

Final

**Remedial Action Report
for Soil and Dry Sediment
at RVAAP-01 Ramsdell Quarry Landfill**

**Ravenna Army Ammunition Plant
Portage and Trumbull Counties, Ohio**

**GSA Contract No. GS-10F-0076J
Delivery Order No. W912QR-12-F-0020**

Prepared for:



**US Army Corps
of Engineers®**

**United States Army Corps of Engineers
Louisville District**

Prepared by:



**Leidos Engineering of Ohio, Inc.
8866 Commons Boulevard
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January 30, 2015

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14. ABSTRACT This remedial action report summarizes the field activities for implementing Alternative 8 in accordance with the approved Record of Decision Amendment for Soil and Dry Sediment at the RVAAP-01 Ramsdell Quarry Landfill. This report documents the fulfillment of the selected remedy for soil and dry sediment at RQL, as codified in the Record of Decision Amendment. Fulfillment of this selected remedy was executed by installing a perimeter fence and signage and cleanup of surficial asbestos-containing material (ACM) within the former quarry at RVAAP-01 Ramsdell Quarry Landfill, resulting in CERCLA closure for soil and dry sediment at the AOC for Restricted Access land use.												
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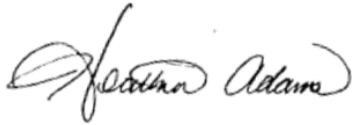
Leidos has completed the Remedial Action Report for Soil and Dry Sediment at RVAAP-01 Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Portage and Trumbull Counties, Ohio. Notice is hereby given that an independent technical review has been conducted that is appropriate to the level of risk and complexity inherent in the project. During the independent technical review, compliance with established policy principles and procedures, utilizing justified and valid assumptions, was verified. This included review of data quality objectives; technical assumptions; methods, procedures, and materials to be used; the appropriateness of data used and level of data obtained; and reasonableness of the results, including whether the product meets the customer's needs consistent with law and existing United States Army Corps of Engineers (USACE) policy.



Jed Thomas, PE
Study/Design Team Leader

1/30/2015

Date



Heather Adams
Independent Technical Review Team Leader

1/30/2015

Date

Significant concerns and the explanation of the resolution are as follows:

Internal Leidos Independent Technical Review was conducted on this document. Internal Leidos Independent Technical Review comments are recorded on a Document Review Record per Leidos quality assurance procedure QAAP 3.1. This Document Review Record is maintained in the project file. Changes to the report addressing the comments have been verified by the Study/Design Team Leader.

As noted above, all concerns resulting from independent technical review of the project have been considered.



Lisa Jones-Bateman
Senior Program Manager

1/30/2015

Date



John R. Kasich, Governor
Mary Taylor, Lt. Governor
Craig W. Butler, Director

January 16, 2015

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Re: US Army Ravenna Ammunition Plant RVAAP
Remediation Response
Project Records
Remedial Response
Portage County
267000859

Subject: Approval of the "Draft Remedial Action Report at RVAAP-01 Ramsdell Quarry Landfill, Former Ravenna Army Ammunition Plant, Ravenna, Ohio,"
Dated November 12, 2014 (Work Activity No. 267-000859-130)

Dear Mr. Leeper:

The Ohio Environmental Protection Agency (Ohio EPA), Northeast District Office (NEDO), Division of Environmental Response and Revitalization (DERR) has received and reviewed the document entitled, "*Draft Remedial Action Report at RVAAP-01 Ramsdell Quarry Landfill, Former Ravenna Army Ammunition Plant, Ravenna, Ohio,*" dated November 12, 2014. This document, received by Ohio EPA's NEDO on November 14, 2014, was prepared by Leidos Engineering of Ohio, Inc.

Ohio has reviewed this documentation and has found no significant deficiencies. Please provide a revised document or replacement pages within 30 days, in accordance with the Findings and Orders for RVAAP.

If you have any questions or concerns, please do not hesitate to contact me at (330) 963-1249.

Sincerely,

 - FOR -

Andrew C. Kocher
Site Coordinator
Division of Environmental Response and Revitalization


ACK/nvr

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**Remedial Action Report
for Soil and Dry Sediment
at RVAAP-01 Ramsdell Quarry Landfill**
Volume One - Main Report and Appendices
Version 1.0

Ravenna Army Ammunition Plant
Portage and Trumbull Counties, Ohio

GSA Contract No. GS-10F-0076J
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Prepared for:
U.S. Army Corps of Engineers
600 Martin Luther King, Jr. Place
Louisville, Kentucky 40202

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8866 Commons Boulevard
Twinsburg, Ohio 44087

January 30, 2015

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OHARNG = Ohio Army National Guard.

Ohio EPA DERR = Ohio Environmental Protection Agency Division of Environmental Response and Revitalization.

Ohio EPA CO = Ohio Environmental Protection Agency Central Office.

REIMS = Ravenna Environmental Information Management System.

USACE = United States Army Corps of Engineers.

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ACRONYMS AND ABBREVIATIONS

ACM	Asbestos-Containing Material
ACWM	Asbestos-Containing Waste Material
AOC	Area Of Concern
ARNG	Army National Guard
bgs	Below Ground Surface
BMP	Best Management Practice
CERCLA	Comprehensive Environmental Response, Compensation, and Liability Act
CERCLIS	Comprehensive Environmental Response, Compensation and Liability Information System
CFR	Code of Federal Regulations
COC	Chemical of Concern
CUG	Cleanup Goal
DoD	Department of Defense
ESS	Explosives Safety Submission
FBQ	Fuze and Booster Quarry
FCR	Field Change Request
FS	Feasibility Study
HHRA	Human Health Risk Assessment
LUC	Land Use Control
LUCRD	Land Use Control Remedial Design
MD	Munitions Debris
MEC	Munitions and Explosives of Concern
NCP	National Oil and Hazardous Substances Pollution Contingency Plan
NESHAP	National Emission Standards for Hazardous Air Pollutants
O&M	Operations And Maintenance
OAC	Ohio Administrative Code
OHARNG	Ohio Army National Guard
Ohio EPA	Ohio Environmental Protection Agency
OHPO	Ohio Historic Preservation Office
ORAM	Ohio Rapid Assessment Method
PCB	Polychlorinated Biphenyl
PIKA	Pika International, Inc.
RAR	Remedial Action Report
RD	Remedial Design
ROD	Record of Decision
RQL	Ramsdell Quarry Landfill
RVAAP	Ravenna Army Ammunition Plant
SVOC	Semi-volatile Organic Compounds
USACE	U.S. Army Corps of Engineers
USFWS	United States Fish and Wildlife Service
UXO	Unexploded Ordnance
VOC	Volatile Organic Compound

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1.0 INTRODUCTION

Leidos (formerly SAIC) has been contracted by the U.S. Army Corps of Engineers (USACE), Louisville District, to provide environmental services to attain Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) regulatory closure at the Ramsdell Quarry Landfill (RQL) area of concern (AOC) within the former Ravenna Army Ammunition Plant (RVAAP) in Portage and Trumbull counties, Ohio.

This work is being performed in accordance with U.S. General Services Administration Environmental Advisory Services Contract GS-10-F-0076J, Delivery Order W912QR-12-F-0020. In addition, planning and performance of all work is being conducted in accordance with the requirements of the Ohio Environmental Protection Agency (Ohio EPA) Director's Final Findings and Orders dated June 10, 2004 (Ohio EPA 2004).

1.1 PURPOSE

The purpose of this Remedial Action Report (RAR) is to document the fulfillment of the selected remedy for soil and dry sediment at RQL. The selected remedy for RQL was codified in the *Record of Decision for Soil and Dry Sediment for the RVAAP-01 Ramsdell Quarry Landfill* (USACE 2009) [herein referred to as the Original Record of Decision (ROD)] and amended in the *Record of Decision Amendment for Soil and Dry Sediment at the RVAAP-01 Ramsdell Quarry Landfill* (USACE 2013) (herein referred to as the ROD Amendment). Fulfillment of this selected remedy was executed in accordance with the *Remedial Design for the RVAAP-01 Ramsdell Quarry Landfill* (USACE 2010a) [herein referred to as the Original Remedial Design (RD)] and the *Remedial Design for Soil and Dry Sediment at the RVAAP-01 Ramsdell Quarry Landfill* (USACE 2014) (herein referred to as the RQL RD).

The Army began soil removal activities in June 2010 in accordance with the Original ROD. The Original ROD (USACE 2009) and Original RD (USACE 2010a) anticipated removal of non-hazardous soil contaminated with low levels of polycyclic aromatic hydrocarbons (PAHs). Asbestos-containing materials (ACM) were encountered during soil removal activities, resulting in a change of waste type. This change in waste type was considered a post ROD “fundamental change” (i.e., change to the basic features of the remedy selected in a ROD with respect to scope, performance, or cost). The Army and Ohio EPA re-evaluated the remedy as outlined in National Oil and Hazardous Substances Pollution Contingency Plan (NCP) Section 300.435(c)(2)(ii)(A) through (H) and completed the ROD Amendment (USACE 2013) and RQL RD (USACE 2014). The ROD Amendment and RQL RD specified the removal of ACM exposed at the ground surface, installation of fencing and signage, and land use controls (LUCs). This RAR presents the summary and documents the completion of remedial activities under the Original ROD (USACE 2009) and the ROD Amendment (USACE 2013).

1.2 REPORT ORGANIZATION

This RAR is organized as follows:

- Section 1: Introduction
- Section 2: Facility and Site Description
- Section 3: 2010 Soil Removal Activities
- Section 4: Engineering Evaluation and ROD Amendment
- Section 5: 2014 Fence Installation and ACM Cleanup Activities
- Section 6: Conclusions
- Section 7: References
- Appendix A: 2010 Soil Removal Activity Documentation
- Appendix B: 2014 Fence Installation and ACM Cleanup Documentation
- Appendix C: Land Use Control Documents

2.0 FACILITY AND SITE DESCRIPTION

2.1 FACILITY DESCRIPTION

When the RVAAP restoration program began in 1989, the facility [Comprehensive Environmental Response, Compensation and Liability Information System (CERCLIS) Identification Number OH5210020736] was identified as a 21,419-acre installation. The Ohio Army National Guard (OHARNG) surveyed the property over a two-year period (2002 and 2003), and the total acreage of the property was found to be 21,683 acres. Administrative accountability for all acreage at the facility has been transferred to the Army National Guard (ARNG) with licensure to OHARNG for use as a military training site, now known as the Camp Ravenna Joint Military Training Center (Camp Ravenna). The entire 21,683-acre parcel was an industrial facility used for load, assemble, and pack operations for munitions when RVAAP was operational (Camp Ravenna did not exist at that time). The RVAAP restoration program encompasses investigation and cleanup of past activities over the entire 21,683 acres of the former RVAAP.

Currently, Camp Ravenna is a federally owned facility located in east-central Portage County and southwestern Trumbull County, Ohio approximately 3 miles (4.8 km) east-northeast of Ravenna and approximately 1 mile (1.6 km) northwest of the city of Newton Falls. Camp Ravenna is a parcel of property approximately 11 miles (17.7 km) long and 3.5 miles (5.6 km) wide bounded by State Route 5, the Michael J. Kirwan Reservoir, and the CSX System Railroad on the south; Garret, McCormick, and Berry roads on the west; the Norfolk Southern Railroad on the north; and State Route 534 on the east (Figures 2-1 and 2-2). Camp Ravenna is surrounded by several communities: Windham on the north, Garrettsville 6 miles (9.6 km) to the northwest, Newton Falls 1 mile (1.6 km) to the southeast, Charlestown to the southwest, and Wayland 3 miles (4.8 km) to the south.

2.2 RAMSDELL QUARRY LANDFILL DESCRIPTION AND HISTORY

The following sections present the site description and history of RQL.

2.2.1 Site Description

RQL encompasses approximately 14 acres in the northeastern portion of Camp Ravenna. RQL includes old-field communities with patches of forests and grasslands. The land surface in a large portion of the AOC slopes into a former quarry, which occupies most of the AOC. The quarry bottom is about 40 ft below the surrounding area. Much of the original soil at RQL was removed during the former quarry operations conducted at the site.

Surface water runoff collects in an isolated wetland in the bottom of the former quarry. The water in the quarry bottom appears to be hydraulically connected to groundwater, as the water levels in the quarry bottom appear to correlate with those in neighboring monitoring wells. When water is present in the wetland, the water depth is usually less than 4 ft. There is no surface water drainage outlet from

the quarry. The drainage ways and ditch lines outside of the quarry, located along access roads and the rail line in the southern part of the AOC, only contain water during rain events.

2.2.2 Site History

RQL was initially a stone quarry that operated until 1941. During operations, the quarry was excavated 30 to 40 ft below existing grade. The excavated sandstone and quartzite pebble conglomerate was used for road and construction ballast. From 1946 to the 1950s, the bottom of the quarry was used to burn waste explosives from Load Line 1. Approximately 18,000 500 lb (225-kg) incendiary or napalm bombs were reported to have been burned, and liquid residues from annealing operations were disposed in the quarry.

Between 1941 and 1989, the western and southern sections of the abandoned quarry were used for landfill operations. No information is available regarding landfill disposal activities from 1941 to 1976, and no information is available on other activities at the quarry from the 1950s to 1976. Only non-hazardous solid waste was deposited in RQL from 1976 until it was closed in 1989. In 1978, a portion of the abandoned quarry was permitted as a sanitary landfill by the state of Ohio. The sanitary landfill was closed in 1990 under state of Ohio solid waste regulations. A clay cap was placed on the former permitted landfill area covering approximately four acres of the AOC. As required by Ohio EPA Solid Waste Regulations, the landfill is currently undergoing 30-year post closure maintenance until the year 2020.

2.3 ANTICIPATED FUTURE LAND USE

Camp Ravenna will be used for military training. Due to residual contamination and asbestos at RQL, the future use at the AOC will be Restricted Access.

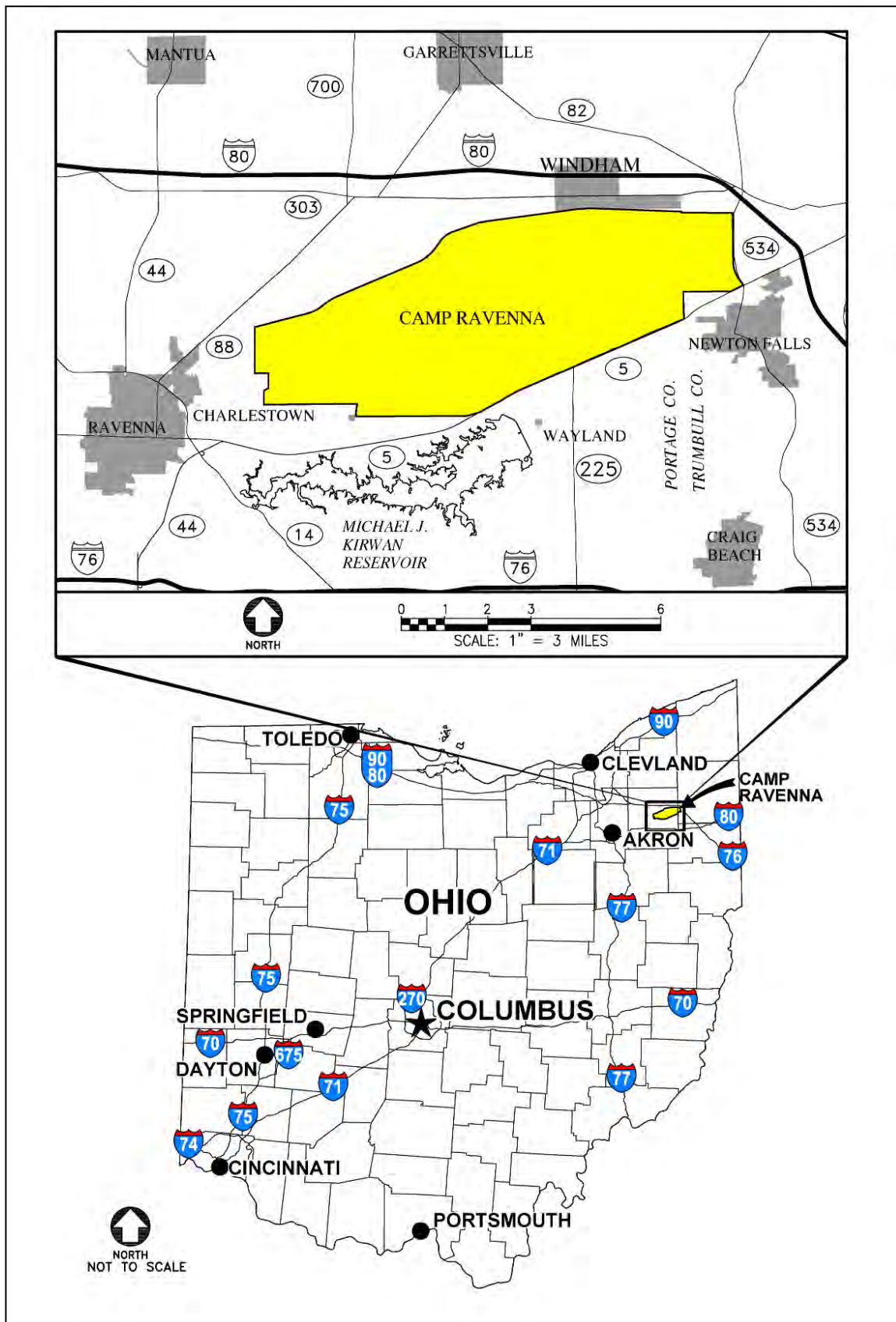


Figure 2-1. General Location and Orientation of Camp Ravenna

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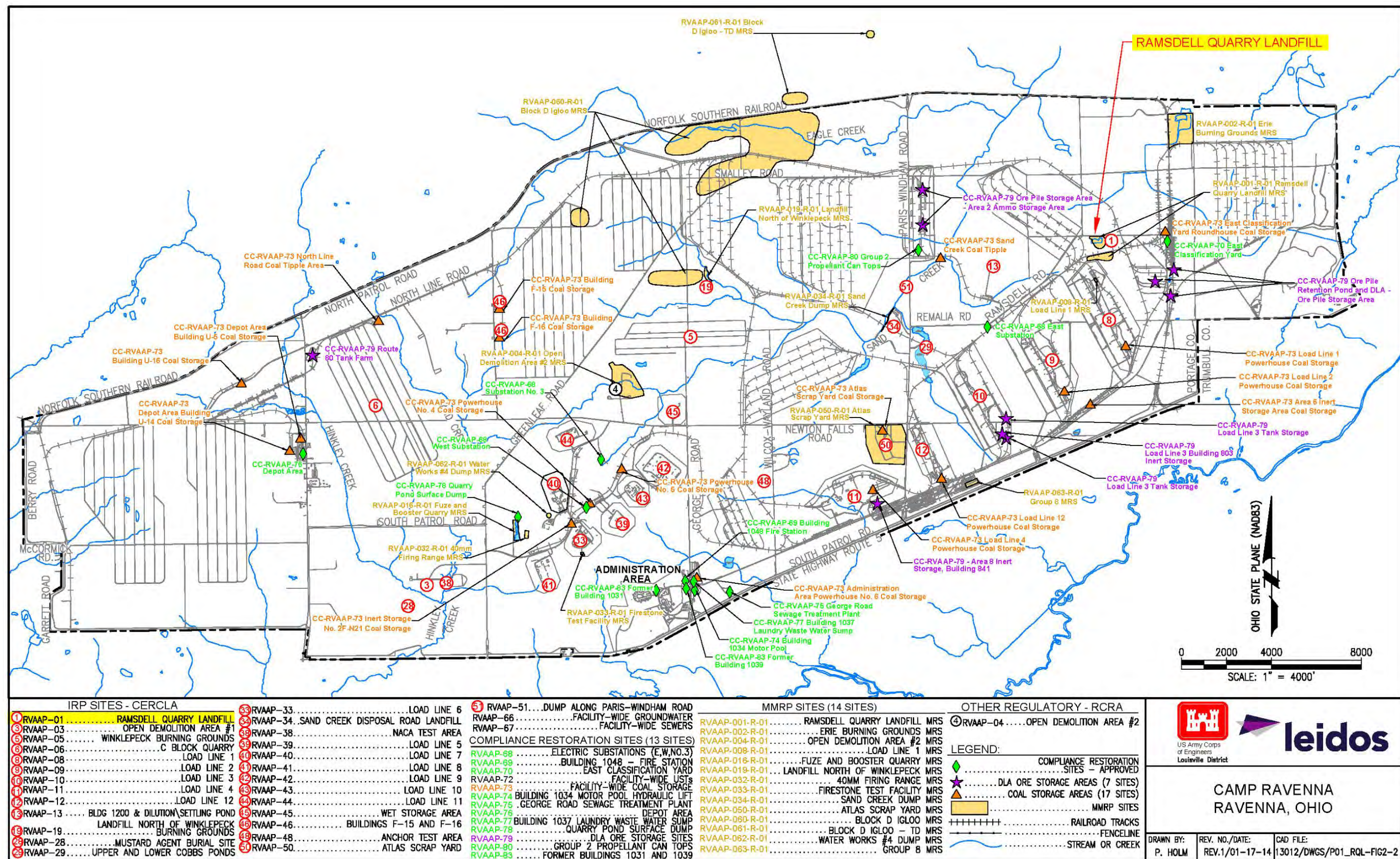


Figure 2-2. Location of AOCs at Camp Ravenna

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3.0 2010 SOIL REMOVAL ACTIVITIES

The *Feasibility Study for Ramsdell Quarry (RVAAP-01)* (USACE 2006) [herein referred to as the RQL Feasibility Study (FS)] identified benz(a)anthracene, benzo(a)pyrene, benzo(b)fluoranthene, dibenz(a,h)anthracene, and indeno(1,2,3-cd)pyrene as soil chemicals of concern (COCs) in the human health risk assessment (HHRA). This HHRA estimated that the risks associated with dermal exposure to soil and dry sediment in some areas of the quarry bottom by a Security Guard/Maintenance Worker visiting the site exceeded the Ohio EPA risk range and risk-based cleanup goals (CUGs). The FS evaluated remedial alternatives to address COCs exceeding CUGs and recommended soil excavation, off-site disposal, and LUCs to mitigate risks. In March 2009, the Army published the Original ROD documenting the selection of Alternative 3: Excavation and Off-site Disposal (Security Guard/Maintenance Worker Land Use) to remediate soil and dry sediment at the AOC. In June 2010, the Original RD was issued, presenting the plan and specifications for implementing Alternative 3. This section describes the activities conducted in accordance with the Original RD.

3.1 NOTIFICATIONS AND CLEARANCES

3.1.1 USFWS and OHPO Notifications and Approvals

On October 6, 2009, a letter was submitted to the United States Fish and Wildlife Service (USFWS) requesting concurrence of the findings and determination of no effect for implementing RQL soil removal activities. On October 14, 2009, the USFWS provided a response concurring with these findings and determination and stated no objection to the project.

On October 6, 2009, a Section 106 Review – Project Summary Form was submitted to the Ohio Historic Preservation Office (OHPO) that indicated no historic properties would be affected by the proposed project. Upon review of this form, the OHPO concurred with this assessment.

Copies of the notification letters and responses from these agencies are provided in Appendix A.1 and A.2.

3.1.2 MEC Investigation

On April 20-21, 2010, USACE, Rock Island District deployed two unexploded ordnance (UXO) technicians to conduct a magnetometer sweep of anticipated soil removal areas to determine the likelihood of munitions and explosives of concern (MEC) being present in soils. The entire area was examined for the presence of any MEC on the ground surface. During the course of the investigation, no MEC was encountered. Munitions Debris (MD) was encountered in the form of plastic shipping containers for 81mm mortar projectiles, rotating band protective rings for 155mm projectiles, and remains of several AN-M76 500-lb Incendiary Bombs.

The MEC Investigation Report, provided in Appendix A.3, determined that there is a low probability of encountering MEC in regards to conducting contaminated soil removal activities; because when burning operations were conducted at RQL, the area was exposed bedrock and anything not consumed would have been readily apparent. The AN-M76 500-lb Incendiary Bombs would not have had an igniter present, and the filler was 180 lb of Oil Gel PT-1. This is a mixture containing rubber, magnesium powder, fuel oil, a thickening agent, and a small amount of gasoline. Upon completing the report, the RVAAP Facility Manager supported the conclusion that the probability of encountering MEC is low and only UXO construction support is needed for the soil removal action.

3.1.3 Utility Clearance

On June 16, 2010, the operations and maintenance (O&M) contractor at RVAAP granted a utility clearance for the removal action. Documentation of the utility clearance is provided in Appendix A.4.

3.2 SITE PREPARATION ACTIVITIES

3.2.1 Herbicide Application

The Original RD identified the areas in which soil remediation was planned as an isolated palustrine emergent wetland, which was then classified as a Modified Category 2 wetland using the Ohio Rapid Assessment Method (ORAM) during a 2008 wetland delineation (EnviroScience 2008). The Original RD presented the Ohio EPA general conditions, pre-construction herbicide application, mitigation requirements, mitigation timing, and performance criteria for the isolated wetland.

From June 10-11, 2010, equipment movement areas and soil removal areas within the wetland were treated with an invasive weed control herbicide (Rodeo®) by a licensed applicator in accordance with the Pre-Construction Herbicide Application requirements specified in the Original RD. The Ohio EPA Aquatic Herbicide Notification Form was required since, per Ohio Administrative Code (OAC) 3745-1-01(E), the pesticide application was performed near a water of the state. That notification form and the OHARNG Daily Pest Control Summary Sheets are also presented in Appendix A.5.

