPMENT NUMBER		SHIPPER NAME AND FACILITY		SHIPPER TELEPHONE NUMBER		SHIPPER ADDRESS		SHIPPER CITY AND STATE		SHIPPER ZIP CODE		SHIPPER CONTACT		SHIPPER FAX NUMBER	
DCA700002086		DCA700002086		PERMA-FIX OF FLORIDA 1940 NW 67th Place Gainesville, FL 32603		352-373-6666		Raymond White TELEPHONE		352-373-6666							
EPA ID NUMBER		EPA ID NUMBER		CARRIER - Name and Address		CARRIER TELEPHONE NUMBER		CARRIER CITY AND STATE		CARRIER ZIP CODE		CARRIER CONTACT		CARRIER FAX NUMBER		CARRIER DATE	
MOR00056347		MOR00056347		Tri-State Motor Transp. Co. PO Box 113 Joplin, MO 64802		800-248-8788		Cassie Gaidner								10/20/04	
TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST		TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST		TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST		TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST		TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST		TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST		TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST		TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST		TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST	
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1034		1034		1034		1034		1034		1034		1034		1034		1034	
U.S. GOVERNMENT OF TRANSPORTATION DESCRIPTION		U.S. GOVERNMENT OF TRANSPORTATION DESCRIPTION		U.S. GOVERNMENT OF TRANSPORTATION DESCRIPTION		U.S. GOVERNMENT OF TRANSPORTATION DESCRIPTION		U.S. GOVERNMENT OF TRANSPORTATION DESCRIPTION		U.S. GOVERNMENT OF TRANSPORTATION DESCRIPTION		U.S. GOVERNMENT OF TRANSPORTATION DESCRIPTION		U.S. GOVERNMENT OF TRANSPORTATION DESCRIPTION		U.S. GOVERNMENT OF TRANSPORTATION DESCRIPTION	
Radioactive material, excepted package-limited quantity of material, 7, UN 2910 (lead citrate) uranyl acetate solution		Radioactive material, excepted package-limited quantity of material, 7, UN 2910 (lead citrate) uranyl acetate solution		Radioactive material, excepted package-limited quantity of material, 7, UN 2910 (lead citrate) uranyl acetate solution		Radioactive material, excepted package-limited quantity of material, 7, UN 2910 (lead citrate) uranyl acetate solution		Radioactive material, excepted package-limited quantity of material, 7, UN 2910 (lead citrate) uranyl acetate solution		Radioactive material, excepted package-limited quantity of material, 7, UN 2910 (lead citrate) uranyl acetate solution		Radioactive material, excepted package-limited quantity of material, 7, UN 2910 (lead citrate) uranyl acetate solution		Radioactive material, excepted package-limited quantity of material, 7, UN 2910 (lead citrate) uranyl acetate solution		Radioactive material, excepted package-limited quantity of material, 7, UN 2910 (lead citrate) uranyl acetate solution	
DOT LABEL "RADIOACTIVE"		DOT LABEL "RADIOACTIVE"		DOT LABEL "RADIOACTIVE"		DOT LABEL "RADIOACTIVE"		DOT LABEL "RADIOACTIVE"		DOT LABEL "RADIOACTIVE"		DOT LABEL "RADIOACTIVE"		DOT LABEL "RADIOACTIVE"		DOT LABEL "RADIOACTIVE"	
NA		NA		NA		NA		NA		NA		NA		NA		NA	
TRANSPORT INDEX		TRANSPORT INDEX		TRANSPORT INDEX		TRANSPORT INDEX		TRANSPORT INDEX		TRANSPORT INDEX		TRANSPORT INDEX		TRANSPORT INDEX		TRANSPORT INDEX	
NA		NA		NA		NA		NA		NA		NA		NA		NA	
PHYSICAL AND CHEMICAL FORM		PHYSICAL AND CHEMICAL FORM		PHYSICAL AND CHEMICAL FORM		PHYSICAL AND CHEMICAL FORM		PHYSICAL AND CHEMICAL FORM		PHYSICAL AND CHEMICAL FORM		PHYSICAL AND CHEMICAL FORM		PHYSICAL AND CHEMICAL FORM		PHYSICAL AND CHEMICAL FORM	
Liquid lead citrate in UA solution		Liquid lead citrate in UA solution		Liquid lead citrate in UA solution		Liquid lead citrate in UA solution		Liquid lead citrate in UA solution		Liquid lead citrate in UA solution		Liquid lead citrate in UA solution		Liquid lead citrate in UA solution		Liquid lead citrate in UA solution	
INDIVIDUAL RADIOISOTOPES		INDIVIDUAL RADIOISOTOPES		INDIVIDUAL RADIOISOTOPES		INDIVIDUAL RADIOISOTOPES		INDIVIDUAL RADIOISOTOPES		INDIVIDUAL RADIOISOTOPES		INDIVIDUAL RADIOISOTOPES		INDIVIDUAL RADIOISOTOPES		INDIVIDUAL RADIOISOTOPES	
U-238		U-238		U-238		U-238		U-238		U-238		U-238		U-238		U-238	
TOTAL PACKAGE ACTIVITY (MBq)		TOTAL PACKAGE ACTIVITY (MBq)		TOTAL PACKAGE ACTIVITY (MBq)		TOTAL PACKAGE ACTIVITY (MBq)		TOTAL PACKAGE ACTIVITY (MBq)		TOTAL PACKAGE ACTIVITY (MBq)		TOTAL PACKAGE ACTIVITY (MBq)		TOTAL PACKAGE ACTIVITY (MBq)		TOTAL PACKAGE ACTIVITY (MBq)	
1.0878E+01		1.0878E+01		1.0878E+01		1.0878E+01		1.0878E+01		1.0878E+01		1.0878E+01		1.0878E+01		1.0878E+01	
USARSO CLASS		USARSO CLASS		USARSO CLASS		USARSO CLASS		USARSO CLASS		USARSO CLASS		USARSO CLASS		USARSO CLASS		USARSO CLASS	
NA		NA		NA		NA		NA		NA		NA		NA		NA	
TOTAL WEIGHT OR VOLUME (Use appropriate units)		TOTAL WEIGHT OR VOLUME (Use appropriate units)		TOTAL WEIGHT OR VOLUME (Use appropriate units)		TOTAL WEIGHT OR VOLUME (Use appropriate units)		TOTAL WEIGHT OR VOLUME (Use appropriate units)		TOTAL WEIGHT OR VOLUME (Use appropriate units)		TOTAL WEIGHT OR VOLUME (Use appropriate units)		TOTAL WEIGHT OR VOLUME (Use appropriate units)		TOTAL WEIGHT OR VOLUME (Use appropriate units)	
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AUTHORIZED SIGNATURE		AUTHORIZED SIGNATURE		AUTHORIZED SIGNATURE		AUTHORIZED SIGNATURE		AUTHORIZED SIGNATURE		AUTHORIZED SIGNATURE		AUTHORIZED SIGNATURE		AUTHORIZED SIGNATURE		AUTHORIZED SIGNATURE	
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TITLE		TITLE		TITLE		TITLE		TITLE		TITLE		TITLE		TITLE		TITLE	
Health Physicist		Health Physicist		Health Physicist		Health Physicist		Health Physicist		Health Physicist		Health Physicist		Health Physicist		Health Physicist	
DATE		DATE		DATE		DATE		DATE		DATE		DATE		DATE		DATE	
10/20/04		10/20/04		10/20/04		10/20/04		10/20/04		10/20/04		10/20/04		10/20/04		10/20/04	