3.2.2 Stormwater Controls

On June 22, 2010, the remedial Subcontractor (Toltest, Inc.) mobilized to RQL and initiated site setup, installation of erosion controls, brush clearing, and installation of access roads to conduct soil removal activities. Silt fencing was placed around the disturbed areas at the equipment staging area, and silt fencing and straw wattles were placed downgradient of the equipment staging area to prevent silt from traversing from the equipment staging area to the quarry bottom. These stormwater controls were inspected daily and repaired as needed.

3.2.3 Stockpiling Area and Equipment Staging Area

The Subcontractor installed an equipment staging area to provide construction support, store a portable water tank, and stage excavated soil to be loaded in on-road haul trucks. The first 6 in of topsoil was removed, the surface was leveled, a geotextile fabric was placed over the ground surface, and courses of crushed stone were placed, graded, and compacted to establish the equipment staging area.

Adjacent to the equipment staging area, a soil stockpiling area was constructed to stage soil excavated from the quarry bottom prior to being loaded into on-road haul trucks. This area was bound by an earthen berm to collect any water that may have contacted contaminated soil. Soil placed in the stockpiling area was covered during periods of inactivity. Accordingly, no contact water was generated that needed containerization.

3.2.4 Rock Construction Entrance

Rock construction entrances were installed at the enter/exit point of the equipment staging area, as well as the enter/exit location to the access road leading toward the quarry bottom near monitoring well RQLmw-010. A layer of geotextile fabric was placed under the rock construction entrance and Number 2 (No. 2) crushed stone was placed to facilitate the ingress/loading/egress of on-road haul trucks onto roadways at RVAAP. The Subcontractor maintained the rock construction entrance throughout the project, ensuring it was free of mud and no mud was tracked onto the roadways.

3.2.5 Excavation Water Management

A portable water storage tank was staged on the equipment staging area in the event that excavation water was generated. The management of excavated areas, including covering excavated areas at the end of the day or during times of inclement weather, eliminated any generation of excavation water throughout the execution of the soil removal activities.



Photograph 3-1. Installation of Equipment Staging Area



Photograph 3-2. Portable Water Storage Tank

3.2.6 Backfill Sampling

On June 1, 2010, Ohio EPA agreed that the commercial backfill soil source approved for the remedial action at the Fuze and Booster Quarry Landfill (FBQ) could be used for the remedial action at RQL. As stated in the *Remedial Action Report for the RVAAP-16 Fuze and Booster Quarry Landfill/Ponds* (USACE 2010b), only 55 cubic yards of this soil was used during the FBQ Remedial Action. Per Ohio EPA guidance, a sample is required for every 4,000 cubic yards of backfill soil used. At the onset of the project, it was not anticipated that a total of 4,000 cubic yards of backfill soil would be used between the remedial actions at RQL, LL12, and FBQ.

On June 30, 2010, field staff sampled potential backfill sources at Charlestown Sand and Gravel. Samples RQL-QC-1095-QC and RQL-QC-10960-QC were collected as a precaution in the event that 4,000 cubic yards of the previously sampled backfill material was used and more would be needed. In addition, a sample of suitable topsoil material was collected for wetland restoration.

The sample results indicated the following:

- 1) All metal concentrations were below either the surface or subsurface background values or below laboratory reporting limits.
- 2) All pesticide and polychlorinated biphenyl (PCB) concentrations were not detected.
- 3) All semi-volatile organic compound (SVOC), volatile organic compound (VOC), explosive, and propellant concentrations were either not detected or below laboratory reporting limits.

Ohio EPA provided approval to use this material on July 26, 2010. The approval notifications and backfill soil sample results are presented in Appendix A.6.

3.3 SOIL REMOVAL ACTIVITIES

3.3.1 Initial Soil Removal Activities

On June 30, 2010, soil removal activities in the quarry bottom commenced. A Terex TXC 300 was used to excavate PAH-contaminated soil, starting in the northeast corner of RQL. Soil was loaded into an IC100 off-road haul truck for transport to the stockpiling area. During the early soil excavation activities, construction debris with ACM was encountered. Accordingly, soil excavation activities were ceased and the Army and Ohio EPA were notified. The excavation area was covered with plastic sheeting that was weighed down to prevent impacts from rain or high winds.



Photograph 3-3. Initial Excavation at Northeast Corner of Quarry Bottom



Photograph 3-4. Loading Off-Road Haul Truck

3.3.2 Encountering Asbestos-Containing Material

On June 30, 2010, the Army and Ohio EPA were notified that a large amount of construction and miscellaneous debris was encountered between the surface layer and bedrock [approximately 1-2 ft below ground surface (bgs)]. Some debris (e.g., transite and roofing materials) was suspected to contain asbestos. The suspect materials were sampled and sent for analysis. The analytical results revealed that the transite and roofing materials within the excavation were ACM, containing greater than 1% asbestos. Table 3-1 presents the results from the ACM samples taken from the construction debris.

In addition, at the request of the RVAAP Facility Manager, new samples were collected to re-characterize the contaminated soil. Table 3-2 presents the results of ACM in soil. The characterization results indicated the soil was still considered non-hazardous waste; however, the presence of ACM in the soil required the material to be handled and disposed as non-hazardous, asbestos-containing waste. Results of the sampling activities are presented in Appendix A.7.



Photograph 3-5. Encountered Construction Debris



Photograph 3-6. Soil Containing Construction Debris

Table 3-1. ACM Sample Results of Construction Debris

Sample ID	Description	Asbestos Content
AOG010576-1	Gray Transite	30% Chrysotile
AOG010576-2	Gray Transite	30% Chrysotile
AOG010576-3	Black Roofing Material	15% Chrysotile
AOG010576-4	Black Roofing Material	15% Chrysotile
AOG010576-5	Red Semi-Fibrous Material (Board)	ND
AOG010576-6	Gray Transite	30% Chrysotile

ND = Not Detected.

Table 3-2. ACM Sample Results of Soil

Sample ID	Description	Asbestos Content
RQL-043-1103-SO	Brown Soil	ND
RQL-043-1105-SO	Brown Soil	ND
RQL-043-1106-SO	Brown Soil	ND

ND = Not Detected.

After sample collection, the excavation equipment was decontaminated, and the Subcontractor demobilized from the site on July 8, 2010, while the path forward for the site was being reassessed.

3.4 MEETING WITH OHIO EPA NESHP

On July 7, 2010, the Ohio EPA Asbestos National Emission Standards for Hazardous Air Pollutants (NESHP) Coordinator visited the site. Ohio EPA determined during this site walk that soil containing ACM must be handled and disposed as friable ACM. The Ohio EPA NESHP Coordinator stated that:

“...any disturbed asbestos containing waste (ACWM), including debris considered to be asbestos contaminated, must be handled/disposed according to Ohio asbestos emission control rules at OAC 3745-20. Remove all visible ACWM/debris from the excavation and then sample the soil for any asbestos. A sampling plan must be submitted to Ohio EPA for review/approval. Cleanup levels are supposed to be to background levels.”

As a result, it was required that 1) all disturbed and unearthed material containing ACM must be disposed, 2) excavation must continue until the lateral extents do not contain ACM, and 3) an approved sampling plan must be implemented to confirm the cleanup of ACM. In addition, the Army and Ohio EPA agreed to evaluate options for an amended remedy at RQL. After the removal of visible ACM and debris from the existing excavation area, the RVAAP stakeholders agreed to evaluate remedial options, as presented in the *Engineering Evaluation for Soil and Dry Sediment at RVAAP-01 Ramsdell Quarry Landfill* (USACE 2011) (herein referred to as the Engineering Evaluation). These remedial options included Excavation with Off-site Disposal as ACM, Capping, and Fencing.

3.5 ACM REMOVAL ACTIVITIES

3.5.1 Soil Asbestos Removal Plan and Accident Prevention Plan

The remedial Subcontractor developed a Soil Asbestos Removal Plan for removing ACM-contaminated soil. This plan specified the equipment and personnel to be utilized during removal activities, applicable rules and regulations, requirements for marking the regulated area, specifications for the decontamination unit, and personnel protective equipment (PPE) required for removing and handling the asbestos-containing soil. The Soil Asbestos Removal Plan is provided in Appendix A.8.

In addition, the remedial Subcontractor developed an Accident Prevention Plan and Site Safety and Health Plan. These documents outlined the roles and responsibilities, required training, procedure for incident reporting, and hazard analysis associated with removing asbestos-contaminated soil. The Accident Prevention Plan and Site Safety and Health Plan are provided in Appendix A.9.

3.5.2 Marking Regulated Area

On August 18, 2010, exterior work areas were segregated with caution tape at an adequate distance from the regulated exclusion zones to deter unauthorized personnel from approaching the regulated areas. Asbestos warning tape was used to demarcate the exterior regulated areas and prevent accidental intrusion into regulated areas by non-authorized personnel.

3.5.3 Notifications

The remedial Subcontractor submitted a Notification of Asbestos Demolition and Renovation in accordance with OAC 3745-20-03 and 40 Code of Federal Regulations (CFR) 61.145(b) and the Ohio Department of Health Prior Notification of Asbestos Hazard Abatement Project. These notifications are provided in Appendix A.10.

In addition, on August 19, 2010, Leidos informed Akron Regional Air Quality Management District that the soil and ACM removal activities were going to commence.

3.5.4 Decontamination Unit

On August 19, 2010, Toltest constructed a three-chamber decontamination unit at the equipment staging area, as specified in the Asbestos Removal Plan. The three-chamber unit consisted of an equipment room (contaminated clothing change-out chamber), a decontamination shower located in the center chamber, and a clean room chamber. These chambers are separated by opposing, overlapping poly doors. Personnel used the decontamination unit for the duration of activities involving ACM.

3.5.5 Soil Removal Activities

After site setup, soil removal activities in the northeast corner of RQL commenced. Soil removal activities were conducted by utilizing the Terex TXC 300 to load contaminated soil into an IC100 off-road haul truck. The IC100 off-road haul truck transported the contaminated soil to the stockpiling area. Soil removal from the northeast corner of RQL was conducted from 8/20/10 until 8/30/10, at which time it was apparent that ACM was no longer present in the excavation floor or sidewalls.

At the stockpiling area, a 315 Excavator was used to transfer the stockpiled soil into roll-off boxes and on-road haul trucks. The containers were lined with two 6-mil polyethylene liners (12-mil total per Ohio EPA regulations) and sealed. Roll-off boxes that were loaded were properly labeled, sealed, and temporarily staged in the Equipment Staging Area and in Load Line 4. Soil loaded directly into on-road haul trucks was immediately taken offsite. Loading activities took place until 9/3/10.

In total, 1,107 tons of non-hazardous soil with ACM was removed from the RQL quarry bottom and disposed at the American Landfill in Waynesburg, Ohio. Figure 3-1 depicts the site features and removal extents. A total of 39 truckloads of contaminated soil and 23 roll-off boxes were used to containerize, haul, and dispose this material. The manifest log, waste profiles, and waste manifests are located in Appendix A.11.



Photograph 3-7. Decontamination Unit



Photograph 3-8. Loading Contaminated Soil into On-Road Haul Truck

3.5.5.1 Confirmatory Sampling

Upon completing the soil removal in the quarry bottom, an inspection was conducted by USACE, Ohio EPA, and a certified Asbestos Hazard Evaluation Specialist on August 31, 2010 to visually confirm that no ACM was presented in the excavation floor or sidewalls. A visual inspection form was completed by the Asbestos Hazard Evaluation Specialist and is located in Appendix A.12.

On September 3, 2010, a technical memorandum was provided to the Army and Ohio EPA presenting the soil sampling scheme for the bottom of RQL. The technical memorandum presented the extent of the soil removal area and portrayed the six areas (RQL-061 to RQL-066) that had incremental

sampling method samples collected and analyzed for asbestos in soil. None of the soil samples had detectable concentrations of asbestos. In addition, the soil stockpiling area was sampled when the loading and hauling activities were complete. Six soil samples (RQL-067 to RQL-071) were analyzed for asbestos. None of the soil samples had detectable concentrations of asbestos. The technical memorandum, sampling scheme, and results are located in Appendix A.13.



Photograph 3-9. Soil Sampling After Excavation of Removal Area Containing ACM



Photograph 3-10. Inspection of Removal Area During Excavation Activities

3.5.5.2 Field Change Request

During implementation of the Load Line 12 remedial action (USACE 2010c), Field Change Request (FCR)-RVAAPLL12-003 approved the use of Calciment® as a drying agent during the Load Line 12 and RQL remedial actions. One field change request was made, as these remedial actions were performed concurrently. The intent of the field change request was to have a provision for using a drying agent to ensure trucks would not leak during transportation to the landfill and would ensure the landfill will accept the disposed material. Even though the field change request included the RQL remedial action, Calciment® was not used during the remedial action at RQL.

The approved field change request form is presented in Appendix A.14.

3.6 MEC IDENTIFICATION AND REMOVAL

PIKA International, Inc. (PIKA) developed the *Explosives Safety Submission Munitions and Explosives of Concern Non-Time Critical Construction Support at the RVAAP-01 Ramsdell Quarry Landfill* (PIKA 2010) in support of soil remedial activities at RQL. The Explosives Safety Submission (ESS) was developed to ensure all applicable Department of Defense (DoD) and Army regulations regarding safe and secure handling of MEC were followed in the event that MEC was encountered. The soil removal actions were conducted with a DoD-certified UXO technician trained specifically in MEC identification.

On Thursday, July 1, 2010, a munition item was discovered adjacent to an area originally planned for soil removal. This item was also identified during a separate MEC investigation performed by the

Army in April 2010 and was considered to be a partial casing of a 500-lb Incendiary Bomb AN-M76. Two UXO technicians investigated the munition item and determined it to be inert. The RVAAP Facility Manager was informed and indicated that no further action was warranted, and the item could be moved aside if needed. No additional actions regarding the casing were instituted, as soil removal activities were not performed in the proximity of the casing.

3.7 SITE RESTORATION

The Original RD anticipated disturbance of 1.71 acres of the isolated wetland in the quarry bottom. Soil excavation was discontinued due to the identification of unexpected ACM and only 0.5 acres of the wetland were disturbed. After sample results indicated ACM contaminated soil removal activities were complete, an estimated 702 tons of backfill were brought in from the commercial backfill source, Charlestown Sand and Gravel. In addition, an estimated 460 tons of topsoil were also brought in from Charlestown Sand and Gravel. In accordance with Ohio EPA Requirements for the Isolated Wetland presented in the Original RD (USACE 2010a), the disturbed areas from soil removal activities were backfilled and graded to their original elevations.

On September 14, 2010, the disturbed areas were seeded. The “Emergent Marsh” seed mixture for Camp Ravenna was distributed in the disturbed areas in the quarry bottom at 15 lbs/acre and mulched with straw. For the disturbed areas outside of the quarry bottom and wetland, the “open area” seed mixture for Camp Ravenna was distributed at 18 lbs/acre and mulched with straw.

During a site inspection by the Army on November 10, 2010, it was confirmed that sufficient vegetation had been established at the disturbed areas and stormwater controls could be discontinued. The stormwater controls at RQL were removed and disposed on June 22, 2011.



Photograph 3-11. Grading Topsoil During Site Restoration Activities



Photograph 3-12. Established Seed in Removal Area

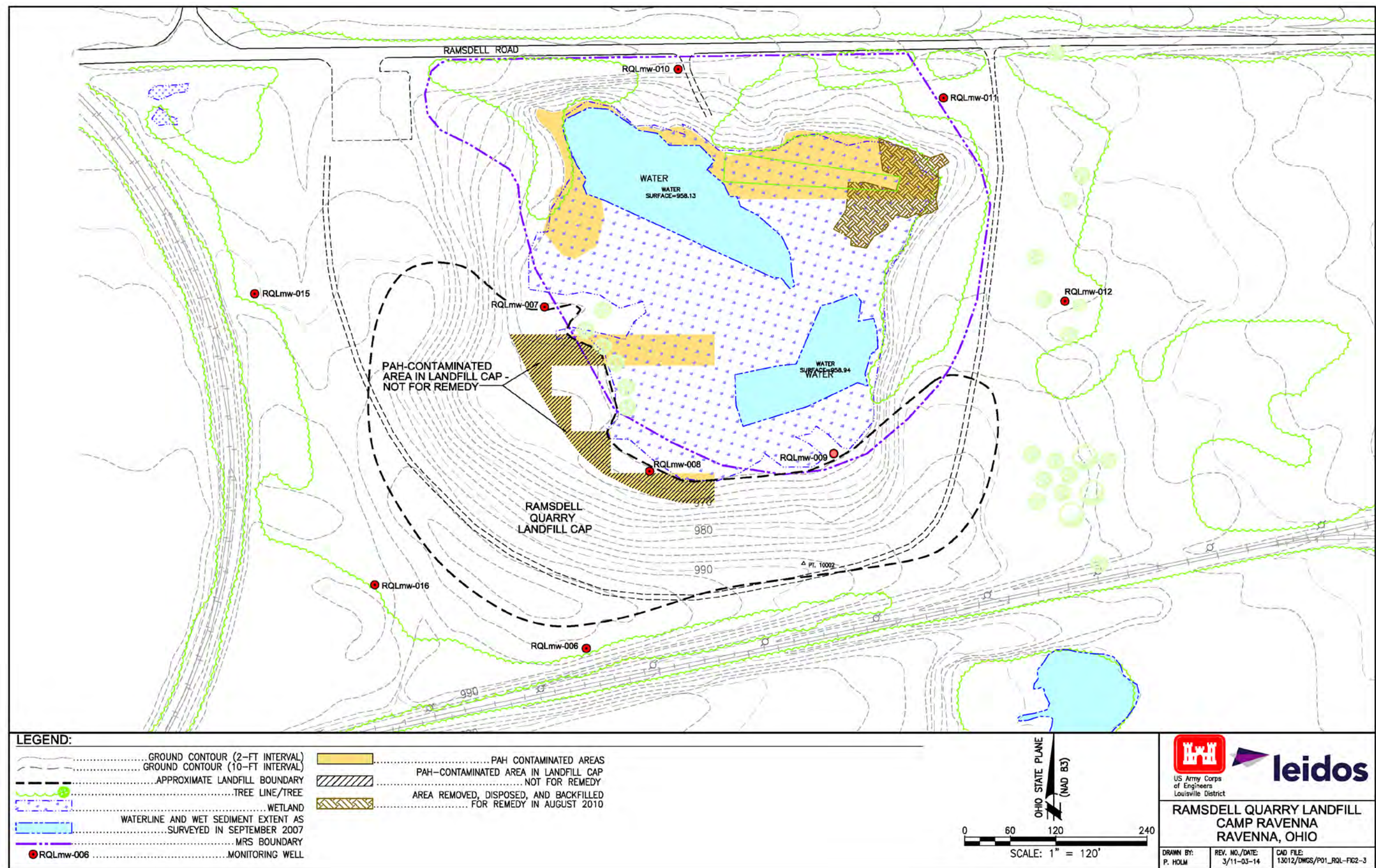


Figure 3-1. Ramsdell Quarry Landfill Site Features and Soil Removal Extents

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4.0 ENGINEERING EVALUATION AND ROD AMENDMENT

This section summarizes the re-evaluation of remedial alternatives due to the fundamental post-ROD change of waste type and selection of an amended remedy in the ROD Amendment (USACE 2013).

4.1 ENGINEERING EVALUATION

As agreed during a July 7, 2010, meeting with the Army and Ohio EPA, new remedial alternatives were developed and evaluated in the Engineering Evaluation, approved by Ohio EPA on October 6, 2011. These remedial alternatives were developed and evaluated using a site-specific determination per NCP Section 300.435(c)(2) and prescribed under the *Guide to Preparing Superfund Proposed Plans, Records of Decision, and Other Remedy Selection Decision Documents* (USEPA 1999). The four new remedial alternatives developed and presented in the Engineering Evaluation were:

- Alternative 5: Excavation of Soil and Off-site Disposal as Friable ACM ~ Security Guard/Maintenance Worker
- Alternative 6: Capping ~ Security Guard/Maintenance Worker
- Alternative 7: Quarry Bottom Fence ~ Security Guard/Maintenance Worker with Restricted Land Use
- Alternative 8: Perimeter Fence ~ Security Guard/Maintenance Worker with Restricted Land Use

A comparative analysis of the four alternatives using the NCP evaluation criteria was conducted to identify relative advantages and disadvantages amongst them. As a result of the comparative analysis, the Engineering Evaluation recommended Alternative 8: Perimeter Fence ~ Restricted Land Use. This alternative included installing a fence at the perimeter of RQL and implementing a best management practice (BMP) to remove surficial ACM through non-intrusive, no-digging methods. The fence included in Alternative 8 was a combination of a chain-link security fence and high tensile wire fence. The fence specifications were finalized in an RD.

4.2 PUBLIC NOTIFICATION

In October 2012, the Army released the *Modified Proposed Plan for Soil and Dry Sediment at Ramsdell Quarry Landfill (RVAAP-01)* (USACE 2012) (herein referred to as the Modified Proposed Plan) for public comment. A 31-day public comment period was held from October 8, 2012 to November 7, 2012. The Army hosted a public meeting on October 18, 2012 to present the Modified Proposed Plan and take questions and comments from the public. The public meeting presented the newly recommended Alternative 8: Perimeter Fence ~ Security Guard/Maintenance Worker with Restricted Land Use.

4.3 RECORD OF DECISION AMENDMENT

The change in conditions at RQL was considered a “fundamental change” by the Ohio EPA and Army (i.e., change to the basic features of the remedy selected in a ROD with respect to scope, performance, or cost); therefore, the ROD Amendment (USACE 2013) was prepared per the ROD process outlined in NCP Section 300.435(c)(2)(ii)(A) through (H). The Army issued the ROD Amendment to summarize the evaluation of the nine criteria originally presented in the Engineering Evaluation, document public input during the public notification period, and select Alternative 8: Perimeter Fence ~ Security Guard/Maintenance Worker with Restricted Land Use. The ROD Amendment was finalized and signed by the Army on June 18, 2013 and Ohio EPA on August 23, 2013.

5.0 2014 FENCE INSTALLATION AND ACM CLEANUP ACTIVITIES

The following subsections present the planning and field activities associated with implementing Alternative 8: Perimeter Fence ~ Security Guard/Maintenance Worker with Restricted Land Use.

5.1 REMEDIAL DESIGN

On June 5, 2014, Ohio EPA approved the RQL RD (USACE 2014). The RQL RD presented the design specifications for Alternative 8, including: 1) installing a security fence and signage around the perimeter of RQL to restrict access to areas of soil containing contaminant concentrations exceeding CUGs specified in the ROD Amendment, 2) implementing a BMP to remove surficial ACM through non-intrusive/no-digging methods, 3) documenting completion of the wetland restoration of disturbed areas, and 4) defining LUCs that will be implemented after completing the remedial action.

5.1.1 Remedial Action Objective

The RQL RD specified the design for Alternative 8 to achieve the remedial action objective formalized in the ROD Amendment: protect future receptors from remaining COCs in soil above CUGs and residual asbestos by restricting access to the AOC. Implementing Alternative 8 provides physical and administrative controls for the AOC to minimize or eliminate potential exposure for receptors that are not granted access to RQL. Installation of the fence and signage, cleanup of surficial ACM, and institution of LUCs results in reduced potential exposure to contaminated soil and ACM by future receptors. Additionally, the fence creates a deterrent to prevent unauthorized activities on the closed, sanitary landfill cap within RQL.

The RQL RD also provided the Site Safety and Health Plan and Asbestos Abatement Plan followed during implementation of the remedial action.

5.1.2 Wetland Restoration

As documented in the approved RQL RD, a wetland delineation of the entire quarry bottom was performed in September 2013 to assess impacts of the partial soil removal. A letter report of the 2013 wetland delineation is presented in Attachment A of the RQL RD (USACE 2014). The results were compared to the wetland delineation conducted in 2008, prior to soil removal activities. The wetland in the quarry bottom (designated as RQL-3) showed an increase in size (4.039 acres in 2008 to 4.081 acres in 2013) and had an increase in score using the ORAM (Ohio EPA 2001). The 2008 wetland delineation scored 37.5 on the ORAM and the 2013 wetland delineation scored a 39.5, which classifies the wetland as a Modified Category 2 wetland.

The wetland in the impacted area has been restored to (at minimum) its original condition. The overall increase in size and ORAM score indicate improvements to the wetland in the quarry bottom.

Accordingly, Ohio EPA concurred in the approved RQL RD that the Army met the intent for wetland restoration specified in the Original RD.

5.1.3 Land Use Control Remedial Design

The approved RQL RD also presents the Land Use Control Remedial Design (LUCRD). For RQL, the LUCRD was developed with the intent of being inserted into Appendix A of the Property Management Plan. The LUCRD presents LUCs for RQL after implementing the selected remedy and monitoring and reporting requirements to be conducted by the Army.

5.2 NOTIFICATIONS AND CLEARANCES

5.2.1 Ohio EPA Notification

On July 23, 2014, the Army provided written correspondence informing Ohio EPA of the implementation schedule for the remedial action at RQL. The letter is presented in Appendix B.1.

5.2.2 Utility Clearance

On July 30, 2014, the Army confirmed there are no known subsurface hazards at or near where the fence will be installed. The e-mail documentation of this utility clearance is presented in Appendix B.2.

5.3 VEGETATION CLEARING

Vegetation clearing consisted of using a brush hog to clear lanes for fence installation. No trees were taken down during these field activities.

5.4 FENCE INSTALLATION

On August 4, 2014, the fencing contractor (R&T Fence) and UXO technician mobilized to the site to implement field activities. In addition, Army personnel were on site to verify the planned fence line to be installed. Figure 5-1 presents the location of the installed fence line.

A total of 914 ft of chain-link security fence with industrial galvanized steel wire mesh was installed at the northern perimeter of RQL along Ramsdell Road. To install the chain-link fence, soil was excavated at post locations to at least 8-inch diameter and 3 ft deep with hand tools and an auger. The fence posts were set with concrete and allowed to cure for at least seven days before any stress was applied. The tops of the concrete footings were leveled with the ground, crowned to provide drainage, and troweled smooth.