FOR CONSIGNEE USE ONLY

APPROVED BY OMB NO. 3180-0186
 EXPIRES: 07/31/2004

Estimated waste per person to comply with the information collection request is 2 hours. This uniform manifest is required by NRC to meet reporting requirements of Federal and State Agencies for the safe transportation and disposal of low-level waste. Send comments regarding burden estimate to the Record Management Branch (CR-80), U.S. Nuclear Regulatory Commission, Washington, DC 20555. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

U.S. NUCLEAR REGULATORY COMMISSION
UNIFORM LOW-LEVEL RADIOACTIVE
WASTE MANIFEST
CONTAINER AND WASTE DESCRIPTION
 Additional Nuclear Regulatory Commission (NRC) Requirements for Control, Transfer and Disposal of Radioactive Waste

7-2001)

1. MANIFEST TOTALS

NET WASTE WEIGHT (lbs)	NET WASTE WEIGHT (gms)	NET WASTE WEIGHT (kg)	NET WASTE WEIGHT (oz)
0.0066	34.0194	34.0194	34.0194

2. MANIFEST NUMBER
 FB8-Florida 04-06

3. PAGE 1 OF 1 PAGE(S)

4. SHIPPER NAME
 Food and Drug Administration/FBB

DCS47000086
SHIPPER ID NUMBER

1. MANIFEST TOTALS

NET WASTE WEIGHT (lbs)	NET WASTE WEIGHT (gms)	NET WASTE WEIGHT (kg)	NET WASTE WEIGHT (oz)
0.0066	34.0194	34.0194	34.0194

2. MANIFEST NUMBER
 FB8-Florida 04-06

3. PAGE 1 OF 1 PAGE(S)

4. SHIPPER NAME
 Food and Drug Administration/FBB

DCS47000086
SHIPPER ID NUMBER

WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER

WASTE TYPE	WASTE DESCRIPTION	CHEMICAL FORM	CHEMICAL DESCRIPTION	WEIGHT	RADIOLOGICAL DESCRIPTION	CLASSIFICATION
1.0878E-01	TRITIUM	NP	NP	1.179	NP	NP
1.0878E-01	ALL NUCLEIDES	NP	NP	1.179	NP	NP
1.0878E-01	WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER	NP	NP	1.179	NP	NP

WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER

WASTE TYPE	WASTE DESCRIPTION	CHEMICAL FORM	CHEMICAL DESCRIPTION	WEIGHT	RADIOLOGICAL DESCRIPTION	CLASSIFICATION
1.0878E-01	TRITIUM	NP	NP	1.179	NP	NP
1.0878E-01	ALL NUCLEIDES	NP	NP	1.179	NP	NP
1.0878E-01	WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER	NP	NP	1.179	NP	NP

WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER

WASTE TYPE	WASTE DESCRIPTION	CHEMICAL FORM	CHEMICAL DESCRIPTION	WEIGHT	RADIOLOGICAL DESCRIPTION	CLASSIFICATION
1.0878E-01	TRITIUM	NP	NP	1.179	NP	NP
1.0878E-01	ALL NUCLEIDES	NP	NP	1.179	NP	NP
1.0878E-01	WASTE DESCRIPTION FOR EACH WASTE TYPE IN CONTAINER	NP	NP	1.179	NP	NP

Note 1: Container Description Codes. For containers the numerical code must be followed by "OP" overpacks

1. Wooden Box or Crate
2. Metal Box
3. Plastic Drum or Pail
4. Metal Tank or Liner
5. Concrete Tank or Liner
6. Polyethylene Tank or Liner
7. Fiberglass Tank or Liner
8. Other

Note 2: Waste Descriptor Codes. Choose up to three which predominate by volume.

20. Chemical
21. Inert/Asph
22. Soil
23. Gas
24. Aqueous Liquid
25. Filler Media
26. Mechanical Filter
27. EPA or Super Incinerator
28. PAH or Super Incinerator
29. Demolition Rubble
30. Capon (non-exchange Media)
31. Anion Ion-exchange Media
32. Mixed Bed Ion-exchange Media
33. Cation Ion-exchange Media
34. Organic Liquid (except oil)
35. Glassware or Labware
36. Beaded Sorbent/Device
37. Paint or Finishing
38. Ejectorate (Rubber/Plastic/Concrete)
39. Compatible Tank
40. Noncompatible Tank
41. Animal Carcass
42. Biological Material (except animal carcass)
43. Inert Solid (except oil)
44. Other
45. Other

Note 3: Waste Descriptor Codes. Choose up to three which predominate by volume.

64. Solid Sub
65. Solid Dn
66. Solid X
67. Floor Dn
68. Superfine
69. Chemical
70. Solid Dn
71. Chemical
72. Disposit HF200
73. Disposit HF500
74. Filtered
75. Acetate
76. Acetate
77. Acetate
78. Acetate
79. Acetate
80. Other
81. Concrete
82. Concrete
83. Concrete
84. Vinyl Ester Styrene
85. Other
86. Concrete
87. Concrete
88. Concrete
89. Concrete
90. Concrete
91. Concrete
92. Concrete
93. Concrete
94. Concrete
95. Concrete
96. Concrete
97. Concrete
98. Concrete
99. Concrete
100. Concrete

Note 4: Waste Descriptor Codes. Choose up to three which predominate by volume.

64. Solid Sub
65. Solid Dn
66. Solid X
67. Floor Dn
68. Superfine
69. Chemical
70. Solid Dn
71. Chemical
72. Disposit HF200
73. Disposit HF500
74. Filtered
75. Acetate
76. Acetate
77. Acetate
78. Acetate
79. Acetate
80. Other
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83. Concrete
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95. Concrete
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Note 5: Waste Descriptor Codes. Choose up to three which predominate by volume.

64. Solid Sub
65. Solid Dn
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70. Solid Dn
71. Chemical
72. Disposit HF200
73. Disposit HF500
74. Filtered
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76. Acetate
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Note 6: Waste Descriptor Codes. Choose up to three which predominate by volume.

64. Solid Sub
65. Solid Dn
66. Solid X
67. Floor Dn
68. Superfine
69. Chemical
70. Solid Dn
71. Chemical
72. Disposit HF200
73. Disposit HF500
74. Filtered
75. Acetate
76. Acetate
77. Acetate
78. Acetate
79. Acetate
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92. Concrete
93. Concrete
94. Concrete
95. Concrete
96. Concrete
97. Concrete
98. Concrete
99. Concrete
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Note 7: Waste Descriptor Codes. Choose up to three which predominate by volume.

64. Solid Sub
65. Solid Dn
66. Solid X
67. Floor Dn
68. Superfine
69. Chemical
70. Solid Dn
71. Chemical
72. Disposit HF200
73. Disposit HF500
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76. Acetate
77. Acetate
78. Acetate
79. Acetate
80. Other
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91. Concrete
92. Concrete
93. Concrete
94. Concrete
95. Concrete
96. Concrete
97. Concrete
98. Concrete
99. Concrete
100. Concrete

Note 8: Waste Descriptor Codes. Choose up to three which predominate by volume.

64. Solid Sub
65. Solid Dn
66. Solid X
67. Floor Dn
68. Superfine
69. Chemical
70. Solid Dn
71. Chemical
72. Disposit HF200
73. Disposit HF500
74. Filtered
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76. Acetate
77. Acetate
78. Acetate
79. Acetate
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92. Concrete
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94. Concrete
95. Concrete
96. Concrete
97. Concrete
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Note 9: Waste Descriptor Codes. Choose up to three which predominate by volume.

64. Solid Sub
65. Solid Dn
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68. Superfine
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70. Solid Dn
71. Chemical
72. Disposit HF200
73. Disposit HF500
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76. Acetate
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79. Acetate
80. Other
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94. Concrete
95. Concrete
96. Concrete
97. Concrete
98. Concrete
99. Concrete
100. Concrete

Note 10: Waste Descriptor Codes. Choose up to three which predominate by volume.

64. Solid Sub
65. Solid Dn
66. Solid X
67. Floor Dn
68. Superfine
69. Chemical
70. Solid Dn
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72. Disposit HF200
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94. Concrete
95. Concrete
96. Concrete
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98. Concrete
99. Concrete
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Note 11: Waste Descriptor Codes. Choose up to three which predominate by volume.

64. Solid Sub
65. Solid Dn
66. Solid X
67. Floor Dn
68. Superfine
69. Chemical
70. Solid Dn
71. Chemical
72. Disposit HF200
73. Disposit HF500
74. Filtered
75. Acetate
76. Acetate
77. Acetate
78. Acetate
79. Acetate
80. Other
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82. Concrete
83. Concrete
84. Vinyl Ester Styrene
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91. Concrete
92. Concrete
93. Concrete
94. Concrete
95. Concrete
96. Concrete
97. Concrete
98. Concrete
99. Concrete
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Note 12: Waste Descriptor Codes. Choose up to three which predominate by volume.