Photograph 5-1. Brush Clearing



Photograph 5-2. Augering Post Holes

The chain link fabric was fastened to the top reinforcing wire, and the lower edge of the fabric was fastened to the bottom tension wire. Fabric was installed on the security (Ramsdell Road) side of fence.

Two double-swing galvanized steel chain-link gates (6 x 9 ft gate leaves) were installed along Ramsdell Road: one gate at the equipment staging area (northwestern area of RQL), and the second gate northeast of RQLmw-011. Fabric on the gates matched the adjacent fence. The gates were secured to 4-inch diameter posts that were set in concrete footings.



Photograph 5-3. Posts Installed for Chain Link Fence



Photograph 5-4. Installed Chain Link Fence

A five-strand, high tensile wire fence was installed at the eastern, southern, and western perimeters of RQL. Approximately 2,178 ft of high tensile wire fence was installed. The high tensile wire fence is 5 ft high and mounted on galvanized or coated metal posts at 10 ft intervals on post centers. Metal posts were driven into the ground using a post driver. There were instances where rock was encountered during the installation of the high tensile wire fence that made it impractical to drive the posts to the specified depth. As documented in the approved FCR-RVAAP-RQLRA-001, Tubular Post Anchors were used to anchor posts to the ground if the metal posts could not be driven to the specified depth of 3 ft bgs. The use of the anchors further ensured the long-term stability of the fence line and

provided adequate compromise for the inability to drive the posts to the specified depth. The field change request is presented in Appendix B.3.

Ten terminal posts for the high tensile wire were installed. To install the terminal posts, soil was excavated at post locations to at least 8-inch diameter and 3 ft deep with hand tools and an auger. The fence posts were set with concrete and allowed to cure for at least seven days before any stress was applied. The tops of the concrete footings were leveled with the ground, crowned to provide drainage, and troweled smooth. No excess concrete was generated during these activities.



Photograph 5-5. Terminal Posts in High Tensile Wire Fence



Photograph 5-6. Completed High Tensile Wire Fence

Upon completion of the fence installation, a grounding rod was installed. A solid copper wire was attached to the fence post and a $\frac{3}{4}$ in diameter copper-clad steel ground rod was driven to 10 ft bgs. In addition, the Army placed keyed locks on both access gates to prevent unauthorized entry to the site.

5.5 ASBESTOS SIGNAGE INSTALLATION

Eleven signs were installed around RQL on the gates and on the chain-link and high tensile wire fence at 300 ft centers to warn of the ACM hazard in the quarry bottom. The signs were put in place to meet the requirements of OAC 3745-20-07(B)(1)(b) and included a 20 x 14 in upright format warning sign with white background that displays the following with black letters at least one inch high.



Photograph 5-7. Signs Installed Per OAC 3745-20-07(B)(1)(b)



Photograph 5-8. Tubular Post Anchors

5.6 SITE RESTORATION

Upon completion of the field activities, ruts and depressions along equipment movement areas and construction support areas were graded. No additional backfill was brought on site, as the grading was sufficient to establish adequate contours. A vegetative cover (i.e., grass) was placed in areas disturbed or damaged by fence installation and/or equipment movement using the Camp Ravenna-approved open-area seed mixture, and straw was placed as mulch.

5.7 ACM CLEANUP

After installing the perimeter fence, ACM exposed at the ground surface was removed in accordance with the Asbestos Abatement Plan provided in Appendix E.2 of the RQL RD. Initially, an Asbestos Hazard Evaluation Specialist reviewed the quarry bottom, walking in 5-foot transects across the AOC identifying and marking ground-surface ACM requiring removal. Figure 5-2 presents the ACM survey and cleanup extent at the site.

After ACM was identified and marked for removal, an Asbestos Hazard Abatement Worker marked the regulated area to establish work zones while performing the ACM cleanup. Asbestos warning tape was used to demarcate the regulated area. The Asbestos Hazard Abatement Work removed all identified surficial/exposed ACM. ACM was removed using non-intrusive, no digging methods (e.g., removal by hand). In total, an estimated 200 lbs of ACM was removed from the site. The ACM was placed into two 6-mil polyethylene asbestos bags. The collected ACM and PPE used during cleanup activities were placed in a properly labeled drum for containerization, hauling, and disposal.

After removing surficial ACM, the Asbestos Hazard Evaluation Specialist assessed the site to verify removal of exposed ACM. A “Certification of Visual Inspection” that confirms that all identified surficial ACM was removed from the quarry bottom is presented in Appendix B.4. On November 7, 2014, the drum containing the ACM was removed from the site and transported for disposal. The waste profile, manifest, and IDW inspection forms are in Appendix B.5.



Photograph 5-9. Investigation and Cleanup of Surficial ACM



Photograph 5-10. Containerization of an Estimated 200 lbs of ACM

5.8 MEC AVOIDANCE

For the duration of the fence installation activities and asbestos cleanup activities, a certified UXO technician performed visual and magnetometer surveys of the site. The UXO Technician surveyed the locations for all fence posts prior to excavation and also performed transects along which surficial ACM inspection and removal was planned. When an anomaly was detected, the UXO Technician marked the anomaly with a pin flag and that area was avoided. No further action was required on marked anomalies.

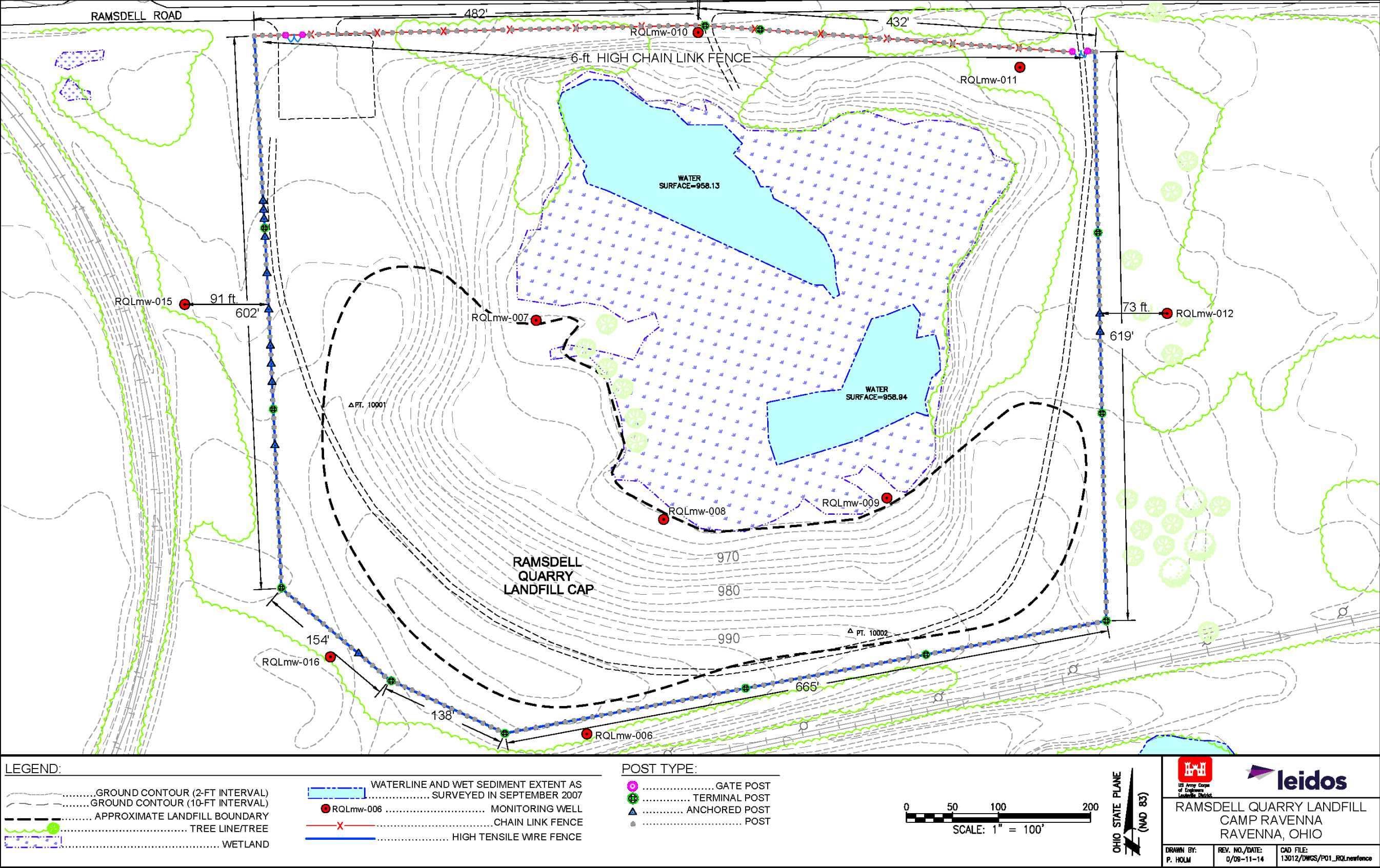


Figure 5-1. Ramsdell Quarry Landfill Fence Line

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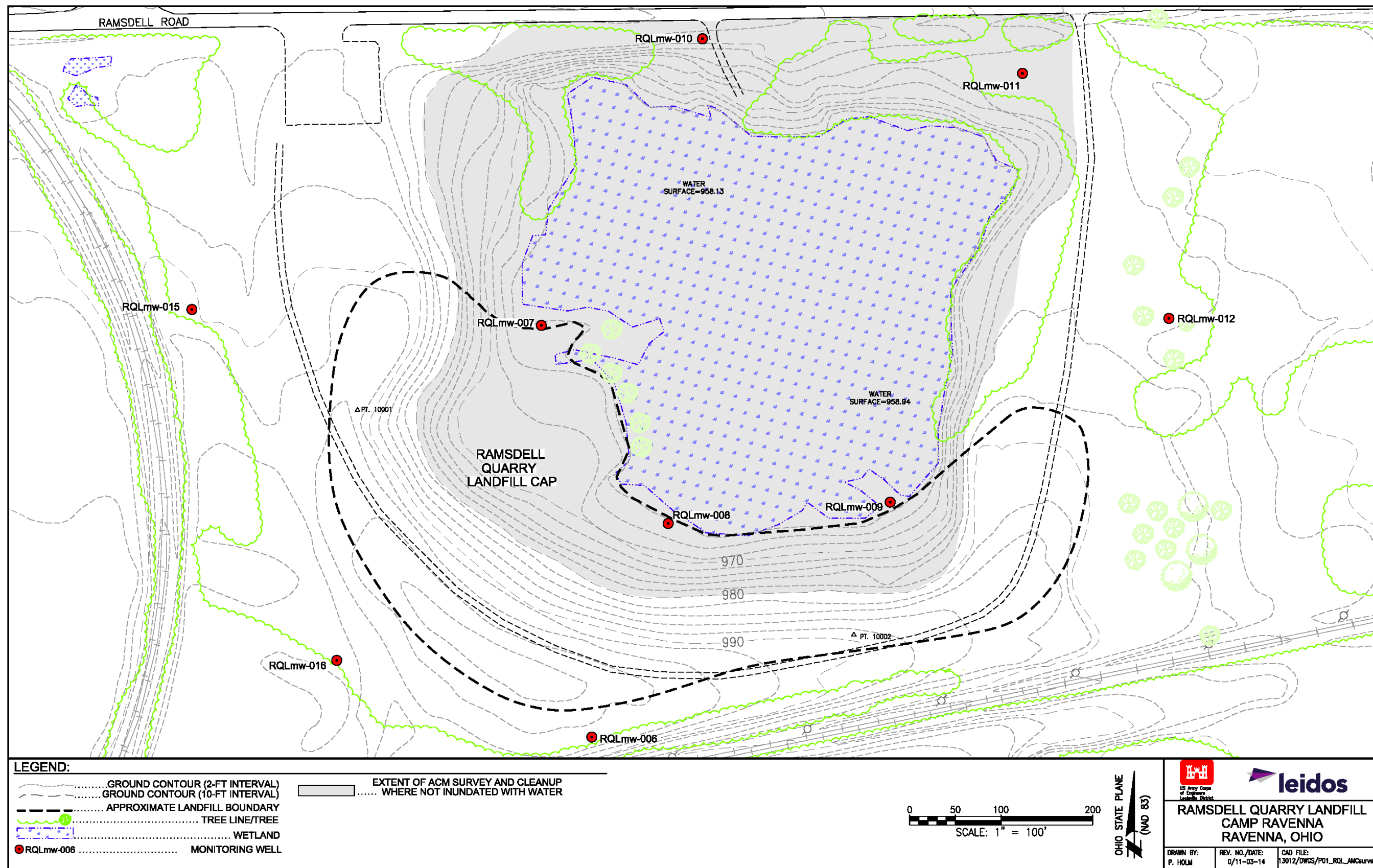


Figure 5-2. ACM Survey and Cleanup Extent

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6.0 CONCLUSIONS

This RAR documents completion of remedial actions for the selected remedy for soil and dry sediment at RQL specified in the Original ROD (USACE 2009) and ROD Amendment (USACE 2013). The remedial actions described in this RAR attained the remedial action objective established in the RQL ROD Amendment.

The Army will manage future land use at RQL as Restricted Access due to residual, non-exposed asbestos in soil, residual PAH contamination above residential facility-wide CUGs, and the closed landfill. The Army will implement LUCs described in the LUCRD presented in the RQL RD and conduct CERCLA five-year reviews. Other media (i.e., surface water, wet sediment, and groundwater) and MEC will be addressed as part of future actions.

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7.0 REFERENCES

- EnviroScience 2008. *The Wetlands and Other Waters Delineation Report for the Remedial Action at Ramsdell Quarry Landfill, Load Line 12 and Fuze and Booster Quarry Landfill/Ponds*. 2008.
- Ohio EPA (Ohio Environmental Protection Agency) 2001. *Ohio Rapid Assessment Method for Wetlands v. 5.0, User's Manual and Scoring Forms*. February 2001.
- Ohio EPA 2004. *Director's Final Findings and Orders in the matter of U.S. Department of the Army, Ravenna Army Ammunitions Plant*. June 2004.
- PIKA (PIKA International, Inc.) 2010. *Explosives Safety Submission (ESS) Munitions and Explosives of Concern (MEC) Non-Time Critical Construction Support at the RVAAP-01 Ramsdell Quarry Landfill*. May 2010.
- USACE (United States Army Corps of Engineers) 2006. *Feasibility Study for Ramsdell Quarry Landfill (RVAAP-01) at the Ravenna Army Ammunition Plant, Ravenna, Ohio*. March 2006.
- USACE 2009. *Record of Decision for Ramsdell Quarry Landfill (RVAAP-01) at the Ravenna Army Ammunition Plant, Ravenna, Ohio*. March 2009.
- USACE 2010c. *Remedial Action Report for the RVAAP-12 Load Line 12 at the Ravenna Army Ammunition Plant*. August 2010.
- USACE 2010b. *Remedial Action Report for the RVAAP-16 Fuze and Booster Quarry Landfill/Ponds at the Ravenna Army Ammunition Plant*. March 2010.
- USACE 2010a. *Remedial Design for the RVAAP-01 Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio*. June 2010.
- USACE 2011. *Engineering Evaluation for Soil and Dry Sediment at RVAAP-01 Ramsdell Quarry Landfill and the Ravenna Army Ammunition Plant, Ravenna, Ohio*. September 2011.
- USACE 2012. *Modified Proposed Plan for Soil and Dry Sediment at Ramsdell Quarry Landfill (RVAAP-01)*.
- USACE 2013. *Record of Decision Amendment for Soil and Dry Sediment at the RVAAP-01 Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio*. May 2013.

USACE 2014. *Remedial Design for Soil and Dry Sediment at the RVAAP-01 Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio*. June 2014.

USEPA (United States Environmental Protection Agency) 1999. *Guide to Preparing Superfund Proposed Plans, Records of Decision, and Other Remedy Selection Decision Documents*. July 1999.

APPENDIX A

2010 SOIL REMOVAL ACTIVITIES DOCUMENTATION

Appendix A.1 United States Fish and Wildlife Service Concurrence
Appendix A.2 Ohio Historic Preservation Office Concurrence
Appendix A.3 MEC Investigation Report – USACE, Rock Island
Appendix A.4 Utility Clearance
Appendix A.5 Herbicide Application Notification Forms
Appendix A.6 Ohio EPA Approvals of Backfill Source
Appendix A.7 Waste Characterization Sample Results
Appendix A.8 Soil Asbestos Removal Plan
Appendix A.9 Accident Prevention Plan and Site Safety and Health Plan
Appendix A.10 Notifications of Asbestos Project
Appendix A.11 Manifest Log, Waste Profile, and Waste Manifests
Appendix A.12 Visual Inspection Form
Appendix A.13 Technical Memorandum, Sampling Scheme, and Confirmation Sampling Results
Appendix A.14 Field Change Request Form

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Appendix A-1. United States Fish and Wildlife Service Concurrence

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United States Department of the Interior

FISH AND WILDLIFE SERVICE

Ecological Services
4625 Morse Road, Suite 104
Columbus, Ohio 43230
(614) 416-8993 / FAX (614) 416-8994

October 14, 2009

Jed Thomas, P.E.
Deputy Project Manager
SAIC Engineering of Ohio, Inc.
8866 Commons Blvd.
Twinsburg, OH 44087

Tails: 31420-2010-TA-0017
31420-2010-CPA-0005

Re: Response to Request for Determination of a Remedial Action Conducted at Ramsdell Quarry Landfill within the Ravenna Army Ammunition Plant/Camp Ravenna

Dear Mr. Thomas:

We have received your recent correspondence requesting information about the subject proposal. There are no Federal wilderness areas, wildlife refuges or designated critical habitat within the vicinity of the project area. Based on the information you have provided, at this time we have no objection to the proposed project.

ENDANGERED SPECIES COMMENTS: Due to the project type, size, and location, we do not anticipate any impact on federally listed endangered, threatened, or candidate species, or their habitats. Should the project design change, or during the term of this action, additional information on listed or proposed species or their critical habitat become available, or if new information reveals effects of the action that were not previously considered, consultation with the Service should be initiated to assess any potential impacts.

If you have additional questions or require further assistance with your project proposal, please contact me at the following number (614) 416-8993 x12. I would be happy to discuss the project in further detail with you and provide additional assistance if necessary. In addition, you can find more information on natural resources in Ohio by visiting our homepage at: <http://www.fws.gov/midwest/ohio>.

Sincerely,

Mary Knapp, Ph.D.
Field Supervisor



SAIC Engineering of Ohio, Inc.
A subsidiary of Science Applications International Corporation

October 6, 2009

Megan Seymour
U.S. Fish and Wildlife Services
Ecological Services Division
6950 Americana Pkwy Suite H
Reynoldsburg, OH 43068-4127

Subject: Request for Determination of a Remedial Action Conducted at Ramsdell Quarry Landfill within the Ravenna Army Ammunition Plant/Camp Ravenna

Dear Ms. Seymour:

Science Applications International Corporation (SAIC), as a contractor to the U.S. Army Corps of Engineers, is preparing a remedial design to implement soil removal at the Ramsdell Quarry Landfill (RQL) area of concern (AOC) within the Ravenna Army Ammunition Plant (RVAAP)/Camp Ravenna Joint Military Training Center (Camp Ravenna).

RVAAP/Camp Ravenna is located in northeastern Ohio within Portage and Trumbull Counties, approximately 3 miles northeast of Ravenna, Ohio (see Figure 1). RQL encompasses approximately 14 acres in the northeastern portion of RVAAP/Camp Ravenna (see Figure 2).

Implementation of the remedial activities is anticipated to occur in March 2010. These activities will result in the excavation and disposal of approximately 1,608 cubic yards of contaminated soil from the former quarry bottom. Soil removal will continue until the respective remedial cleanup goals for the following semivolatile organics (SVOCs) are achieved: benz(a)anthracene at 13 mg/kg; benzo(a)pyrene at 1.3 mg/kg; benzo(b)fluoranthene at 13 mg/kg; dibenz(a,h)anthracene at 1.3 mg/kg, and indeno(1,2,3-cd)pyrene at 13 mg/kg. Clearing will be required in order to provide access for excavation equipment and vehicle traffic. All clearing activities will be coordinated with the Ohio Army National Guard. It is estimated that there are at least 10 small trees located within soil removal area of the quarry. All efforts will be made to minimize the number of trees needed to be cut down to perform the removal action.

Federally listed species with known occurrences in Portage and Trumbull Counties, Ohio include the threatened northern monkshood (*Aconitum noveboracense*), the endangered Mitchell's satyr butterfly (*Neonympha mitchellii mitchellii*), the endangered clubshell (*Pleurobema clava*), the endangered Indiana bat (*Myotis sodalis*), and the candidate eastern massasauga (*Sistrurus catenatus catenatus*). Below is a summary of potential impacts (if any) to these species.

Northern monkshood – In correspondence dated August 25, 2005 (enclosed with this transmittal letter), the USFWS indicated that Camp Ravenna does not contain suitable habitat for the northern monkshood and it has not been found on site in either of two site-wide vascular plant inventories conducted in 1993 and 2000. Therefore the proposed action will have no effect on the northern monkshood.

Mitchell's satyr butterfly – Three lepidoptera surveys have been conducted at Camp Ravenna (Rings & Downer, 1993; Rings, 1994; Gilligan, 1999; BHE Environmental, 2006). The preferred habitat for this species is sedge dominated fens with low shrubs and tamaracks. There is some limited sedge dominated fens/wetland habitat with low shrubs at Camp Ravenna but none with tamaracks. The only tamaracks at Camp Ravenna are associated with an old home site. This type of habitat will not be disturbed by the proposed remedial action activities. Camp Ravenna does have potential habitat for the Mitchell's satyr butterfly but since the habitat will not be disturbed and since, even with extensive survey effort, the butterfly has not been identified on the training site it is the conclusion of USACE and SAIC that the proposed remedial action activities will have no effect on the Mitchell's satyr butterfly.

Clubshell Mussel – In the earlier referenced correspondence dated August 25, 2005, the USFWS indicated that the presence of the clubshell mussel at Camp Ravenna is unlikely. This opinion has been confirmed by two survey attempts (1993 and 2000) to try and find the clubshell mussel on Camp Ravenna property, with no clubshell mussels found. The proposed remedial action activities will not impact or disturb potential clubshell mussel habitat. Due to the lack of the species presence and non-disturbance of potential habitat it is the conclusion of the USACE and SAIC that the proposed remedial action activities will have no effect on the clubshell mussel.

Indiana Bat – In accordance with the Camp Ravenna INRMP, an installation-wide survey for the Indiana bat is conducted approximately every 5 years, in coordination with USFWS. Three Indiana bat surveys have been conducted at RTLS (Tawse, 1999; Davey Resource Group, 2002; Duffey & Brack, 2005). Netting efforts to date have provided no evidence of Indiana bats at RTLS. Potential habitat for the Indiana bat is evaluated and managed as part of the ongoing sustainable forest management program at Camp Ravenna. Discussions have been held with the USFWS concerning the difficulty of conducting effective Indiana Bat surveys at Camp Ravenna within the limits of specific project or timber sale boundaries. It was agreed that installation-wide bat surveys every five years would be sufficient for determining the presence of the Indiana bat at Camp Ravenna. Since the Indiana bat has not been found at Camp Ravenna, it is the conclusion of the USACE and SAIC that the proposed remedial action activities will have no effect on the Indian bat.

Eastern Massasauga – Herptile inventories, in accordance with the Camp Ravenna INRMP, are on an approximate five-year cycle. Three surveys have been conducted (Schneider, 1993; Pfingsten, 2000; BHE Environmental, 2006). RVAAP/Camp Ravenna contains suitable habitat for the massasauga, but this rattlesnake has not been observed at the RVAAP/Camp Ravenna to date. Due to the lack of the species presence on the RVAAP/Camp Ravenna property it is the conclusion of SAIC and USACE that the proposed remedial action activities will have no effect on the eastern massasauga.

The bald eagle (*Haliaeetus leucocephalus*), recently delisted, has been identified as an occasional migrant at Camp Ravenna. There are no bald eagle nests within Camp Ravenna property or within 0.5 miles of Camp Ravenna. The proposed remedial action activities will have no effect on the bald eagle.

Ms. Megan Seymour

October 6, 2009

Page 3

We request that you review our findings and determinations of no effect and provide your concurrence if you agree. If there is anything we need to do to facilitate these remedial activities without negatively impacting federally listed species or critical habitat that is not mentioned in this letter or the Camp Ravenna INRMP, please let me know.

If you have questions or comments, please feel free to contact me at (330) 405-5802 or via e-mail at jed.h.thomas@saic.com.

Sincerely,

SCIENCE APPLICATIONS INTERNATIONAL CORPORATION



Jed Thomas, P.E.
Deputy Project Manager

Enclosures (2)

cc: Tom Chanda, USACE
Katie Elgin, OHARNG
Mark Patterson, RVAAP

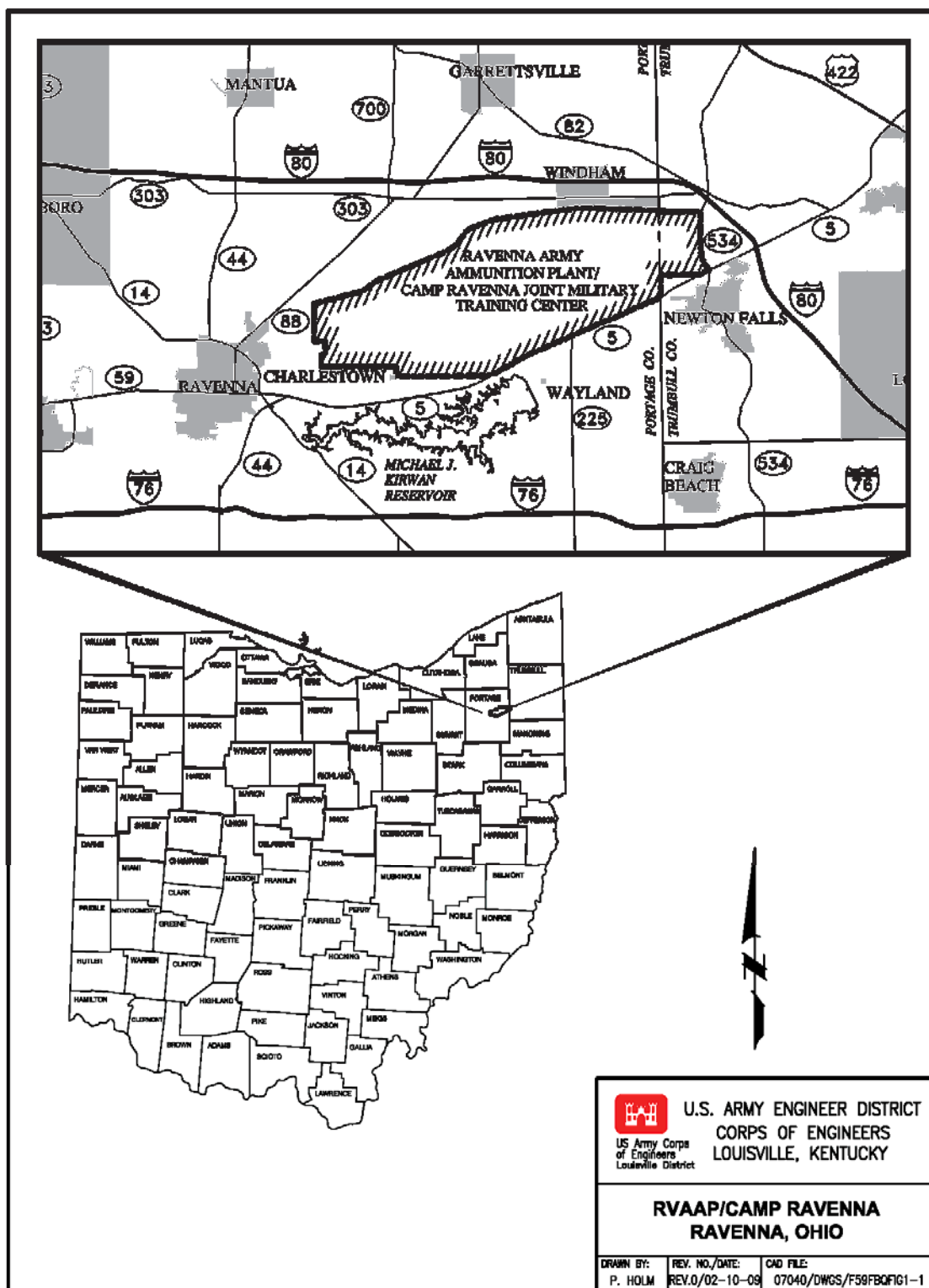


Figure 1. General Orientation and Location of RVAAP/Camp Ravenna

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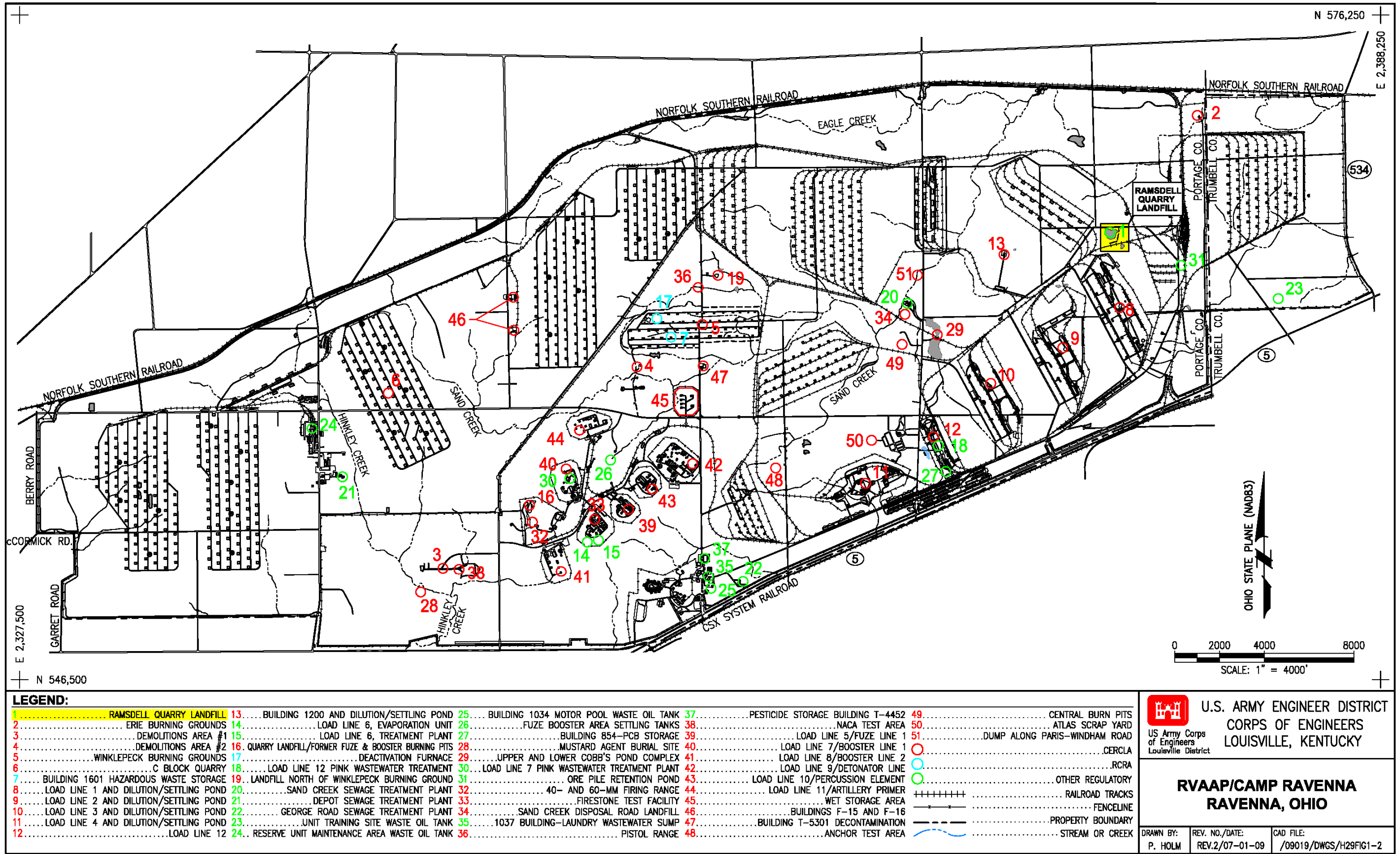


Figure 2. RVAAP/Camp Ravenna

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United States Department of the Interior

FISH AND WILDLIFE SERVICE

Ecological Services
6950 Americana Parkway, Suite H
Reynoldsburg, Ohio 43068-4127
(614) 469-6923/Fax: (614) 469-6919

August 25, 2005

Ms. Jennifer Pyzoha
AMEC Earth and Environmental, Inc.
659 High Steer, Suite 201
Worthington, Ohio 43085

Re: INRMP Revision for Ravenna Training and Logistics Site

Dear Ms. Pyzoha:

This is in response to your August 3, 2005 letter requesting information we may have regarding the occurrence or possible occurrence of Federally-listed threatened or endangered species within the vicinity of the 21,419 acres of the Ravenna Training and Logistics Site (RTLS) located in Portage and Trumbull Counties, Ohio. This information will be used as part of the revision process for the Integrated Natural Resource Management Plan (INRMP). Although our office has no new records of listed species, the Service is providing general guidelines regarding species potentially present in the project area. There are no Federal wildlife refuges, wilderness areas, or Critical Habitat within the vicinity of this site.

ENDANGERED SPECIES COMMENTS: The proposed project lies within the range of the **Indiana bat** (*Myotis sodalis*), a Federally-listed endangered species. Since first listed as endangered in 1967, their population has declined by nearly 60%. Several factors have contributed to the decline of the Indiana bat, including the loss and degradation of suitable hibernacula, human disturbance during hibernation, pesticides, and the loss and degradation of forested habitat, particularly stands of large, mature trees. Fragmentation of forest habitat may also contribute to declines. Summer habitat requirements for the species are not well defined but the following are considered important:

1. Dead or live trees and snags with peeling or exfoliating bark, split tree trunk and/or branches, or cavities, which may be used as maternity roost areas.
2. Live trees (such as shagbark hickory and oaks) which have exfoliating bark.
3. Stream corridors, riparian areas, and upland woodlots which provide forage sites.

Should the proposed site contain trees or associated habitats exhibiting any of the characteristics listed above, we recommend that the habitat and surrounding trees be saved wherever possible. If the trees must be cut, further coordination with this office is requested to determine if surveys are warranted. Any survey should be designed and conducted in coordination with the Endangered Species Coordinator for this office.

The proposed project lies within the range of the **Mitchell's satyr butterfly** (*Neonympha mitchellii*), a federal endangered species. The favored habitat for this species is sedge-dominated fens with low shrubs and tamaracks. If appropriate habitat is found on the site, we recommend surveying for the butterfly between June and August, during its most active period.

The project lies within the range of the **eastern massasauga** (*Sistrurus catenatus catenatus*), a docile rattlesnake that is declining throughout its national range and is currently a Federal Candidate species. The snake is currently listed as endangered by the State of Ohio. Your proactive efforts to conserve this species now may help avoid the need to list the species under the Endangered Species Act in the future. Due to their reclusive nature, we encourage early project coordination to avoid potential impacts to massasaugas and their habitat. At a minimum, project evaluations should contain delineations of whether or not massasauga habitat occurs within project boundaries.

The massasauga is often found in or near wet areas, including wetlands, wet prairie, or nearby woodland or shrub edge habitat. This often includes dry goldenrod meadows with a mosaic of early successional woody species such as dogwood or multiflora rose. Wet habitat and nearby dry edges are utilized by the snakes, especially during the spring and fall. Dry upland areas up to 1.5 miles away are utilized during the summer, if available. For additional information on the eastern massasauga, including project management ideas, please visit the following website: <http://www.fws.gov/midwest/Endangered/lists/candidat.html#massasauga> or contact this office directly.

The proposed project lies within the range of the **clubshell mussel** (*Pleurobema clava*), a Federally-listed endangered species, the **bald eagle** (*Haliaeetus leucocephalus*), and the **northern monkshood** (*Aconitum noveboracense*), both Federally-listed threatened species. Due to the project location, the presence of clubshell mussel is not likely; no impacts to this species are anticipated. There are no known bald eagle nests within a half mile of the project area; no impacts to bald eagles are anticipated. The site does not appear to contain shaded cliff faces in wooded ravines, or other suitable habitat for the northern monkshood; therefore no impacts to this species are anticipated. Relative to these species, this precludes the need for further action on this project as required by the 1973 Endangered Species Act, as amended. Should, during the term of this action, additional information on listed or proposed species or their critical habitat become available, or if new information reveals effects of the action that were not previously considered, consultation with the Service should be reinitiated to assess whether the determinations are still valid.

This technical assistance letter is submitted in accordance with provisions of the Fish and Wildlife Coordination Act (48 Stat. 401, as amended; 16 U.S.C.661 et seq.), the Endangered Species Act of 1973, as amended, and is consistent with the intent of the National Environmental Policy Act of 1969, and the U.S. Fish and Wildlife Service's Mitigation Policy.

If you have any questions regarding our response or if you need additional information, please contact Karyn Tremper at extension 13.

Sincerely,



Mary Knapp, Ph.D.
Field Supervisor

cc: ODNR, DOW, SCEA Unit, Columbus, OH

Appendix A-2. Ohio Historic Preservation Office Concurrence

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November 5, 2009

Jed Thomas
Science Applications International Corporation
8866 Commons Boulevard
Twinsburg, OH 44087

Re: Remedial Action at the Ramsdell Quarry Landfill
Camp Ravenna, Portage County, Ohio

Dear Mr. Thomas,

This is in response to correspondence from your office dated October 6, 2009 (received October 7) regarding the above referenced project. The comments of the Ohio Historic Preservation Office (OHPO) are submitted in accordance with provisions of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470 [36 CFR 800]).

The project involves removal of contaminated sediment from portions of the Ramsdell Quarry. The quarry is a part of Camp Ravenna and a contributing element to the significance of the facility. The quarry was used during the construction of Camp Ravenna in 1941 and 1942. In our opinion, the removal of sediment doesn't have the potential to diminish significant qualities of the quarry. Although an inventory form hasn't been completed for the quarry, it is our opinion that the quarry could be inventoried at a later date because the proposed removal of sediment won't diminish significant qualities of the quarry. We agree with your assessment that no archaeological survey is necessary for this project. Based on the information presented in the correspondence we concur with your finding that there will be no historic properties affected by the proposed project. No further coordination with this office is necessary for this project unless there is a change in the scope of work. In addition, if new or additional properties or effects are discovered, this office should be notified [36 CFR 800.13].

Any questions concerning this matter should be addressed to David Snyder at (614) 298-2000, between the hours of 8 am. to 5 pm. Thank you for your cooperation.

Sincerely,

David Snyder, Ph.D., Archaeology Reviews Manager
Resource Protection and Review

DMS/ds (OHPO ID 2009-POR-8756; Log Number 1028642)

OHIO HISTORICAL SOCIETY

Ohio Historic Preservation Office

1982 Velma Avenue, Columbus, Ohio 43211-2497 ph: 614.298.2000 fx: 614.298.2037
www.ohiohistory.org



**OHIO HISTORIC PRESERVATION OFFICE:
RESOURCE PROTECTION AND REVIEW**

Section 106 Review - Project Summary Form

For projects requiring a license from the Federal Communications Commission, please use FCC Forms 620 or 621. **DO NOT USE THIS FORM.**

SECTION 1: GENERAL PROJECT INFORMATION

All contact information provided must include the name, address and phone number of the person listed. Email addresses should also be included, if available. Please refer to the Instructions or contact an OHPO reviewer (mailto:Section106@ohiohistory.org) if you need help completing this Form. Unless otherwise requested, we will contact the person submitting this Form with questions or comments about this project.

Date: **October 6, 2009**

Name/Affiliation of person submitting form:

Jed Thomas, P.E.

Science Applications International Corporation

Mailing Address:

Science Applications International Corporation

8866 Commons Boulevard

Twinsburg, OH 44087

Phone/Fax/Email:

Phone: (330)405-5802

Fax: (330)405-9811

Email: jed.h.thomas@saic.com

A. Project Info:

1. This Form provides information about:

New Project Submittal:

YES ☒ NO ☐

Additional information relating to previously submitted project:

YES ☐ NO ☒

OHPO/RPR Serial Number from previous submission:

Not applicable

2. Project Name (if applicable):

Remedial Action at the Ramsdell Quarry Landfill

3. Internal tracking or reference number used by Federal Agency, consultant, and/or applicant to identify this project (if applicable):

Not applicable

- B. Project Address or vicinity:
Camp Ravenna Joint Military Training Center
- C. City/Township:
Charlestown Township(Attachment A-1, USGS Topographic Map)
- D. County:
Portage County
- E. Federal Agency and Agency Contact. *If you do not know the federal agency involved in your project, please contact the party asking you to apply for Section 106 Review, not OHPO, for this information. HUD Entitlement Communities acting under delegated environmental review authority should list their own contact information.*
Thomas Chanda
U.S. Army Corps of Engineers (USACE)
600 Martin Luther King Jr. Place
P.O. Box 59 CELRL-PM-P-E
Louisville, KY 40201
Phone: (502)315-6868
Email: Thomas.M.Chanda@usace.army.mil
- F. Type of Federal Assistance. *List all known federal sources of federal funding, approvals, and permits to avoid repeated reviews.*
The project will occur on federal property, under the auspices of the U.S. Army Corps of Engineers.
- G. State Agency and Contact Person (if applicable):
Not applicable
- H. Type of State Assistance:
Not applicable
- I. Is this project being submitted at the direction of a state agency **solely** under Ohio Revised Code 149.53 or at the direction of a State Agency? *Answering yes to this question means that you are sure that no federal funding, permits or approvals will be used for any part of your project, and that you are seeking comments only under ORC 149.53.*

YES ☐ NO ☒
- J. Public Involvement- Describe how the public has been/will be informed about this project and its potential to affect historic properties. Please summarize how they will have an opportunity to provide comments about any effects to historic properties. (This step is required for all projects under 36 CFR § 800.2):
Public involvement was deemed unnecessary for the project in question, remedial action at Ramsdell Quarry Landfill, because no historic properties will be affected by the remedial action. However, through the CERCLA process, which has triggered this remedial action, the public has been informed of the project and given opportunity to provide comments.

- K. Please list other consulting parties that you have contacted/will contact about this project, such as Indian Tribes, Certified Local Governments, local officials, property owners, or preservation groups. (See 36 CFR § 800.2 for more information about involving other consulting parties). Please summarize how they will have an opportunity to provide comments:

The Ohio Army National Guard (OHARNG) was consulted regarding this project since they will be the future land owners upon completion of the remedial action.

The OHARNG has provided comments regarding this project and comments have been incorporated into responses on this form. Additional consultation with other agencies was deemed not necessary for the project in question, remedial action at Ramsdell Quarry Landfill, because no historic properties will be affected by the remedial action. In addition, Native American consultation was deemed not necessary because no tribal resources will be affected by the remedial action. The Ohio Environmental Protection Agency is being consulted as part of the CERCLA process which has triggered this project.

SECTION 2: PROJECT DESCRIPTION AND AREA OF POTENTIAL EFFECTS (APE)

Provide a description of your project, its site, and geographical information. You will also describe your project's Area of Potential Effects (APE). Please refer to the Instructions or contact an OHPO reviewer if you need help with developing the APE or completing this form.

For challenging projects, provide as much information as possible in all sections, and then check the box in Section 5.A. to ask OHPO to offer preliminary comments or make recommendations about how to proceed with your project consultation. This is recommended if your project involves effects to significant historic properties or if there may be challenging procedural issues related to your project. Please note that providing information to complete all Sections will still be required and that asking OHPO for preliminary comments may tend to delay completion of the review process for some projects.

A. Does this project involve any Ground-Disturbing activity: YES ☒ NO ☐
(If **Yes**, you must complete all of Section 2.A. If **No**, proceed directly to Section 2. B.)

1. General description of width, length and depth of proposed ground disturbing activity:

The Remedial Design Plan for RQL involves the excavation and disposal of soil from the former quarry. The limit of excavation, presented in the RQL Remedial Design (Attachment A-5, Drawing C-5), involves the removal of up to 8,269 square yards (yd²) of soil to a maximum depth of 1 foot below grade. It is estimated that 1,608 cubic yards of contaminated soil will be removed from the quarry bottom.

The removal action will include the installation of two rock construction entrances, equipment staging area and an excavated soil staging area (Attachment A-4, Drawing C-4).

2. Narrative description of previous land use and past ground disturbances, if known:

Initial European settlement of the region occurred between 1799 and 1815, with all of the townships in which the training site is situated settled by 1815. Early population density was low, with subsequent growth spurts related to the opening of the Pennsylvania and Ohio Canal in 1836, the construction of the Atlantic and Great Western Railroad in 1862, and the Baltimore and Ohio Railroad in 1884. Historical atlases indicate that the area had been developed in a traditional Western Reserve farming pattern by 1800, with farms typically comprising one-quarter section. Through the late 19th and early 20th centuries, land use in the region remained largely agricultural, with scattered small industry, such as lime manufacture. Purchase of land for use in construction of the Ravenna Army Ammunition Plant (RVAAP) began in 1940. Construction was completed and the plant commenced operation between December 1941 and January 1942. The installation remained an active Army ammunition plant through 1993. Environmental restoration has been ongoing throughout the facility since that time. Currently, the facility is an Ohio Army National Guard training site known as Camp Ravenna.

Ramsdell Quarry Landfill is located in the northeastern portion of the facility and encompasses approximately 14 acres. The quarry occupies approximately 10 acres of the AOC. Quarrying activities were conducted from 1940 to 1941. During that time the area was

excavated to 9 to 12 m (30 to 40 ft) below existing grade. The excavated sandstone and quartzite pebble conglomerate was used for road and construction ballast.

From 1946 to the 1950s, the bottom of the quarry was used to burn waste explosives from Load Line 1. Reportedly, 18,000 225-kg (500-lb) incendiary or napalm bombs were burned and liquid residues from annealing operations were disposed of in the quarry.

Between 1941 and 1989, the western and southern sections of the abandoned quarry were used for landfill operations. No information is available regarding landfill disposal activities from 1941 to 1976, and no information is available on other activities at the quarry from the 1950s to 1976. Solid waste materials were disposed of in Ramsdell Quarry Landfill from 1976 until it was closed in 1989. In 1978, a portion of the abandoned quarry was permitted as a sanitary landfill by the state of Ohio. The sanitary landfill was closed in 1990 under state of Ohio solid waste regulations and capped with a clay cover. The cap on the former permitted landfill covers approximately 4 acres along the western and southern portion of the quarry. Five monitoring wells (MW-1 through MW-5) were initially installed for post-closure monitoring of the landfill. These wells were replaced in 1998 and plugged and abandoned in 2006. Semiannual monitoring of groundwater and landfill cap inspections and maintenance are ongoing.

3. Narrative description of current land use and conditions:

Camp Ravenna (formerly Ravenna Army Ammunition Plant, Federal Facility Identification number: OH213820736) is located in northeastern Ohio within Portage and Trumbull counties, approximately three miles east/northeast of the City of Ravenna and approximately one mile northwest of the City of Newton Falls. Ramsdell Quarry Landfill lies within the Camp Ravenna acreage, southeast of the "T" intersection of South Service Road, Snow Road, and Ramsdell Road.

4. Does the landowner know of any archaeological resources found on the property?
YES ☒ NO ☐ If yes, please describe:

There are no known historic properties within the immediate project area. The Ramsdell Quarry area has been highly disturbed by past activities related to the former Ravenna Army Ammunition Plant, as discussed in earlier sections. The disturbance is considered so great that any historic properties if present would have been destroyed or disturbed to the degree that they have lost historic integrity. Looking at the entire property of the installation, there have been 13 Phase I archaeological surveys completed on approximately 9,500 of the 21,683 acres contained on the entire installation

(Attachment A-7).

In February 2008, a Phase I archaeological survey was completed immediately south and west of the current project area by Lawhon and Associates, Inc. No archaeological sites were identified during this survey in the areas surrounding the project area. (Reference for this report: Lawhon and Associates, February 2008. "Phase I Archaeological Reconnaissance Survey of Three Timber Cutting Units Encompassing 490 Acres in the Eastern Portion of the Ravenna Training and Logistics Site, Paris and Windham Townships, Portage County, Ohio").

In February 2009, another Phase I archaeological survey was completed northwest of the project area by Lawhon and Associates. Two historic archaeological sites were found within approximately 1000 feet of the project area. Both sites, 33PO585 and 33PO586 are historic home sites. Neither site meet the eligibility criteria for listing on the National Register of Historic Places (NRHP). (Reference for this report: Lawhon and Associates, February 2009. "Phase I Archaeological Survey of Three Timber Cutting Units Encompassing 485 Acres in the Eastern Portion of the Ravenna Training and Logistics Site, Windham Township, Portage County, Ohio").

- B. Submit the exact project site location on a USGS 7.5-minute topographic quadrangle map for all projects. Map sections, photocopies of map sections, and online versions of USGS maps are acceptable as long as the location is clearly marked. Show the project's Area of Potential Effects (APE). It should be clearly distinguished from other features shown on the map:

1. USGS Quad Map Name:
USGS Windham (OH) Quadrangle (Attachment A-1, USGS Topographic Map)
2. Township/City/Village Name:
Charlestown Township

- C. Provide a street-level map indicating the location of the project site; road names must be identified and legible. Your map must show the exact location of the boundaries for the project site. Show the project's Area of Potential Effects (APE). It should be clearly distinguished from other features shown on the map:

- D. Provide a verbal description of the APE, including a discussion of how the APE will include areas with the potential for direct and indirect effects from the project. Explain the steps taken to identify the project's APE, and your justification for the specific boundaries chosen:

The APE is defined as equivalent to the excavation footprint and associated staging areas. No historic structures, buildings, or archaeological sites are within the viewshed of the APE. There are no known resources of interest to Native American tribes within or near this area. Excavation activities will occur within the space of a month and cause minor noise and vibration in the immediate setting of the site.

- E. Provide a detailed description of the project. This is a critical part of your submission. Your description should be prepared for a cold reader who may not be an expert in this type of project. The information provided must help support your analysis of effects to historic properties, not other types of project impacts. Do not simply include copies of environmental documents or other types of specialized project reports. If there are multiple project alternatives, you should include information about all alternatives that are still under active consideration:

A physical description of the project is provided under Section 2, Item A.1 above. Ramsdell Quarry Landfill is a CERCLA cleanup site that has undergone a Phase I remedial investigation. The results of this investigation concluded that there were contaminated soils within the quarry above human health protective levels.

This project (remedial action) is designed to excavate contaminated soil within the former quarry and dispose off site in a regulated landfill. Soil will be removed to a maximum one foot below ground surface or to bedrock (average depth to bedrock is seven inches). Once the removal is complete, the removal areas will be restored as required by the Ohio EPA wetland permit.