64. Solid Sub
65. Solid Dn
66. Solid X
67. Floor Dn
68. Superfine
69. Chemical
70. Solid Dn
71. Chemical
72. Disposit HF200
73. Disposit HF500
74. Filtered
75. Acetate
76. Acetate
77. Acetate
78. Acetate
79. Acetate
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Note 13: Waste Descriptor Codes. Choose up to three which predominate by volume.

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94. Concrete
95. Concrete
96. Concrete
97. Concrete
98. Concrete
99. Concrete
100. Concrete

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. <u>DCB47000000001020</u>	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address Food and Drug Administration 200 C Street Washington, DC 20204		6. US EPA ID Number		A. State Manifest Document Number	
4. Generator's Phone (202) 205-4266		8. US EPA ID Number		B. State Generator's ID	
5. Transporter 1 Company Name Tri-State Motor Transit, Co		10. US EPA ID Number		C. State Transporter's ID	
7. Transporter 2 Company Name		12. Containers		D. Transporter's Phone	
9. Designated Facility Name and Site Address Perma-Fix of Florida 1940 67th Place Gainesville, FL 32653		13. Total Quantity		E. State Transporter's ID (800) 248-8768	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		14. Unit Wt/Vol		F. Transporter's Phone	
a. <input checked="" type="checkbox"/> Waste Radioactive material, excepted package-limited quantity of material (Contains lead citrate), 7, UN2910		15. Special Handling Instructions and Additional Information		G. State Facility's ID	
b.		a) ERG#: 161 Profile# R3 4630 24 Hour Emergency Phone 800-424-9300 (Chemtec)		H. Facility's Phone (800) 1-69480	
c.		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.		I. Additional Descriptions for Materials Listed Above	
d.		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 or 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.		K. Handling Codes for Wastes Listed Above	
J. Additional Descriptions for Materials Listed Above		Printed/Typed Name <u>Bath Reed</u>		Signature <u>Bath Reed</u>	
15. Special Handling Instructions and Additional Information		17. Transporter 1 Acknowledgement of Receipt of Materials		Month Day Year <u>11 02 10</u>	
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.		Printed/Typed Name <u>Marvin Washburn</u>		Signature <u>Marvin Washburn</u>	
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 or 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.		18. Transporter 2 Acknowledgement of Receipt of Materials		Month Day Year <u>11 02 10</u>	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature	
18. Transporter 2 Acknowledgement of Receipt of Materials		19. Discrepancy Indication Space		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.		Month Day Year	
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	
21. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.		Month Day Year		Month Day Year	



ORIGINAL-RETURN TO GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address 1001 4th Street 210 1st Street Washington, DC 20004				A. State Manifest Document Number	
4. Generator's Phone ()				B. State Generator's ID	
5. Transporter 1 Company Name		6. US EPA ID Number		C. State Transporter's ID	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone	
9. Designated Facility Name and Site Address Gene Ely Ind Facility 1749 87th Ave Gainesville, FL 32657		10. US EPA ID Number		E. State Transporter's ID (800) 298-8768	
				F. Transporter's Phone	
				G. State Facility's ID	
				H. Facility's Phone (800) 169480	
11. US DOT Description (Including Proper Shipping Name, Hazard Class and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol
a. <input checked="" type="checkbox"/> Large Radiactive Material, excepted (shaded limited quantity of material) (Plutonium lead battery) (9000)		No.	Type		8 19 5 Waste No.
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above	
L 900				B	
15. Special Handling Instructions and Additional Information 41 ERG 161 Revised 8/2 9630 24 Hour Emergency Phone (800) 424-9300 (CHEMICAL)					
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 Beth Reed		Signature Beth Reed		Month Day Year 11 02 04	
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature	
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed/Typed Name		Signature	
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	



GENERATOR COPY