The removal action will include the installation of two rock construction entrances, equipment staging area and an excavated soil staging area. As a result, adjacent surface soils to the quarry are anticipated to be impacted. Not installing these areas would result in greater disturbances to ground surfaces (e.g., rutting) which would increase surface soil disturbances during restoration activities. The project will require minimal removal of trees, since the adjacent land is an open field. Attachments A-3, A-4 and A-6 present the Existing Site Conditions, Construction Site Plan, and Site Restoration Plan, respectively.

SECTION 3: IDENTIFICATION OF HISTORIC PROPERTIES

Describe whether there are historic properties located within your project APE. To make that determination, use information generated from your own Background Research and Field Survey. Then choose one of the following options to report your findings. Please refer to the Instructions and/or contact an OHPO reviewer if you are unsure about how to identify historic properties for your project.

If you read the Instructions and you're still confused as to which reporting option best fits your project, or you are not sure if your project needs a survey, you may choose to skip this section, but provide as much supporting documentation as possible in all other Sections, then check the box in Section 5.A. to request preliminary comments from OHPO. After reviewing the information provided, OHPO will then offer comments as to which reporting option is best suited to document historic properties for your project. Please note that providing information to complete this Section will still be required and that asking OHPO for preliminary comments may tend to delay completion of the review process for some projects.

Recording the Results of Background Research and Field Survey:

- A. Summary of discussions and/or consultation with OHPO** about this project that demonstrates how the Agency Official and OHPO have agreed that no Field Survey was necessary for this project (typically due to extreme ground disturbance or other special circumstances). Please **attach copies** of emails/correspondence that document this

agreement. You must explain how the project's potential to affect both archaeological and historic resources were considered.

- B. A table that includes the minimum information** listed in the OHPO Section 106 Documentation Table (which is generally equivalent to the information found on an inventory form). This information must be printed and mailed with the Project Summary Form. To provide sufficient information to complete this Section, you must also include summary observations from your field survey, background research and eligibility determinations for each property that was evaluated in the project APE.
- C. OHI (Ohio Historic Inventory) or OAI (Ohio Archaeological Inventory) forms-** New or updated inventory forms may be prepared using the OHI pdf form with data population capabilities, the Internet IForm, or typed on archival quality inventory forms. To provide sufficient information to complete this Section, you must include summary observations from your field survey and background research. You must also include eligibility determinations for each property that was evaluated in the project APE
- D. A historic or archaeological survey report** prepared by a qualified consultant that meets professional standards. The survey report should meet the Secretary of the Interior's Standards and Guidelines for Identification and OHPO Archaeological Guidelines. You may also include new inventory forms with your survey, or update previous inventory forms. To complete this section, your survey report must include summary observations from your field survey, background research and eligibility determinations for each property that was evaluated within the APE.
- E. Project Findings.** Based on the conclusions you reached in completing Section 3, please choose one finding for your project. There are (mark one):
- ☐ Historic Properties Present in the APE:
 - ☒ No Historic Properties Present in the APE:

SECTION 4: SUPPORTING DOCUMENTATION

This information must be provided for all projects.

- A. Photographs must be keyed to a street-level map, and should be included as attachments to this application. Please label all forms, tables and CDs with the date of your submission and project name, as identified in Section 1. You must present enough documentation to clearly show existing conditions at your project site and convey details about the buildings, structures or sites that are described in your submission. Faxed or photocopied photographs are not acceptable. See Instructions for more info about photo submissions or 36 CFR § 800.11 for federal documentation standards.
1. Provide photos of the entire project site and take photos to/from historic properties from/towards your project site to support your determination of effect in Section 5.
 2. Provide current photos of all buildings/structures/sites described.
- B. Project plan, specifications, site drawings and any other media presentation that conveys detailed information about your project and its potential to affect historic properties.
- C. Copies or summaries of any comments provided by consulting parties or the public.

SECTION 5: DETERMINATION OF EFFECT

- A. **Request Preliminary Comments.** For challenging projects, provide as much information as possible in previous sections and ask OHPO to offer preliminary comments or make recommendations about how to proceed with your project consultation. This is recommended if your project involves effects to significant historic properties, if the public has concerns about your project's potential to affect historic properties, or if there may be challenging procedural issues related to your project. Please be aware that providing information in all Sections will still be required and that asking OHPO for preliminary comments may tend to delay completion of the review process for some projects.

1. We request preliminary comments from OHPO about this project:
YES ☐ NO ☒
2. Please specify as clearly as possible the particular issues that you would like OHPO to examine for your project (for example- help with developing an APE, addressing the concerns of consulting parties, survey methodology, etc.):

- B. **Determination of Effect.** If you believe that you have gathered enough information to conclude the Section 106 process, you may be ready to make a determination of effect and ask OHPO for concurrence, while considering public comments. Please select and mark one of the following determinations, then explain the basis for your decision on an attached sheet of paper:

- ☒ **No historic properties will be affected** based on 36 CFR § 800.4(d) (1). Please explain how you made this determination:

The proposed project will involve minimal ground disturbance consisting of the removal of up to 8,269 square yards (yd²) of soil to a maximum depth of 1 foot below grade. The area in which the project will take place is highly disturbed by past construction activities related to the former Ravenna Army Ammunition Plant. The disturbance in such areas is considered so great that any historic properties, if present, would have been destroyed or disturbed to the degree that they have lost historic integrity and have no value as historic properties.

No buildings or structures lie within the construction APE, and the APE does not lie within the viewshed of any buildings or structures. Accordingly, the project will have no effect on historical buildings or structures.

Based on the past disturbance history of the APE, it has been determined that there is no potential for the remedial action to impact historic properties.

With any ground disturbing activity there is always the potential for an inadvertent discovery of human remains or cultural items as defined by NAGPRA. If such items are encountered during the remedial action, excavation will immediately stop and the Camp Ravenna Range Control,

USACE and RVAAP will be notified. Standard Operation Procedure #6 in the OHARNG Integrated Cultural Resources Management Plan will be implemented and followed. Excavation will not resume until the site has been released by the OHARNG Cultural Resources Manager.

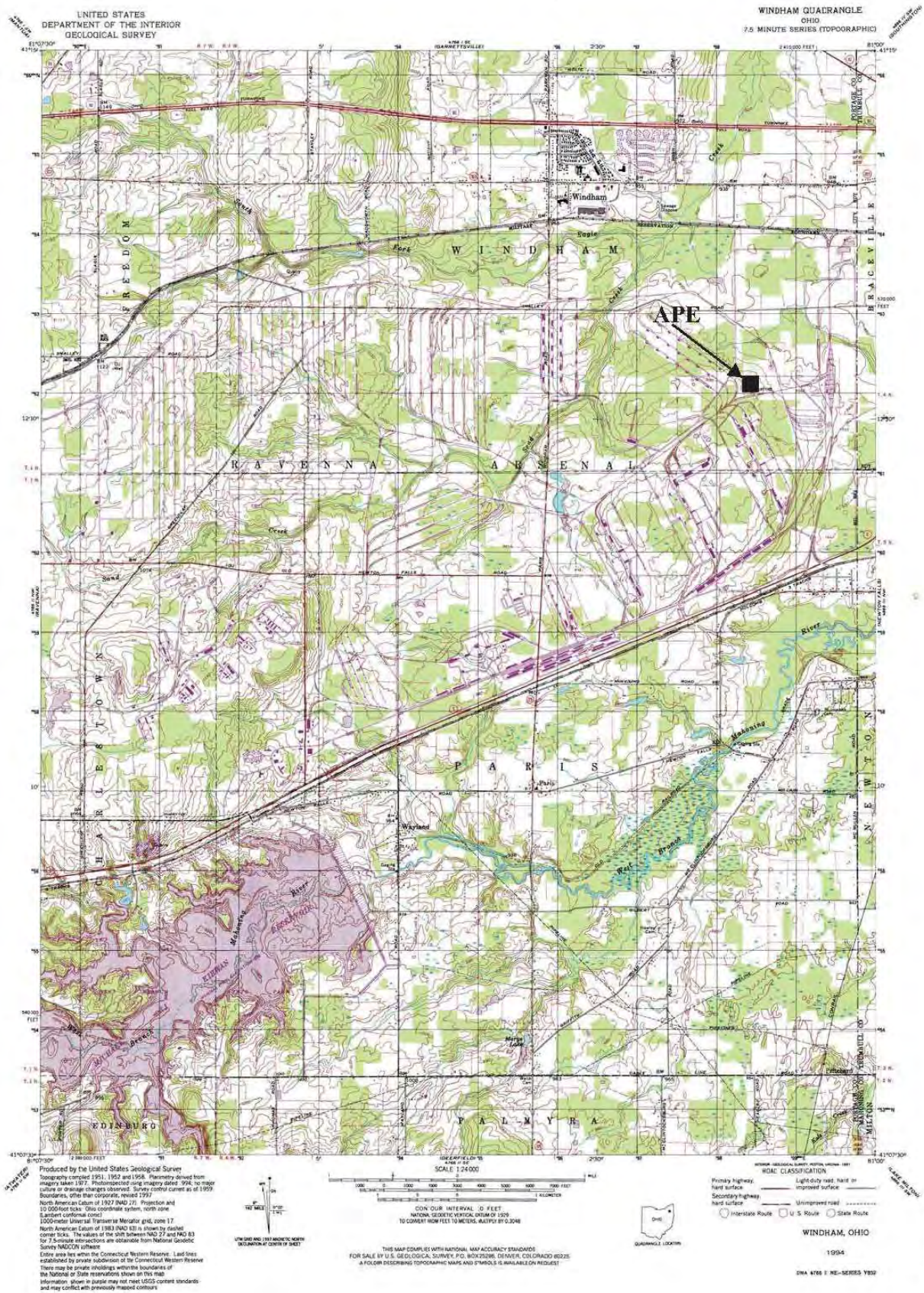
- ☐ **No Adverse Effect** [36 CFR § 800.5(b)] on historic properties. This finding cannot be used if there are no historic properties present in your project APE. Please explain why the Criteria of Adverse Effect, [36 CFR Part 800.5(a) (1)], were found not to be applicable for your project:
- ☐ **Adverse Effect** [36 CFR § 800.5(d) (2)] on historic properties. Please explain why the criteria of adverse effect, [36 CFR Part 800.5(a) (1)], were found to be applicable to your project. You may also include an explanation of how these adverse effects might be avoided, reduced or mitigated:

Please print and mail completed form and supporting documentation to:

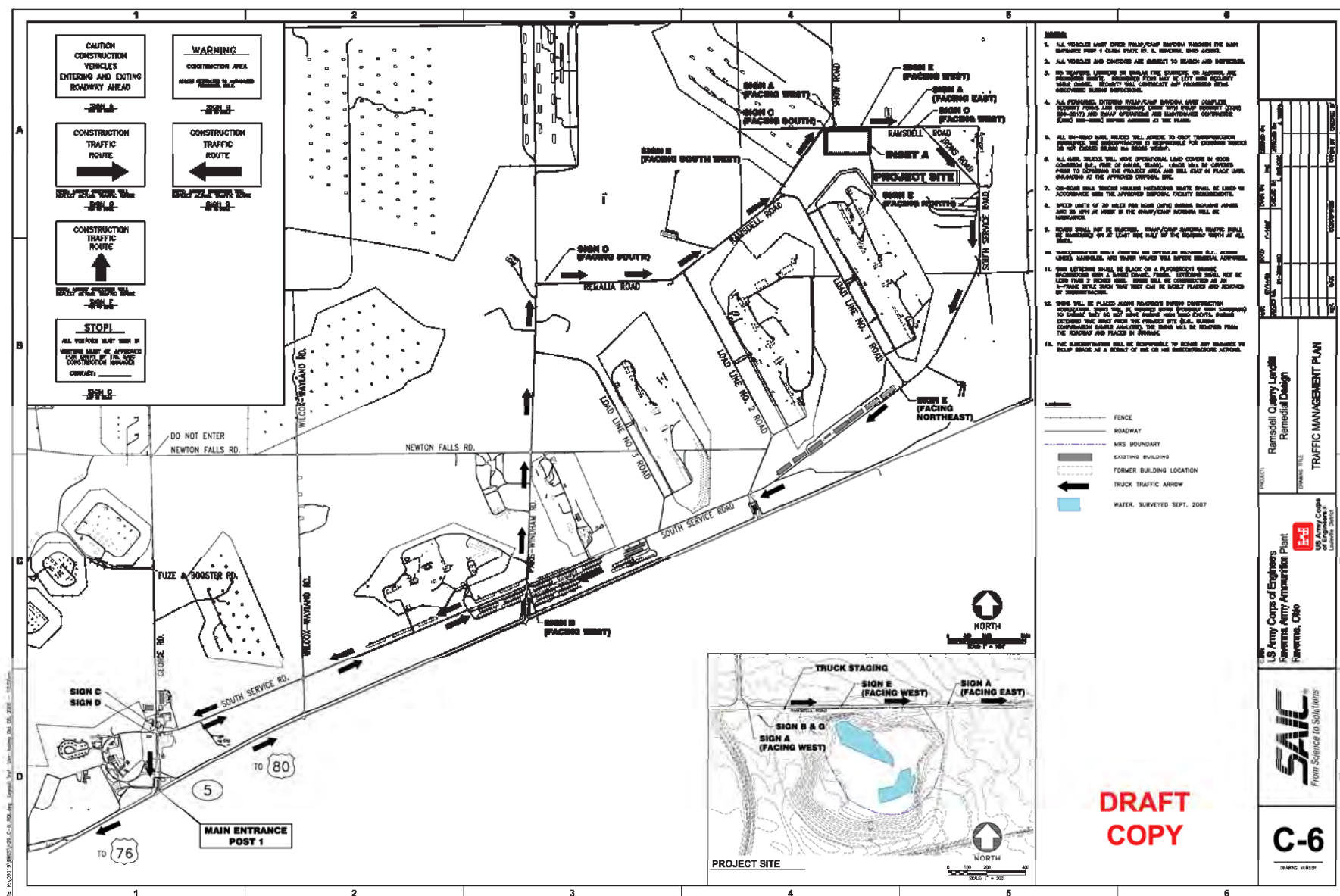
*Ohio Historic Preservation Office
Attn: Mark J. Epstein, Department Head
Resource Protection and Review
1982 Velma Avenue
Columbus, OH 43211-2497*

Attachments

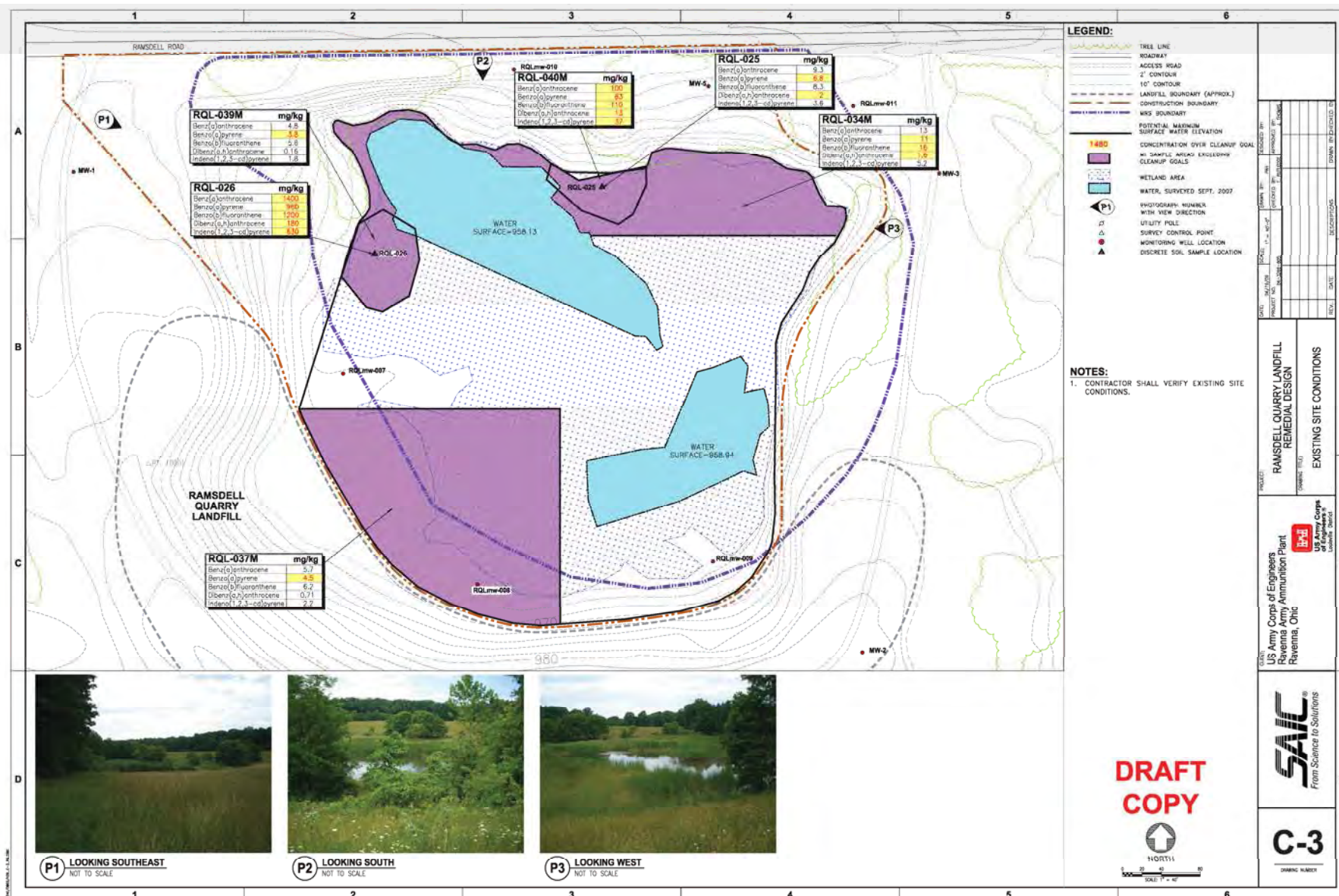
Attachment A-1. USGS Topographic Map of Windham, Ohio
Attachment A-2. Street Level Map of APE
Attachment A-3. Existing Site Conditions
Attachment A-4. Construction Site Plan
Attachment A-5. Soil Removal and Sampling Plan
Attachment A-6. Site Restoration Plan
Attachment A-7. RVAAP Prehistoric, Historic Cultural Resources and Sensitivity Model



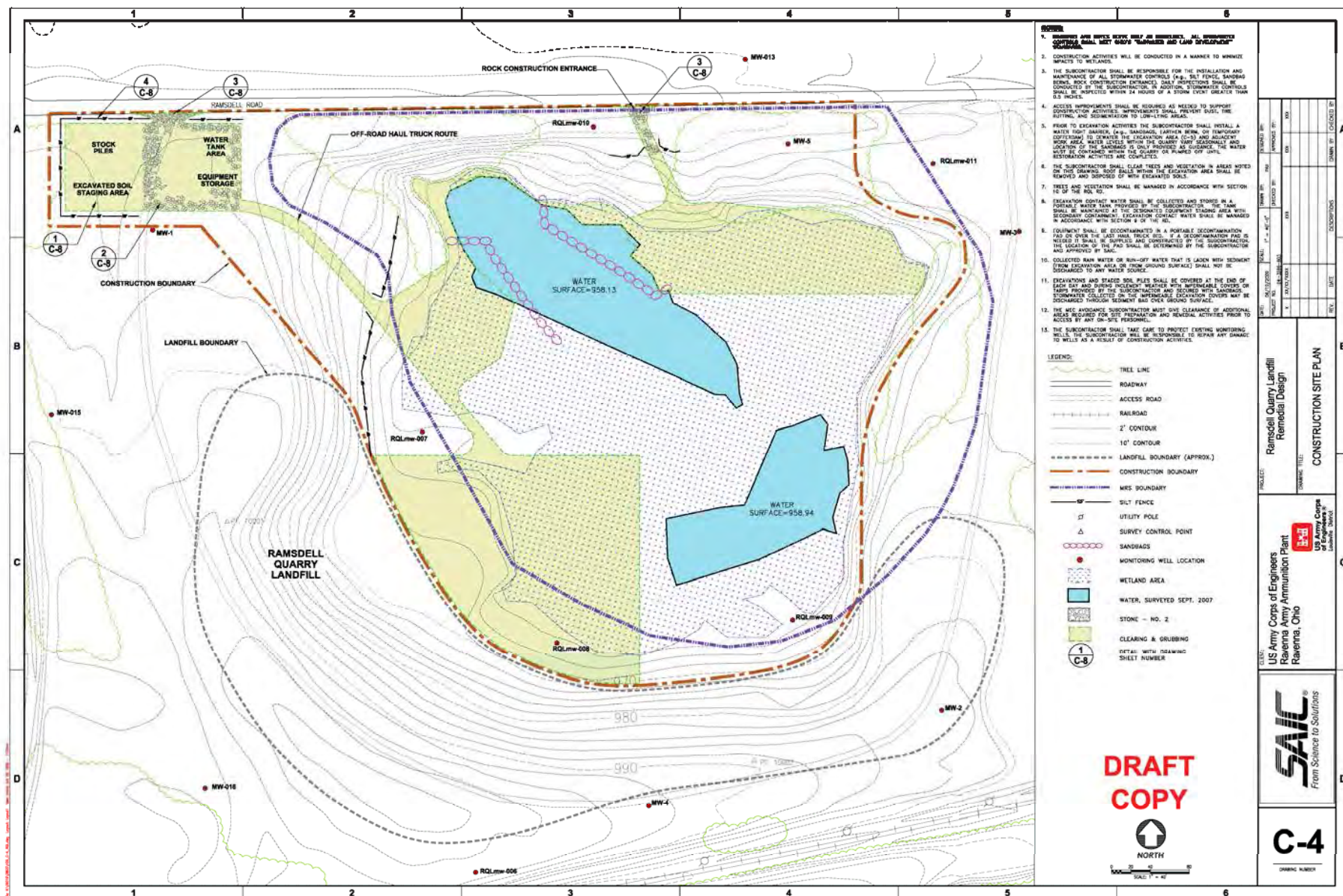
Attachment A-1. USGS Topographic Map of Windham, Ohio



Attachment A-2. Street-Level Map of APE

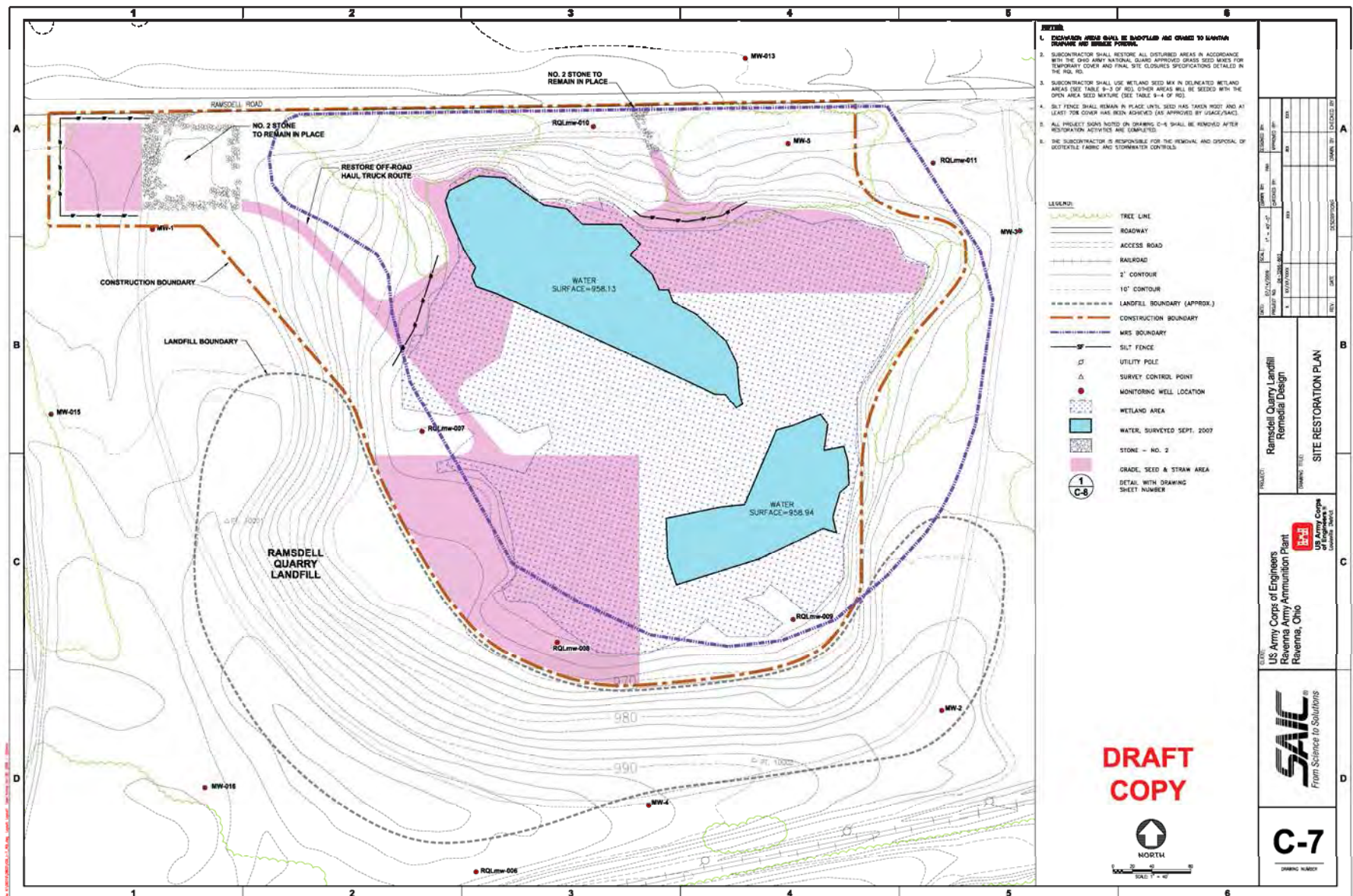


Attachment A-3. Existing Site Conditions

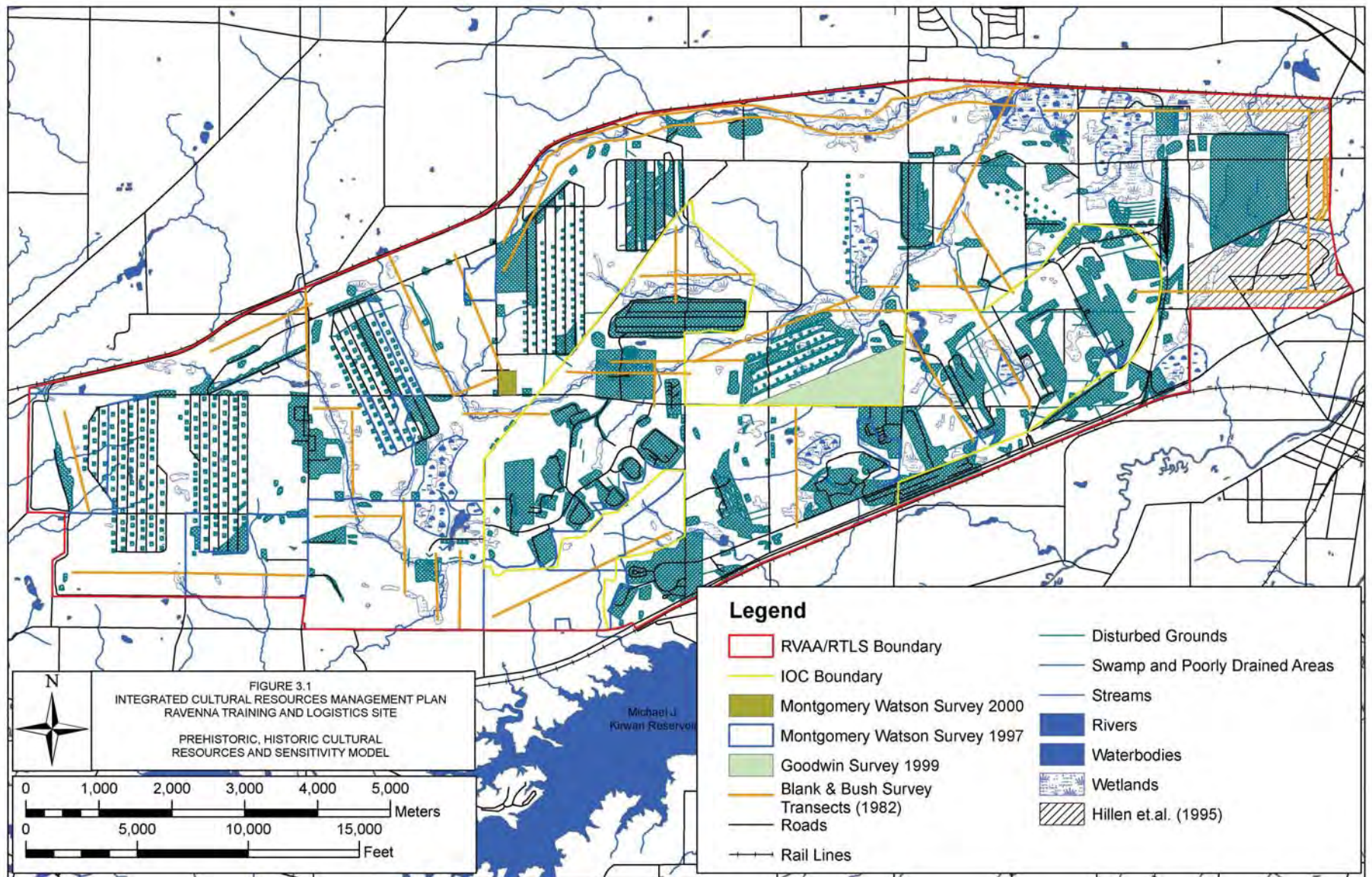


Attachment A-4. Construction Site Plan





Attachment A-6. Site Restoration Plan

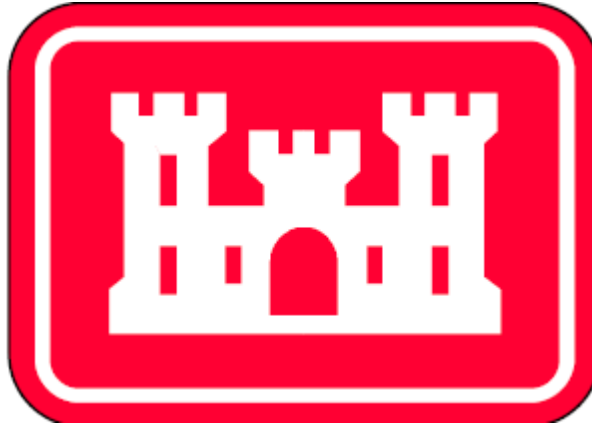


Attachment A-7. RVAAP Prehistoric, Historic Cultural Resources and Sensitivity Model

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Appendix A-3. MEC Investigation Report – USACE, Rock Island

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MEC Investigation

RAMSDELL QUARRY LANDFILL

RAVENNA ARMY AMMUNITION PLANT
RAVENNA, OHIO

21 APRIL 2010

Prepared by
US ARMY CORPS OF ENGINEERS
Rock Island District
And

US ARMY CORPS OF ENGINEERS
Louisville District
Prepared for

RAVENNA ARMY AMMUNITION PLANT
Ravenna, Ohio

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3.0 METHODOLOGY.....	3
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1.0 Site History.

The Ramsdell Quarry Landfill (RQL) is approximately 14 acres in size and located in the northeastern part of the Ravenna Army Ammunition Plant (RVAAP). The quarry at RQL is approximately 10 acres in size, and has intermittent ponds that have been observed to be dry for extended periods of time. The quarry was in operation until 1941. While in operation, it was excavated from 30 to 40 feet below existing grade. The excavated sandstone and quartzite pebble conglomerate was used for road and construction ballast. From 1946 until the 1950s the bottom of the quarry was used to burn explosives from Load Line 1. Reportedly, 18,000 500 LB. incendiary bombs were burned and liquid residues from annealing operations were disposed of in the quarry. This report only concerns the quarry and not the capped landfill portion of the site (see Appendix A Figure 1).

2.0 Purpose of the Investigation.

The small amount of soil remaining in the quarry has been sampled and found to contain Semi-Volatile Organic Compounds (SVOCs) above cleanup standards. The proposed remediation action requires removal of these soils. Based on prior usage of the site it was determined that an evaluation should be conducted as to the likelihood of Munitions and Explosives of Concern (MEC) being present in the soils.

3.0 Methodology.

On April 20-21, 2010, Joe W. Vann III and Nickolas Heleg-Greza, Occupational Safety and Health Specialists (Unexploded Ordnance), Rock Island District, U.S. Army Corps of Engineers, conducted a magnetometer sweep of areas RQL-039M through RQL-048M inclusive for the possible presence of MEC. A random path was followed using standard 'mag and flag' techniques and all anomalies encountered were excavated, examined and investigated in accordance with EM 385-1-97. In addition, the entire area was examined for the presence of any MEC on the surface. During the course of the investigation, no MEC was encountered. Munitions Debris (MD) was encountered in the form of plastic shipping containers for 81mm mortar projectiles, the rotating band protective rings for 155mm projectiles, and the remains of several AN-M76 500 Lb. Incendiary Bombs (see Appendix C).

4.0 Summary.

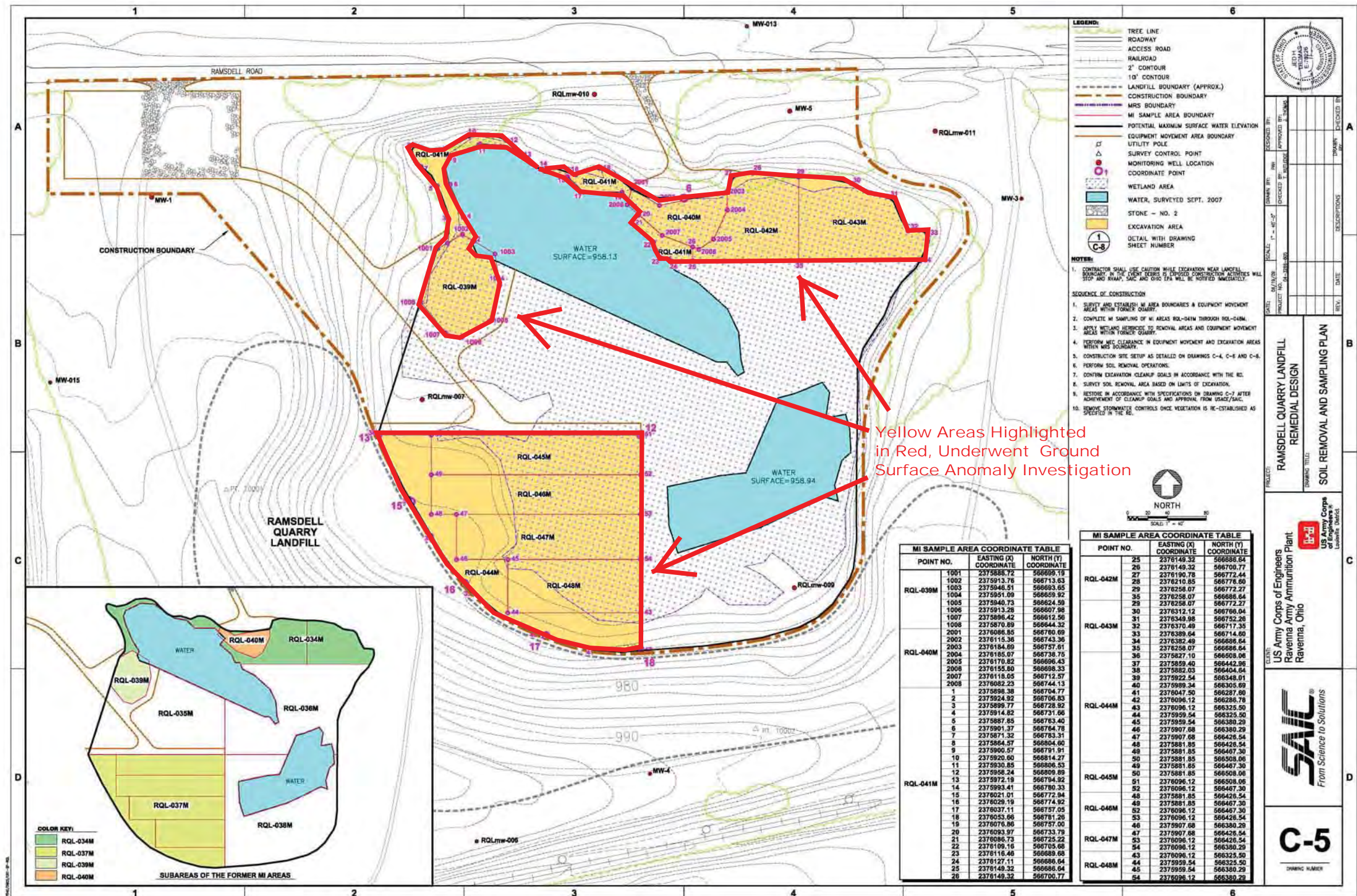
Based upon the investigation team and the past usage of the site, it has been determined that there is a low probability of MEC concern in regards to conducting contaminated soil removal activities in areas RQL-039M through RQL-048M, inclusive provided a qualified UXO technician is used in the position of construction support.

At the time burning operations were conducted, the area was exposed bedrock and anything not consumed would have been readily apparent. The AN-M76 Incendiary Bombs would not have had an igniter present and the filler was 180 Lb. of Oil Gel PT-1 (see Appendix B). This is a mixture containing rubber, magnesium powder, fuel oil, a thickening agent, and a small amount of gasoline. This is consistent with the SVOCs found in previous soil sampling

APPENDIX A

MAPS

AS MARKED-UP SAIC (USACE Contractor) DRAWING NUMBER
C-5 PROPOSED SOIL REMOVAL & SAMPLING PLAN RVAAP
RAMSDELL QUARRY LANDFILL - REMEDIAL DESIGN



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APPENDIX B REFERENCE

CHEMICAL, INCENDIARY, AND SMOKE BOMBS ("AN" SERIES)

The Navy is procuring, at the present time, Incendiary Bombs M47A2 loaded with PWP. PWP consists of 75% WP and 25% plasticizer; it is more effective than WP, since it gives longer burning, reduces pillaring effect, and increases the anti-personnel effect. The increased smoke efficiency is due to the larger particles of controlled size which result from the use of PWP. The bomb contains 75 pounds of PWP and requires a Burster M20, which contains $\frac{3}{4}$ -inch-diameter tetryl pellets.

500-pound Incendiary AN-M76

Over-all length, inches.....	59.2
Body length, inches.....	45.3
Body diameter, inches.....	14.0
Wall thickness, inch.....	0.3
Tail length, inches.....	13.9
Tail width, inches.....	14.8
Tail weight, pounds.....	12.3
Filling	Oil Gel PT 1
Weight of filling, pounds.....	180
Total weight, pounds.....	475
Charge/weight ratio.....	38%

Fuzing

Nose — AN — M103A1, AN — M103, M103, M135A1, M136, M136A1, M139, M139A1, AN—M139A1, M140, M140A1, AN—M140A1, M163, M164, M165, M166, T82.

TAIL—AN—M101A2, AN—M101A1, M161.

Construction: The body is of one-piece cast-steel construction, with a base plate welded to body. A burster tube 3.5 inches in diameter, 35.75 inches long, running through the center of bomb, is welded to the nose and to the base plate. The Adapter Booster M115 screws into the base plate. The bomb tail is a cast-steel sleeve with four sheet-steel fins and internal box-type struts. Suspension is accomplished by two suspension lugs welded on the body seven inches on each side of center of gravity and by a single lug, 180° removed at the center of gravity.

Operation: On impact, the fuzes function and detonate the 1.25-pound tetrytol burster in the burster tube and initiate the nine-pound white

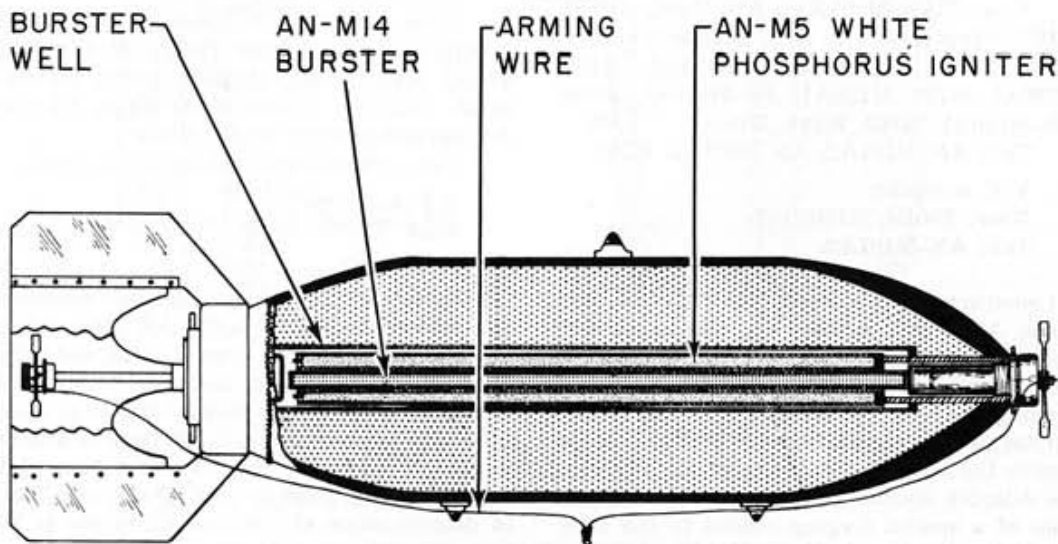


Figure 307. 500-pound Incendiary Bomb AN-M76

CONFIDENTIAL

433

APPENDIX C PHOTOGRAPHS



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



AN-M76 base plate



Cultural Debris



AN-M76



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



Cultural Debris



AN-M76 Base Plate

APPENDIX D

RAVENNA AAP BRAC-D ACCEPTANCE E-MAIL

Chanda, Thomas M LRL

From: Patterson, Mark C Mr CIV USA OSA [mark.c.patterson@us.army.mil]
Sent: Wednesday, April 21, 2010 4:14 PM
To: Chanda, Thomas M LRL
Cc: Beckham, Glen LRL; Peters, Nathaniel II LRL
Subject: Ramsdell MEC probability

Tom,

I just reviewed the latest version of the report by Nick Heleg-Graza & Joe Vann concerning their investigation of potential MEC at Ramsdell Quarry. I have no changes. It can be provided to SAIC. I support the conclusion of the report that the probability of encountering MEC is low and only UXO construction support is needed for SAIC's work. Any findings by SAIC during remediation that may change the probability assessment should be reported to me in order to determine if the probability needs to be changed.

Thanks

Mark Patterson

RVAAP/FWDA BEC

330-358-7312

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Appendix A-4. Utility Clearance

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Thomas, Jed H.

From: McGee, James D Mr CTR USA OSA USA [jim.d.mcgee@us.army.mil]
Sent: Wednesday, June 16, 2010 11:42 AM
To: Thomas, Jed H.
Cc: Mark Patterson
Subject: RE: RQL Remedial Action ~ Utility Clearance

Jed:

Your summary accurately describes our conversation of 6-16-10.

Jim McGee

From: Thomas, Jed H. [mailto:JED.H.THOMAS@saic.com]
Sent: Wednesday, June 16, 2010 10:15 AM
To: McGee, James D Mr CTR OSD OSA USA
Cc: Sprinzl, Richard E.
Subject: RQL Remedial Action ~ Utility Clearance

Jim - Below summarizes our conversation regarding a utilities and utility clearance in the areas we will be using for the Ramsdell Quarry Landfill Remedial Action.

1. There are no known utilities in the remedial action areas.
2. If utilities are encountered and damaged, they do not need to be replaced or repaired.
3. If we encounter any electrical lines, you recommended assuming it is active until proving otherwise.
4. Well exist in or near the areas. SAIC/Toltest will use caution when operating around these wells.

Please let me know if I am missing anything or if this accurately summarizes our conversation. We expect to start mobilization and site set up activities next week.

Thank you,
Jed

Jed Thomas, P.E. | SAIC
Environmental Engineer | Energy, Environment & Infrastructure Business Unit (E2IBU)
phone: 330.405.5802 | fax 330.405.9811
email: jed.h.thomas@saic.com

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Appendix A-5. Herbicide Application Notification Forms

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Thomas, Jed H.

From: prvs=077188370e=john.estenik@epa.state.oh.us on behalf of John Estenik
<John.Estenik@epa.state.oh.us>
Sent: Friday, June 04, 2010 10:12 AM
To: Thomas, Jed H.
Subject: Re: Aquatic Herbicide Notification Form for the Ramsdell Quarry Landfill

I have reviewed your request to apply herbicide at the Ramsdell Quarry Landfill. I do not see any problems with your request. Applications of the identified herbicide can occur at the identified location through December 2010.

Contact me if there are any problems or concerns.

>>> "Thomas, Jed H." <JED.H.THOMAS@saic.com> 6/3/2010 11:46 AM >>>
John -

As requested during our conversation from 2 weeks ago, attached is the Aquatic Herbicide Notification Form for the application of herbicides within the Ramsdell Quarry Landfill area of concern at the Ravenna Army Ammunition Plant. Please review this form and let me know if everything is acceptable or if there are any issues.

Depending upon weather and other logistics, we would like to apply the herbicide either next week or the following week.

Thank you for your review and let me know if you need anything else.

Jed

Jed Thomas, P.E. | SAIC

Environmental Engineer | Energy, Environment & Infrastructure Business Unit (E2IBU)

phone: 330.405.5802 | fax 330.405.9811

email: jed.h.thomas@saic.com <<mailto:jed.h.thomas@saic.com>>

Please consider the environment before printing this email.

Ohio Environmental Protection Agency
Unless otherwise provided by law,

this communication and any response to it constitutes a public record.

Aquatic Herbicide Notification Form

Submitted to:

Ohio Environmental Protection Agency
Division of Water Quality Planning and Assessment

Applicator Name and Address: EnviroScience (License # 89895)
POC - Tara Miletti (Applicators License # 104984)
3781 Darrow Rd.
Stow OH 44224
Work: 330.688.0111
Fax: 330.688.3858

Client Information: Mr. Mark Patterson, Facility Manager
Ravenna Army Ammunition Plant
8451 State Route 5, Building 1037
Ravenna, Ohio 44266-9297
330-358-7311

Location: Ramsdell Quarry Landfill area of concern within the
Ravenna Army Ammunition Plant. The AOC is located
at the eastern portion of the facility. The quarry is
located southeast of the Snow Road and Ramsdell Road
intersection.

Site Information: Approximately 1.5 acres of wetlands will have herbicide
applied. A pond intermittently/seasonally forms near the
middle of the application area.

Target Aquatic Species: Typha angustifolia (narrowleaved cattail), Phragmites
australis (reed grass), and reed canary grass

Non-target Aquatic Organisms: No known threatened or endangered species within
treatment area.

Surface Water (Potable Drinking) Intake: Yes () No (X)

Primary Contact Usage: Yes () No (X)
If yes, list types of contact: Area is restricted for use by
the U.S. Army and Ohio Army National Guard.
Restrictions limit use to personnel performing site
inspections by U.S. Army or OHARNG personnel.

<u>Requested Chemical(s)</u>	<u>Application Rates</u>	<u>Desired Concentrations</u>
Glyphosate	6 pints per acre	spray to wet not runoff

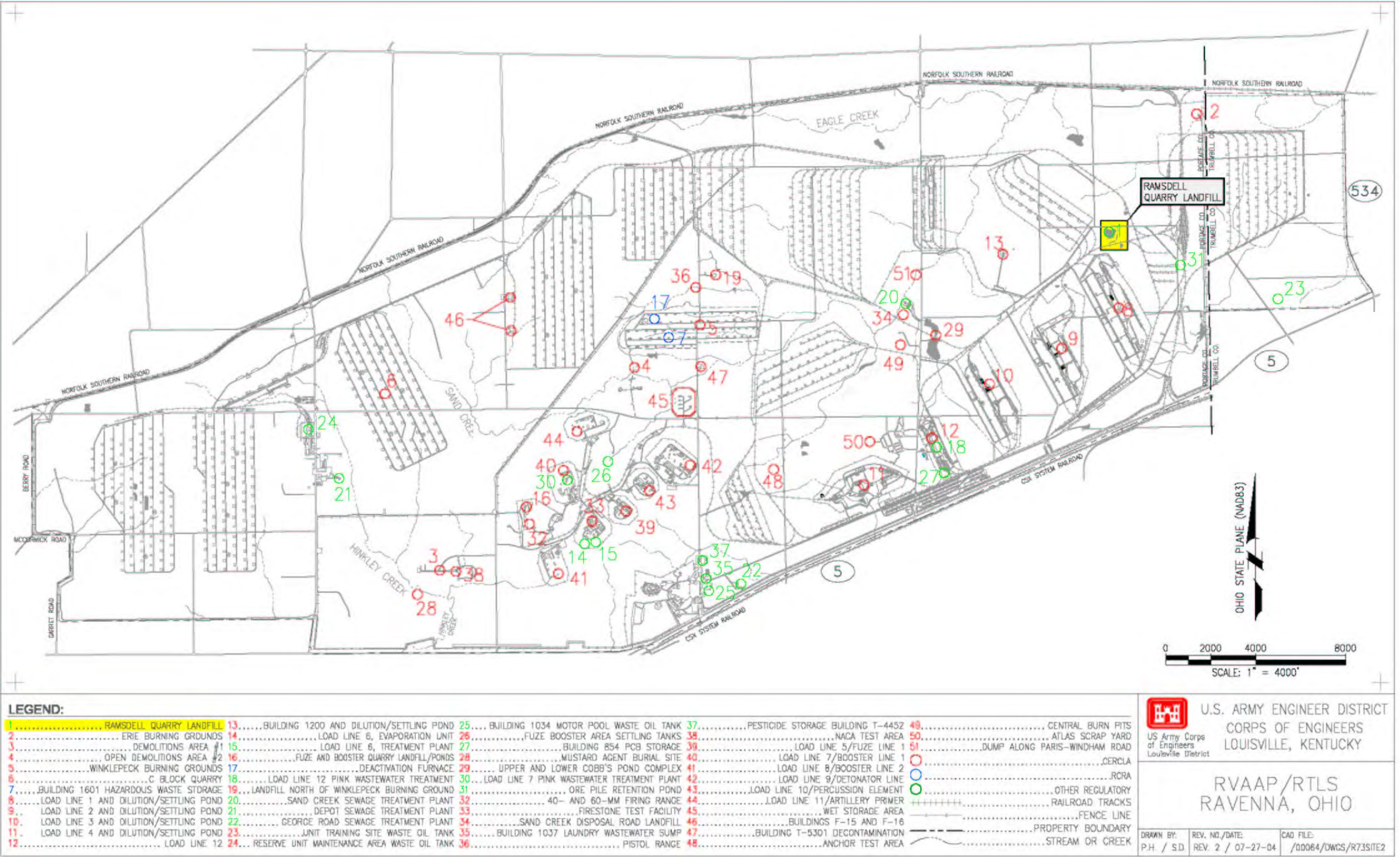
<u>Water Use Restrictions:</u>	<u>Glyphosate</u>
Drinking	0 days
Swimming	0 days
Fish Consumption	0 days
Irrigation / Livestock	0 days

Approximate Application Date (s): Glyphosate: One time application in May or June 2010

Additional Information: Maps of Ramsdell within the RVAAP is attached.

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File: W:\CAD Coa\Ravenna\PRC 2005\Location Map\RVAMP Staging Layout: Ramsdell User: williams Jun 20, 2007 - 10:04am



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Ohio Army National Guard
DAILY PEST CONTROL SUMMARY SHEET

Print or Type All Information

1. General Information

Date: 06/10/10

Treatment Location/Address: 8451 St Rt. 5 Ravenna, Ohio

Licensed Applicator/Operator Name: EnviroScience, Tara Miletti

License # ES 84895 TM=104984 Expiration Date: 9/30/10 Categories: 3A, 4A, 5, core

Employer: EnviroScience, Inc Telephone: 330-688-0111

Employer Address: 3781 Darrow Rd., Stow OH 44224

2. Weather Conditions

Sky Conditions: ☒ Clear ☐ Partly Cloudy ☐ Overcast ☐ Other: _____

Wind Speed: ☒ Calm ☒ 1-5 mph ☐ 5-10 mph ☐ 10-15 mph ☐ 15-20 mph ☐ 20+ mph

Wind Direction out of the: ☒ N ☐ NE ☐ E ☐ SE ☐ S ☐ SW ☐ W ☐ NW

Precipitation: ☒ None ☐ Scat Rain ☐ Lt Rain ☐ Hvy Rain ☐ Snow ☐ Other: _____

Temperature: ☐ 30-40 ☐ 40-50 ☐ 50-60 ☐ 60-70 ☒ 70-80 ☐ 80-90 ☐ 90-100 ☐ 100+

3. Pesticide Application Data

Target Pest: Phragmites australis Total Area Treated: 1 ac

Specific Treatment Location(s): Ramsdell Quarry Landfill

Type of Application Equipment: Backpack Sprayer

Application Start Time: 1100 Application Finish Time: 1500

Carrier Used: ☒ Water Amount Used: 20 gal Application Rate: 20 gal/ac

☐ Other: _____ Amount Used: _____ Application Rate: _____

Name of Adjuvant Used: _____ Amount of Adjuvant Used: _____

	Trade Name	Chemical Name	EPA Reg. #	Lot #	Form	Rate	Amount Used	Total lbs A.I.
1.	<u>Rodeo</u>	<u>glyphosate</u>	<u>62719-324</u>	<u>WL-22162N16</u>	<u>Liquid</u>	<u>0.625 gal/ac</u>	<u>0.625 gal</u>	<u>3.375 lbs</u>
2.	_____	_____	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____	_____	_____

4. Non-Chemical Control

Pest Name & Number: _____ Control Method: _____

Location(S): _____

5. Comments: _____

Ohio Army National Guard
DAILY PEST CONTROL SUMMARY SHEET

Print or Type All Information

1. General Information

Date: 06/10/10

Treatment Location/Address: 8451 St Rt 5 Ravenna, OH

Licensed Applicator/Operator Name: Enviro Science, Tara Miletti

License # ES 89895 ^{TM=104984} Expiration Date: 9/30/10 Categories: 3A, 4A, 5, CORE

Employer: Enviro Science Telephone: 330-688-0111

Employer Address: 3781 Darrow Rd, Stow OH 44224

2. Weather Conditions

Sky Conditions: Clear ☒ Partly Cloudy ☒ Overcast ☐ Other:

Wind Speed: Calm ☒ 1-5 mph ☐ 5-10 mph ☐ 10-15 mph ☐ 15-20 mph ☐ 20+ mph

Wind Direction out of the: N ☐ NE ☒ E ☐ SE ☐ S ☐ SW ☐ W ☐ NW

Precipitation: None ☒ Scat Rain ☐ Lt Rain ☐ Hvy Rain ☐ Snow ☐ Other:

Temperature: 30-40 ☐ 40-50 ☐ 50-60 ☐ 60-70 ☒ 70-80 ☐ 80-90 ☐ 90-100 ☐ 100+

3. Pesticide Application Data

Target Pest: Phragmites australis Total Area Treated: ~ 0.5 ac

Specific Treatment Location(s): Ramsdell Quarry Landfill

Type of Application Equipment: Backpack sprayer

Application Start Time: 1015 Application Finish Time: 1300

Carrier Used: ☒ Water Amount Used: 12 gal Application Rate: ~ 20 gal/ac

Other: Amount Used: Application Rate:

Name of Adjuvant Used: Amount of Adjuvant Used:

	Trade Name	Chemical Name	EPA Reg. #	Lot #	Form	Rate	Amount Used	Total lbs A.I.
1.	<u>Rodeo</u>	<u>glyphosate</u>	<u>62719-324</u>	<u>WL-22162N16</u>	<u>Liquid</u>	<u>0.35 gal/ac</u>	<u>0.35 gal</u>	<u>2.025 lbs</u>
2.	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
3.	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
4.	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

4. Non-Chemical Control

Pest Name & Number: Control Method:

Location(S):

5. Comments:

Appendix A-6. Ohio EPA Approvals of Backfill Source

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Thomas, Jed H.

From: prvs=0768168309=todd.fisher@epa.state.oh.us on behalf of Todd Fisher
<todd.fisher@epa.state.oh.us>
Sent: Tuesday, June 01, 2010 3:01 PM
To: Eileen Mohr; Thomas, Jed H.
Cc: Todd Fisher; Sprinzl, Richard E. ; Thomas M LRL Chanda
Subject: Re: SAIC Backfill Source ~ RQL and Load Line 12 Remedial Actions

Jed,

It is acceptable to use the backfill material from the same pile that was used during the FBQ RA. Anything over 4,000 cubic yards will require an additional sample(s).

If you have any questions, please give me a call.

Thanks,

Todd

Todd R. Fisher
Project Coordinator
Ohio Environmental Protection Agency
Division of Emergency and Remedial Response
2110 East Aurora Rd.
Twinsburg, OH 44087

Work: (330) 963-1148
RVAAP Field Office: (330) 548-3860
Cell: (330) 389-0521
FAX: (330) 487-0769
email address: Todd.Fisher@epa.state.oh.us

>>> "Thomas, Jed H." <JED.H.THOMAS@saic.com> Thursday, May 27, 2010 2:29 PM >>>
Todd and Eileen -

With respect to backfilling areas at RQL and Load Line 12, we plan to use the same backfill source that we used during the Fuze and Booster Quarry Landfill/Ponds Remedial Action. This is the same soil pile that was sampled at the Route 5 Sand and Gravel and subsequently approved in the e-mail below.

As stated in the *Final Remedial Action Report for the RVAAP-16 Fuze and Booster Quarry Landfill/Ponds*, we used 55 cubic yards of this soil during the FBQ Remedial Action. Per Ohio EPA guidance, we are required to sample every 4,000 cubic yards of backfill soil used. At this point, we do not anticipate that we will exceed a total of 4,000 cubic yards of backfill soil between the three remedial actions. If it is determined in the field that our total backfill will exceed 4,000 cubic yards, we will identify another source and have it sampled for approval.

Please let me know if it is acceptable to use this same backfill source for the RQL and Load Line 12 Remedial Actions up to 4,000 cubic yards.

Thank you,
Jed

From: prvs=0564c9aba9=todd.fisher@epa.state.oh.us [<mailto:prvs=0564c9aba9=todd.fisher@epa.state.oh.us>] **On**
Behalf Of Todd Fisher
Sent: Monday, November 09, 2009 12:32 PM
To: Eileen Mohr; Thomas, Jed H.

Cc: Thomas M LRL Chanda
Subject: Re: SAIC Backfill Source ~ Sampling Results

Jed,

I looked over the laboratory results and conclude that the backfill source is acceptable for use with FBQ Remedial Action activities.

Thanks,

Todd

Todd R. Fisher
Project Coordinator
Ohio Environmental Protection Agency
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email address: Todd.Fisher@epa.state.oh.us

>>> "Thomas, Jed H." <JED.H.THOMAS@saic.com> Monday, November 09, 2009 12:16 PM >>>
Todd and Eileen -

Attached are the sample results for the backfill source at Route 5 Sand and Gravel. The sample collected was Sample ID FBQ-QC-0519-QC. The data summary incorrectly list it as FB2-QC-0519-QC. I will ensure they correct this. Basically, the results are as follows:

- 1) All the inorganic concentrations were below the RVAAP surface or subsurface background values; and
- 2) The VOCs, SVOCs, Pesticides, PCBs, Explosives, and Propellants concentrations were either nondetectable or the lab estimated a concentration below the laboratory reporting levels (RLs).


Please let me know if you approve our use of this source for the FBQ Remedial Action. If you can let me know ASAP, I would appreciate it as we are currently mobilizing for the restoration activities.

At this point, we will use minimal quantities of this source at FBQ. If approved, we will use it at LL12 and RQL as well. We have the area staked off and Route 5 Sand and Gravel agreed to reserve the area for our future use.

Thank you,
Jed

Jed Thomas, P.E. | SAIC
Environmental Engineer | Energy, Environment & Infrastructure Business Unit (E2IBU)
phone: 330.405.5802 | fax 330.405.9811
email: jed.h.thomas@saic.com

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Ohio Environmental Protection Agency This communication and any response to it may constitute a public record and thus may be publicly available to anyone who requests it. 

Thomas, Jed H.

From: prvs=0823882105=todd.fisher@epa.state.oh.us on behalf of Todd Fisher
<todd.fisher@epa.state.oh.us>
Sent: Tuesday, July 27, 2010 6:38 AM
To: Eileen Mohr; Thomas, Jed H.
Cc: Sprinzi, Richard E. ; Thomas.M.Chanda@usace.army.mil
Subject: Re: Backfill Source for Ramsdell Quarry Landfill Remedial Action

Jed,

The data looks good. You may use this material for backfilling.

Todd

Todd R. Fisher
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email address: Todd.Fisher@epa.state.oh.us
>>> "Thomas, Jed H." <JED.H.THOMAS@saic.com> 07/25/10 3:19 PM >>>
Todd and Eileen -

As a contingency to whatever path is determined for the remedy at the Ramsdell Quarry Landfill, we collected additional samples from two backfill sources at the Charlestown Sand and Gravel (commonly known as the Route 5 Sand and Gravel). Although we have a current sample stockpile at the same sand and gravel pit, we collected these samples to:

- 1) make sure we have enough backfill material in the event that we exceed the 4,000 cubic yards in our current stockpile; and
- 2) have material that is a suitable topsoil for wetland restoration.

A written summary of the results for samples RQL-QC-1095-QC and RQL-QC-1096-QC are below.

- All metal concentrations were below either the surface or

subsurface background values or below the laboratory's reporting limits.

- All Pesticides and PCBs concentrations were not detected.
- All SVOCs, VOCs, explosives, and propellants concentrations were either not detected or below the laboratory's reporting limits.

As we all know, we are not sure what remedy we will ultimately implement to complete activities at the Ramsdell Quarry Landfill. However, please review the data associated with this sample and let me know if it is acceptable to use as backfill. It may be necessary to use this material if further excavation is needed.

Thank you,

Jed

Jed Thomas, P.E. | SAIC

Project Manager

Energy, Environment & Infrastructure Solutions

phone: 330.405.5802 | fax 330.405.9811

email: jed.h.thomas@saic.com <<mailto:jed.h.thomas@saic.com>>

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Ohio Environmental Protection Agency
Unless otherwise provided by law,
this communication and any response to it constitutes a public record.

Analysis Type	Sample Id	CAS Number	Units	RQL-QC-1095-QC	RQL-QC-1096-QC
	Date			06/30/2010	06/30/2010
	Analyte				
Metals	Aluminum	7429-90-5	mg/kg	10900	8650
Metals	Antimony	7440-36-0	mg/kg	0.089 J	0.096 J
Metals	Arsenic	7440-38-2	mg/kg	12.3	10.3
Metals	Barium	7440-39-3	mg/kg	75.4	50.2
Metals	Beryllium	7440-41-7	mg/kg	0.64	0.46
Metals	Cadmium	7440-43-9	mg/kg	0.058 J	0.081 J
Metals	Calcium	7440-70-2	mg/kg	11200	934
Metals	Chromium	7440-47-3	mg/kg	20.1	16.3
Metals	Cobalt	7440-48-4	mg/kg	11.7	9.4
Metals	Copper	7440-50-8	mg/kg	18	12.6
Metals	Iron	7439-89-6	mg/kg	27700	21800
Metals	Lead	7439-92-1	mg/kg	12.1	15.1
Metals	Magnesium	7439-95-4	mg/kg	4770	1880
Metals	Manganese	7439-96-5	mg/kg	551	471
Metals	Mercury	7439-97-6	mg/kg	0.037 J	0.19
Metals	Nickel	7440-02-0	mg/kg	28.1	15.7
Metals	Potassium	7440-09-7	mg/kg	1400	684
Metals	Selenium	7782-49-2	mg/kg	1.1	0.98
Metals	Silver	7440-22-4	mg/kg	0.021 J	0.022 J
Metals	Sodium	7440-23-5	mg/kg	59.7 J	26.8 J
Metals	Thallium	7440-28-0	mg/kg	0.18 J	0.14 J
Metals	Vanadium	7440-62-2	mg/kg	19.8	18.8
Metals	Zinc	7440-66-6	mg/kg	55.6	38.9
Organics-Explosives	1,3,5-Trinitrobenzene	99-35-4	mg/kg	<0.25 U	<0.25 U
Organics-Explosives	1,3-Dinitrobenzene	99-65-0	mg/kg	<0.25 U	<0.25 U
Organics-Explosives	2,4,6-Trinitrotoluene	118-96-7	mg/kg	<0.25 U	<0.25 U
Organics-Explosives	2,4-Dinitrotoluene	121-14-2	mg/kg	<0.25 U	<0.25 U
Organics-Explosives	2,6-Dinitrotoluene	606-20-2	mg/kg	0.0075 J	<0.25 U
Organics-Explosives	2-Amino-4,6-Dinitrotoluene	35572-78-2	mg/kg	<0.25 U	<0.25 U
Organics-Explosives	2-Nitrotoluene	88-72-2	mg/kg	<0.25 U	<0.25 U
Organics-Explosives	3-Nitrotoluene	99-08-1	mg/kg	<0.25 U	<0.25 U
Organics-Explosives	4-Amino-2,6-Dinitrotoluene	19406-51-0	mg/kg	<0.25 U	<0.25 U
Organics-Explosives	4-Nitrotoluene	99-99-0	mg/kg	<0.5 U	<0.5 U
Organics-Explosives	HMX	2691-41-0	mg/kg	<0.25 U	<0.25 U
Organics-Explosives	Nitrobenzene	98-95-3	mg/kg	<0.25 U	<0.25 U
Organics-Explosives	Nitrocellulose	9004-70-0	mg/kg	2.3 J	2.7 J
Organics-Explosives	Nitroglycerin	55-63-0	mg/kg	<0.5 U	<0.5 U
Organics-Explosives	Nitroguanidine	556-88-7	mg/kg	<0.25 U	<0.25 U
Organics-Explosives	PETN	78-11-5	mg/kg	<0.5 U	<0.5 U
Organics-Explosives	RDX	121-82-4	mg/kg	<0.25 U	<0.25 U
Organics-Explosives	Tetryl	479-45-8	mg/kg	<0.25 U	<0.25 U
Organics-Pesticide/PCB	4,4'-DDD	72-54-8	mg/kg	<0.002 U	<0.002 U
Organics-Pesticide/PCB	4,4'-DDE	72-55-9	mg/kg	<0.0017 U	<0.0017 U
Organics-Pesticide/PCB	4,4'-DDT	50-29-3	mg/kg	<0.002 U	<0.002 U
Organics-Pesticide/PCB	Aldrin	309-00-2	mg/kg	<0.0041 U	<0.0041 U
Organics-Pesticide/PCB	Dieldrin	60-57-1	mg/kg	<0.0017 U	<0.0017 U
Organics-Pesticide/PCB	Endosulfan I	959-98-8	mg/kg	<0.0017 U	<0.0017 U
Organics-Pesticide/PCB	Endosulfan II	33213-65-9	mg/kg	<0.0026 U	<0.0025 U
Organics-Pesticide/PCB	Endosulfan sulfate	1031-07-8	mg/kg	<0.0031 U	<0.003 U

Analysis Type	Sample Id	CAS Number	Units	RQL-QC-1095-QC	RQL-QC-1096-QC
	Date			06/30/2010	06/30/2010
	Analyte				
Organics-Pesticide/PCB	Endrin	72-20-8	mg/kg	<0.0017 U	<0.0017 U
Organics-Pesticide/PCB	Endrin aldehyde	7421-93-4	mg/kg	<0.0031 UJ	<0.003 U
Organics-Pesticide/PCB	Endrin ketone	53494-70-5	mg/kg	<0.002 U	<0.002 U
Organics-Pesticide/PCB	Heptachlor	76-44-8	mg/kg	<0.0036 UJ	<0.0036 U
Organics-Pesticide/PCB	Heptachlor epoxide	1024-57-3	mg/kg	<0.0026 U	<0.0025 U
Organics-Pesticide/PCB	Lindane	58-89-9	mg/kg	<0.0026 U	<0.0025 U
Organics-Pesticide/PCB	Methoxychlor	72-43-5	mg/kg	<0.0051 UJ	<0.0051 U
Organics-Pesticide/PCB	PCB-1016	12674-11-2	mg/kg	<0.034 U	<0.034 U
Organics-Pesticide/PCB	PCB-1221	11104-28-2	mg/kg	<0.034 U	<0.034 U
Organics-Pesticide/PCB	PCB-1232	11141-16-5	mg/kg	<0.034 U	<0.034 U
Organics-Pesticide/PCB	PCB-1242	53469-21-9	mg/kg	<0.034 U	<0.034 U
Organics-Pesticide/PCB	PCB-1248	12672-29-6	mg/kg	<0.034 U	<0.034 U
Organics-Pesticide/PCB	PCB-1254	11097-69-1	mg/kg	<0.034 U	<0.034 U
Organics-Pesticide/PCB	PCB-1260	11096-82-5	mg/kg	<0.034 U	<0.034 U
Organics-Pesticide/PCB	Toxaphene	8001-35-2	mg/kg	<0.068 U	<0.068 U
Organics-Pesticide/PCB	alpha-BHC	319-84-6	mg/kg	<0.0026 U	<0.0025 U
Organics-Pesticide/PCB	alpha-Chlordane	5103-71-9	mg/kg	<0.0031 U	<0.003 U
Organics-Pesticide/PCB	beta-BHC	319-85-7	mg/kg	<0.0036 U	<0.0036 U
Organics-Pesticide/PCB	delta-BHC	319-86-8	mg/kg	<0.0041 U	<0.0041 U
Organics-Pesticide/PCB	gamma-Chlordane	5103-74-2	mg/kg	<0.0017 U	<0.0017 U
Organics-Semivolatiles	1,2,4-Trichlorobenzene	120-82-1	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	1,2-Dichlorobenzene	95-50-1	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	1,3-Dichlorobenzene	541-73-1	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	1,4-Dichlorobenzene	106-46-7	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	2,4,5-Trichlorophenol	95-95-4	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	2,4,6-Trichlorophenol	88-06-2	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	2,4-Dichlorophenol	120-83-2	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	2,4-Dimethylphenol	105-67-9	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	2,4-Dinitrophenol	51-28-5	mg/kg	<0.82 UJ	<0.81 UJ
Organics-Semivolatiles	2,4-Dinitrotoluene	121-14-2	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	2,6-Dinitrotoluene	606-20-2	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	2-Chloronaphthalene	91-58-7	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	2-Chlorophenol	95-57-8	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	2-Methyl-4,6-dinitrophenol	534-52-1	mg/kg	<0.82 UJ	<0.81 UJ
Organics-Semivolatiles	2-Methylnaphthalene	91-57-6	mg/kg	<0.34 UJ	0.0097 J
Organics-Semivolatiles	2-Methylphenol	95-48-7	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	2-Nitrobenzenamine	88-74-4	mg/kg	<0.82 UJ	<0.81 UJ
Organics-Semivolatiles	2-Nitrophenol	88-75-5	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	3+4-Methylphenol	65794-96-9	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	3,3'-Dichlorobenzidine	91-94-1	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	3-Nitrobenzenamine	99-09-2	mg/kg	<0.82 UJ	<0.81 UJ
Organics-Semivolatiles	4-Bromophenyl phenyl ether	101-55-3	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	4-Chloro-3-methylphenol	59-50-7	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	4-Chlorobenzenamine	106-47-8	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	4-Chlorophenyl phenyl ether	7005-72-3	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatiles	4-Nitrobenzenamine	100-01-6	mg/kg	<0.82 UJ	<0.81 UJ
Organics-Semivolatiles	4-Nitrophenol	100-02-7	mg/kg	<0.82 UJ	<0.81 UJ
Organics-Semivolatiles	Acenaphthene	83-32-9	mg/kg	<0.051 U	<0.051 U
Organics-Semivolatiles	Acenaphthylene	208-96-8	mg/kg	<0.051 U	<0.051 U

Analysis Type	Sample Id	CAS Number	Units	RQL-QC-1095-QC	RQL-QC-1096-QC
	Date			06/30/2010	06/30/2010
	Analyte				
Organics-Semivolatile	Anthracene	120-12-7	mg/kg	<0.051 U	<0.051 U
Organics-Semivolatile	Benz(a)anthracene	56-55-3	mg/kg	<0.051 U	0.011 J
Organics-Semivolatile	Benzenemethanol	100-51-6	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Benzo(a)pyrene	50-32-8	mg/kg	<0.051 U	0.009 J
Organics-Semivolatile	Benzo(b)fluoranthene	205-99-2	mg/kg	0.0069 J	0.015 J
Organics-Semivolatile	Benzo(ghi)perylene	191-24-2	mg/kg	<0.051 U	0.011 J
Organics-Semivolatile	Benzo(k)fluoranthene	207-08-9	mg/kg	<0.051 U	0.009 J
Organics-Semivolatile	Benzoic acid	65-85-0	mg/kg	<0.82 UJ	<0.81 UJ
Organics-Semivolatile	Bis(2-chloroethoxy)methane	111-91-1	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Bis(2-chloroethyl) ether	111-44-4	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Bis(2-chloroisopropyl) ether	108-60-1	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Bis(2-ethylhexyl)phthalate	117-81-7	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Butyl benzyl phthalate	85-68-7	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Carbazole	86-74-8	mg/kg	<0.051 UJ	<0.051 UJ
Organics-Semivolatile	Chrysene	218-01-9	mg/kg	<0.051 U	0.012 J
Organics-Semivolatile	Di-n-butyl phthalate	84-74-2	mg/kg	0.018 J	0.021 J
Organics-Semivolatile	Di-n-octylphthalate	117-84-0	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Dibenz(a,h)anthracene	53-70-3	mg/kg	<0.051 U	0.0073 J
Organics-Semivolatile	Dibenzofuran	132-64-9	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Diethyl phthalate	84-66-2	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Dimethyl phthalate	131-11-3	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Fluoranthene	206-44-0	mg/kg	<0.051 U	0.015 J
Organics-Semivolatile	Fluorene	86-73-7	mg/kg	<0.051 U	0.0076 J
Organics-Semivolatile	Hexachlorobenzene	118-74-1	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Hexachlorobutadiene	87-68-3	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Hexachlorocyclopentadiene	77-47-4	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Hexachloroethane	67-72-1	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Indeno(1,2,3-cd)pyrene	193-39-5	mg/kg	<0.051 U	0.0095 J
Organics-Semivolatile	Isophorone	78-59-1	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	N-Nitroso-di-n-propylamine	621-64-7	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	N-Nitrosodiphenylamine	86-30-6	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Naphthalene	91-20-3	mg/kg	<0.051 U	0.0083 J
Organics-Semivolatile	Nitrobenzene	98-95-3	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Pentachlorophenol	87-86-5	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Phenanthrene	85-01-8	mg/kg	0.0074 J	0.012 J
Organics-Semivolatile	Phenol	108-95-2	mg/kg	<0.34 UJ	<0.34 UJ
Organics-Semivolatile	Pyrene	129-00-0	mg/kg	<0.051 U	0.013 J
Organics-Volatile	1,1,1-Trichloroethane	71-55-6	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	1,1,2,2-Tetrachloroethane	79-34-5	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	1,1,2-Trichloroethane	79-00-5	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	1,1-Dichloroethane	75-34-3	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	1,1-Dichloroethene	75-35-4	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	1,2-Dibromoethane	106-93-4	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	1,2-Dichloroethane	107-06-2	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	1,2-Dichloroethene	540-59-0	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	1,2-Dichloropropane	78-87-5	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	2-Butanone	78-93-3	mg/kg	<0.022 U	<0.022 U
Organics-Volatile	2-Hexanone	591-78-6	mg/kg	<0.022 U	<0.022 U
Organics-Volatile	4-Methyl-2-pentanone	108-10-1	mg/kg	<0.022 U	<0.022 U

Analysis Type	Sample Id	CAS Number	Units	RQL-QC-1095-QC	RQL-QC-1096-QC
	Date			06/30/2010	06/30/2010
	Analyte				
Organics-Volatile	Acetone	67-64-1	mg/kg	<0.022 U	<0.022 U
Organics-Volatile	Benzene	71-43-2	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Bromochloromethane	74-97-5	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Bromodichloromethane	75-27-4	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Bromoform	75-25-2	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Bromomethane	74-83-9	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Carbon disulfide	75-15-0	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Carbon tetrachloride	56-23-5	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Chlorobenzene	108-90-7	mg/kg	0.00061 J	<0.0056 U
Organics-Volatile	Chloroethane	75-00-3	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Chloroform	67-66-3	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Chloromethane	74-87-3	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Dibromochloromethane	124-48-1	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Ethylbenzene	100-41-4	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Methylene chloride	75-09-2	mg/kg	<0.0054 UJ	<0.0056 UJ
Organics-Volatile	Styrene	100-42-5	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Tetrachloroethene	127-18-4	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Toluene	108-88-3	mg/kg	<0.0054 UJ	<0.0056 UJ
Organics-Volatile	Trichloroethene	79-01-6	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Vinyl chloride	75-01-4	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	Xylenes, total	1330-20-7	mg/kg	<0.011 U	<0.011 U
Organics-Volatile	cis-1,3-Dichloropropene	10061-01-5	mg/kg	<0.0054 U	<0.0056 U
Organics-Volatile	trans-1,3-Dichloropropene	10061-02-6	mg/kg	<0.0054 U	<0.0056 U

Appendix A-7. Waste Characterization Sample Results

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Laboratory

EMLab P&K

6301 NW 5th Way

Suite 2850

Fort Lauderdale, FL

33309

Client Code: 366660

TestAmerica Laboratories, Inc.

SAMPLE ANALYSIS REQUISITION

Lab Request

SR119908

Report Package:

Need Analytical Report

Expanded Deliverables

2010-07-09

Project Manager:

MARK LOEB

Sample ID:

A0G010569-1

Work Order Number

L3PAD

Client Sample ID

RQL-043-1103-SO

A0G010569-3

L3PAN

RQL-045-1105-SO

A0G010569-4

L3PAQ

RQL-044-1106-SO

Sampling Date

2010-07-01 11:23

Analysis Required

SOLID, 600/R-93/116 (PLM - Bulk)

2010-07-01 13:23

SOLID, 600/R-93/116 (PLM - Bulk)

2010-07-01 13:36

SOLID, 600/R-93/116 (PLM - Bulk)

000675762



Laboratory

EMLab P&K

6301 NW 5th Way

Suite 2850

Fort Lauderdale, FL

33309

Please use Client Sample ID for report

Call MARK LOEB with questions at 330-497-9396

at the TAL North Canton Laboratory

Shipping Method:

FED EX

Need detection limit and analysis date included in report.

Please send a signed copy of this form with the report at completion of analysis.

Relinquished by:

Date/Time:

7/1/10 1700

Relinquished by:

Date/Time:

7/2/10 9:20 AM

Received for lab by:

Date/Time:

Laboratory

EMLab P&K

PLEASE RETURN ORIGINAL SAMPLE ANALYSIS REQUISITION



EMLab P&K

Report for:

Mr. Mark Loeb
TestAmerica: North Canton
4101 Shuffel Dr. NW
North Canton, OH 44720

Regarding: Project: 366660
 EML ID: 675762

Approved by:

Lab Manager
Baluswamy Krishnan

Dates of Analysis:

Asbestos-EPA Method 600/R-93/116: 07-07-2010

Service SOPs: Asbestos-EPA Method 600/R-93/116 (EPA-600/M4-82-020 (SOP 01264))

For clarity, we report the number of significant digits as calculated; but, due to the nature of this type of biological data, the number of significant digits that is used for interpretation should generally be one or two. All samples were received in acceptable condition unless noted in the Report Comments portion in the body of the report. Due to the nature of the analyses performed, field blank corrections of results is not a standard practice. The results relate only to the items tested.

EMLab P&K ("the Company") shall have no liability to the client or the client's customer with respect to decisions or recommendations made, actions taken or courses of conduct implemented by either the client or the client's customer as a result of or based upon the Test Results. In no event shall the Company be liable to the client with respect to the Test Results except for the Company's own willful misconduct or gross negligence nor shall the Company be liable for incidental or consequential damages or lost profits or revenues to the fullest extent such liability may be disclaimed by law, even if the Company has been advised of the possibility of such damages, lost profits or lost revenues. In no event shall the Company's liability with respect to the Test Results exceed the amount paid to the Company by the client therefor.

Document Number: 200091 - Revision Number: 5

Client: TestAmerica: North Canton
C/O: Mr. Mark Loeb
Re: 366660

Date of Sampling: 07-01-2010
Date of Receipt: 07-02-2010
Date of Report: 07-07-2010

ASBESTOS PLM REPORT: EPA-600/M4-82-020 & EPA METHOD 600/R-93-116

Total Samples Submitted: 3

Total Samples Analysed: 3

Total Samples with Layer Asbestos Content > 1%: 0

Location: RQL-043-1103-SO

Lab ID-Version‡: 2997484-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	5% Cellulose
Sample Composite Homogeneity:	Good

Location: RQL-045-1105-SO

Lab ID-Version‡: 2997485-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	3% Cellulose
Sample Composite Homogeneity:	Good

Location: RQL-044-1106-SO

Lab ID-Version‡: 2997486-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	5% Cellulose
Sample Composite Homogeneity:	Good

The results relate only to the items tested. Interpretation is left to the company and/or persons who conducted the field work. The test report shall not be reproduced except in full, without written approval of the laboratory. The report must not be used by the client to claim product certification, approval, or endorsement by NVLAP, NIST, or any agency of the federal government.

All samples were received in acceptable condition unless otherwise noted. EMLab P&K reserves the right to dispose of all samples after a period of thirty (30) days, according to all state and federal guidelines, unless otherwise specified.

Inhomogeneous samples are separated into homogeneous subsamples and analyzed individually. ND means no fibers were detected. When detected, the minimum detection and reporting limit is less than 1% unless point counting is performed.

‡ A "Version" indicated by "-x" after the Lab ID# with a value greater than 1 indicates a sample with amended data. The revision number is reflected by the value of "x".

Laboratory

EMLab P&K

6301 NW 5th Way

Suite 2850

Fort Lauderdale, FL

33309

TestAmerica Laboratories, Inc.
SAMPLE ANALYSIS REQUISITION

Lab Request

SR119910

Report Package:

Need Analytical Report

Expanded Deliverables

2010-07-06



000675258

Project Manager:

MARK LOEB

Sample I.D.

A0G010576-1

Work Order Number

L3PA0

Client Sample ID

RQL-050-1097-BD

A0G010576-2

L3PA5

RQL-051-1098-BD

A0G010576-3

L3PA8

RQL-052-1099-BD

A0G010576-4

L3PA9

RQL-053-1100-BD

A0G010576-5

L3PCC

RQL-054-1101-BD

A0G010576-6

L3PCD

RQL-055-1102-BD

Sampling Date

2010-06-30 14:30

Analysis Required

SOLID, 600/R-93/116 (PLM - Bulk)

2010-06-30 14:30

SOLID, 600/R-93/116 (PLM - Bulk)

2010-06-30 14:30

SOLID, 600/R-93/116 (PLM - Bulk)

2010-06-30 14:30

SOLID, 600/R-93/116 (PLM - Bulk)

2010-06-30 14:30

SOLID, 600/R-93/116 (PLM - Bulk)

2010-06-30 14:30

SOLID, 600/R-93/116 (PLM - Bulk)

Sample
A0G010576-1

L3PA0

Please use Client Sample ID for report

Call MARK LOEB with questions at 330-497-9396

at the TAL North Canton Laboratory

A0G010576-2

L3PA5

A0G010576-3

L3PA8

A0G010576-4

L3PA9

Need detection limit and analysis date included in report.

Please send a signed copy of this form with the report at completion of analysis.

Relinquished by:

Date/Time:

7/1/10 1700

Relinquished by:

Date/Time:

7/2/10 9:30 AM

Received for lab by:

Date/Time:

PLEASE RETURN ORIGINAL SAMPLE ANALYSIS REQUISITION

Shipping Method:

FED EX



EMLab P&K

Report for:

Mr. Mark Loeb
TestAmerica: North Canton
4101 Shuffel Dr. NW
North Canton, OH 44720

Regarding: Project: SR119910
EML ID: 675258

Approved by:

Lab Manager
Baluswamy Krishnan

Dates of Analysis:
Asbestos-EPA Method 600/R-93/116: 07-02-2010

Service SOPs: Asbestos-EPA Method 600/R-93/116 (EPA-600/M4-82-020 (SOP 01264))

For clarity, we report the number of significant digits as calculated; but, due to the nature of this type of biological data, the number of significant digits that is used for interpretation should generally be one or two. All samples were received in acceptable condition unless noted in the Report Comments portion in the body of the report. Due to the nature of the analyses performed, field blank corrections of results is not a standard practice. The results relate only to the items tested.

EMLab P&K ("the Company") shall have no liability to the client or the client's customer with respect to decisions or recommendations made, actions taken or courses of conduct implemented by either the client or the client's customer as a result of or based upon the Test Results. In no event shall the Company be liable to the client with respect to the Test Results except for the Company's own willful misconduct or gross negligence nor shall the Company be liable for incidental or consequential damages or lost profits or revenues to the fullest extent such liability may be disclaimed by law, even if the Company has been advised of the possibility of such damages, lost profits or lost revenues. In no event shall the Company's liability with respect to the Test Results exceed the amount paid to the Company by the client therefor.

Document Number: 200091 - Revision Number: 5

Client: TestAmerica: North Canton
C/O: Mr. Mark Loeb
Re: SR119910Date of Sampling: 06-30-2010
Date of Receipt: 07-02-2010
Date of Report: 07-02-2010**ASBESTOS PLM REPORT: EPA-600/M4-82-020 & EPA METHOD 600/R-93-116****Total Samples Submitted:** 6**Total Samples Analysed:** 6**Total Samples with Layer Asbestos Content > 1%:** 5**Location: AOG010576-1, Solid**

Lab ID-Version‡: 2995642-1

Sample Layers	Asbestos Content
Gray Transite	30% Chrysotile
Sample Composite Homogeneity: Good	

Location: AOG010576-2, Solid

Lab ID-Version‡: 2995643-1

Sample Layers	Asbestos Content
Gray Transite	30% Chrysotile
Sample Composite Homogeneity: Good	

Location: AOG010576-3, Solid

Lab ID-Version‡: 2995644-1

Sample Layers	Asbestos Content
Black Roofing Material	15% Chrysotile
Composite Non-Asbestos Fibrous Content: 25% Cellulose	
Sample Composite Homogeneity: Moderate	

Location: AOG010576-4, Solid

Lab ID-Version‡: 2995645-1

Sample Layers	Asbestos Content
Black Roofing Material	15% Chrysotile
Composite Non-Asbestos Fibrous Content: 30% Cellulose	
Sample Composite Homogeneity: Moderate	

The results relate only to the items tested. Interpretation is left to the company and/or persons who conducted the field work. The test report shall not be reproduced except in full, without written approval of the laboratory. The report must not be used by the client to claim product certification, approval, or endorsement by NVLAP, NIST, or any agency of the federal government.

All samples were received in acceptable condition unless otherwise noted. EMLab P&K reserves the right to dispose of all samples after a period of thirty (30) days, according to all state and federal guidelines, unless otherwise specified.

Inhomogeneous samples are separated into homogeneous subsamples and analyzed individually. ND means no fibers were detected. When detected, the minimum detection and reporting limit is less than 1% unless point counting is performed.

‡ A "Version" indicated by "-x" after the Lab ID# with a value greater than 1 indicates a sample with amended data. The revision number is reflected by the value of "x".

Client: TestAmerica: North Canton
C/O: Mr. Mark Loeb
Re: SR119910Date of Sampling: 06-30-2010
Date of Receipt: 07-02-2010
Date of Report: 07-02-2010**ASBESTOS PLM REPORT: EPA-600/M4-82-020 & EPA METHOD 600/R-93-116****Location: AOG010576-5, Solid**

Lab ID-Version‡: 2995646-1

Sample Layers	Asbestos Content
Red Semi-Fibrous Material (Board)	ND
Composite Non-Asbestos Fibrous Content:	65% Glass Fibers 2% Cellulose
Sample Composite Homogeneity:	Moderate

Location: AOG010576-6, Solid

Lab ID-Version‡: 2995647-1

Sample Layers	Asbestos Content
Gray Transite	30% Chrysotile
Sample Composite Homogeneity:	Good

The results relate only to the items tested. Interpretation is left to the company and/or persons who conducted the field work. The test report shall not be reproduced except in full, without written approval of the laboratory. The report must not be used by the client to claim product certification, approval, or endorsement by NVLAP, NIST, or any agency of the federal government.

All samples were received in acceptable condition unless otherwise noted. EMLab P&K reserves the right to dispose of all samples after a period of thirty (30) days, according to all state and federal guidelines, unless otherwise specified.

Inhomogeneous samples are separated into homogeneous subsamples and analyzed individually. ND means no fibers were detected. When detected, the minimum detection and reporting limit is less than 1% unless point counting is performed.

‡ A "Version" indicated by -"x" after the Lab ID# with a value greater than 1 indicates a sample with amended data. The revision number is reflected by the value of "x".

Analysis Type	Sample Id	CAS Number	Units	TCLP Criteria	RQL-039-1104-SO	RQL-043-1103-SO	RQL-044-1106-SO	RQL-045-1105-SO
	Date				07/01/2010	07/01/2010	07/01/2010	07/01/2010
	Analyte							
Miscellaneous	Sulfide	18496-25-8	mg/kg		37.4 J	72.8	<39.9 U	<38.9 U
Miscellaneous	Corrosivity		No Units		7.5 J	8.1 J	7.9 J	7.2 J
Miscellaneous	Cyanide	57-12-5	mg/kg		0.79 J	1.4	0.69	<0.19 UJ
Miscellaneous	Ignitability (Flashpoint)		deg F		>180	>180	>180	>180
TCLP Metals	Arsenic	7440-38-2	mg/L	5	<0.5 U	<0.5 U	<0.5 U	<0.5 U
TCLP Metals	Barium	7440-39-3	mg/L	100	1.5 J	0.72 J	0.68 J	0.24 J
TCLP Metals	Cadmium	7440-43-9	mg/L	1	0.0091 J	<0.0061 UJ	0.0061 J	<0.0011 UJ
TCLP Metals	Chromium	7440-47-3	mg/L	5	<0.5 U	<0.5 U	<0.0026 UJ	<0.5 U
TCLP Metals	Lead	7439-92-1	mg/L	5	3.1	0.025 J	0.19 J	0.019 J
TCLP Metals	Mercury	7439-97-6	mg/L	0.2	<0.002 U	<0.002 U	<0.002 U	<0.002 U
TCLP Metals	Selenium	7782-49-2	mg/L	1	0.005 J	<0.0079 UJ	<0.0061 UJ	<0.0043 UJ
TCLP Metals	Silver	7440-22-4	mg/L	5	<0.5 U	<0.5 U	<0.5 U	<0.5 U
TCLP Organics-Pesticide	2,4-D	94-75-7	mg/L	10	<0.5 U	<0.5 U	<0.5 U	<0.5 U
TCLP Organics-Pesticide	Chlordane	57-74-9	mg/L	0.03	<0.005 U	<0.005 U	<0.005 U	<0.005 U
TCLP Organics-Pesticide	Endrin	72-20-8	mg/L	0.02	<0.0005 U	<0.0005 U	<0.0005 U	<0.0005 U
TCLP Organics-Pesticide	Heptachlor	76-44-8	mg/L	0.008	0.000034 J	<0.0005 U	<0.0005 U	<0.0005 U
TCLP Organics-Pesticide	Heptachlor epoxide	1024-57-3	mg/L	0.008	<0.0005 U	<0.0005 U	<0.0005 U	<0.0005 U
TCLP Organics-Pesticide	Lindane	58-89-9	mg/L	0.4	<0.0005 U	<0.0005 U	<0.0005 U	<0.0005 U
TCLP Organics-Pesticide	Methoxychlor	72-43-5	mg/L	10	0.00012 J	<0.001 U	<0.001 U	<0.001 U
TCLP Organics-Pesticide	Silvex	93-72-1	mg/L	1	<0.1 U	<0.1 U	<0.1 U	<0.1 U
TCLP Organics-Pesticide	Toxaphene	8001-35-2	mg/L	0.5	<0.02 U	<0.02 U	<0.02 U	<0.02 U
TCLP Organics-Semivolatile	1,4-Dichlorobenzene	106-46-7	mg/L	7.5	<0.004 U	<0.004 U	<0.004 U	<0.004 U
TCLP Organics-Semivolatile	2,4,5-Trichlorophenol	95-95-4	mg/L	400	<0.02 U	<0.02 U	<0.02 U	<0.02 U
TCLP Organics-Semivolatile	2,4,6-Trichlorophenol	88-06-2	mg/L	2	<0.02 U	<0.02 U	<0.02 U	<0.02 U
TCLP Organics-Semivolatile	2,4-Dinitrotoluene	121-14-2	mg/L	0.13	<0.02 U	<0.02 U	<0.02 U	<0.02 U
TCLP Organics-Semivolatile	2-Methylphenol	95-48-7	mg/L	200	<0.004 U	<0.004 U	<0.004 U	<0.004 U
TCLP Organics-Semivolatile	3+4-Methylphenol	65794-96-9	mg/L		0.005 J	<0.04 U	0.0055 J	<0.04 U
TCLP Organics-Semivolatile	Hexachlorobenzene	118-74-1	mg/L	0.13	<0.02 U	<0.02 U	<0.02 U	<0.02 U
TCLP Organics-Semivolatile	Hexachlorobutadiene	87-68-3	mg/L	0.5	<0.02 U	<0.02 U	<0.02 U	<0.02 U
TCLP Organics-Semivolatile	Hexachloroethane	67-72-1	mg/L	3	<0.02 U	<0.02 U	<0.02 U	<0.02 U
TCLP Organics-Semivolatile	Nitrobenzene	98-95-3	mg/L	2	<0.004 U	<0.004 U	<0.004 U	<0.004 U
TCLP Organics-Semivolatile	Pentachlorophenol	87-86-5	mg/L	100	<0.04 U	<0.04 U	<0.04 U	<0.04 U
TCLP Organics-Semivolatile	Pyridine	110-86-1	mg/L	5	<0.02 U	<0.02 U	<0.02 U	<0.02 U
TCLP Organics-Volatile	1,1-Dichloroethene	75-35-4	mg/L	0.7	<0.07 U	<0.07 U	<0.07 U	<0.07 U
TCLP Organics-Volatile	1,2-Dichloroethane	107-06-2	mg/L	0.5	<0.025 U	<0.025 U	<0.025 U	<0.025 U
TCLP Organics-Volatile	2-Butanone	78-93-3	mg/L	200	<0.25 U	<0.25 U	<0.25 U	<0.25 U
TCLP Organics-Volatile	Benzene	71-43-2	mg/L	0.5	<0.025 U	<0.025 U	<0.025 U	<0.025 U
TCLP Organics-Volatile	Carbon tetrachloride	56-23-5	mg/L	0.5	<0.025 U	<0.025 U	<0.025 U	<0.025 U
TCLP Organics-Volatile	Chlorobenzene	108-90-7	mg/L	100	<0.025 U	<0.025 U	<0.025 U	<0.025 U
TCLP Organics-Volatile	Chloroform	67-66-3	mg/L	6	<0.025 U	<0.025 U	<0.025 U	<0.025 U
TCLP Organics-Volatile	Tetrachloroethene	127-18-4	mg/L	0.7	<0.07 U	<0.07 U	<0.07 U	<0.07 U
TCLP Organics-Volatile	Trichloroethene	79-01-6	mg/L	0.5	<0.05 U	<0.05 U	<0.05 U	<0.05 U
TCLP Organics-Volatile	Vinyl chloride	75-01-4	mg/L	0.2	<0.025 U	<0.025 U	<0.025 U	<0.025 U

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Appendix A-8. Soil Asbestos Removal Plan

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SOIL ASBESTOS REMOVAL PLAN

Prepared For:

**RVAAP-01 Ramsdell Quarry Landfill Remedial Action
Ravenna Army Ammunition Plant, Ravenna, Ohio**

Contract Number: P010023776

TolTest Project No. 22765.03

Prepared By:



**508 West Elnora Street
Odon, Indiana 47562
(812) 636-8501
FAX (812) 636-7572**

August 2010

SOIL ASBESTOS REMOVAL PLAN

**RVAAP-01 Ramsdell Quarry Landfill Remedial Action
Ravenna Army Ammunition Plant, Ravenna, Ohio**

Contract Number: P010023776

TolTest Project No. 22765.03

Prepared By:

TOLTEST, INC.
1480 Ford Street
Maumee, OH 43537

Reviewed/Approved By:



11AUG10

Project Manager

Brian Morgan

Date

Reviewed/Approved By:



11AUG10

Corporate Health & Safety Manager

Richard L. Barcum, CIH, CSP, CHMM

Date

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APPENDICES

Appendix A	Certifications/Licenses
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ACRONYM LIST

ACM	asbestos containing materials
ASHERA	Asbestos Hazard Emergency Response Act
APP	Accident Prevention Plan
APR	Air-Purifying Respirator
ASTM	American Society for Testing and Material
bgs	below ground surface
CFR	Code of Federal Regulations
COCs	chemicals of concern
DOT	Department of Transportation
EPA	Environmental Protection Agency
HASP	Health and Safety Plan
HEPA	high efficiency particulate Air
lpm	liters per minute
MCE	mixed-cellulose ester
MI	Multi-increment
mm	millimeter
MSDS	material safety data sheet
NESHAP	National Emissions Standards for Hazardous Air Pollutants
NIOSH	National Institute for Occupational Safety and Health
OSHA	Occupational Safety and Health Administration
PCM	Phase Contrast Microscopy
PEL	Permissible Exposure Limits
PPE	Personal protective equipment
PVC	polyvinyl chloride
QA/QC	Quality Assurance/Quality Control
RAO	remedial action operations
RQL	Ramsdell Quarry Landfill
RVAAP	Ravenna Army Ammunition Plant
TO	Task order
TolTest	TolTest, Inc.
TWA	time weighted average
USACE	United States Army Corp of Engineers

1.0 INTRODUCTION

TolTest prepared this Asbestos Removal Plan for the removal of asbestos containing materials (ACM) for **Ramsdell Quarry Landfill (RQL) Remedial Action, Ravenna Army Ammunition Plant (RVAAP) located in Ravenna, Ohio**. This Asbestos Removal Plan is specific to the work activities that will be completed on this project. These activities include but are not limited to removal of ACM related to the select demolition and construction tasks necessary for the completion of the of the soil removal and site restoration.

During remediation activities at RQL, ACM was encountered in the soil and work was stopped until necessary measures were taken to account for the ACM. This asbestos removal plan includes the plan for the removal ACM contaminated soil that has already been disturbed due to previous remediation activities—approximately 200 tons of soil. This plan will be applicable to include additional ACM removal, if discovered, that may have to be excavated in the RQL under this contract.

The remedial action operations (RAO) for RQL soil removal is to remove soil with chemicals of concern (COCs) [benz(a)anthracene, benzo(a)pyrene, benzo(b)fluoranthene, dibenz(a,h)anthracene, indeno(1,2,3-cd)pyrene] above cleanup goals to the lateral extents of the MI areas requiring removal. The vertical extent of the excavation will be to a minimum of 1 ft below ground surface (bgs) or to bedrock. Once these extents are achieved, additional confirmation soil sampling for these COCs will not be required in the soil removal areas. Visual inspection of the excavation will be needed to confirm no remaining ACM can be seen in the excavation footprint. If visual inspection confirms ACM is not remaining in the excavation footprint, soil will be analyzed for ACM. If there is greater than 1% ACM in the soil samples, additional excavation may be necessary.

TolTest will comply with all applicable Federal and State regulations. TolTest will hire a third party to perform all baseline, personnel, and environmental sampling.

2.0 ASBESTOS REMOVAL EQUIPMENT, PERSONNEL AND SUBCONTRACTORS

This section details the asbestos removal equipment and personnel to be utilized during this project. TolTest will be performing the asbestos removal, disposal and supervision of this project. A Third Party Laboratory will perform all air monitoring and analyze all asbestos air monitoring samples.

There will be two supervisory personnel from TolTest; A Site Superintendent and an Asbestos Trained Supervisor.

Personnel assigned to the project will be required to complete an Environmental Protection Agency (EPA) Accredited Asbestos Abatement Worker Training Course prior to their arrival on-site. These associates will be licensed in the State of Ohio and have a clear understanding of the hazards, personal protection, removal, and disposal procedures associated with ACM. All associates working in the regulated areas on this project will have proof of medical clearance for respirators and asbestos.

Personnel assigned to this project may change to efficiently complete the tasks defined in this Asbestos Plan. Table 1 lists the equipment, personnel and subcontractors to be used for the asbestos removal and hazardous material removal for the RQL remedial action.

TolTest will coordinate disposal with SAIC and the Ravenna Army Ammunition Plant by using a pre-approved landfill. TolTest will transport all waste to the landfill in approved containers. Manifest documentation will contain information pertaining to the Generator, Operator, Transporter, Disposal Manager, and quantity of asbestos.

Once the removal objectives have been achieved, all TolTest property used during the ACM removal tasks will be decontaminated.

Table 1. Equipment, Personnel, and Subcontractors

<i>EQUIPMENT</i>	<i>PERSONNEL</i>	<i>SUBCONTRACTORS</i>
Pickup truck Assorted hand tools Two 6-mil polyethylene sheeting covers Hard hats and safety glasses Respirators with HEPA filters Disposable coveralls/boots/gloves Radios/cell phone Encapsulant Surfactant HEPA filtered vacuums Caution tape First aid kit Air sampling pumps/filter cassettes ACM disposal bags Glove bags Lined and covered tri-axial trucks for waste load-out and transportation to landfill Water hose with spray nozzle and connection to potable water source Portable decontamination unit with electrical power and potable water hook-ups	Brian Morgan Project Manager Rich Barcum Corporate Health and Safety Darrin John Site Safety and Health Officer Site Superintendent Quality Control Coordinator John D. Cohen Ohio Asbestos Specialist Cert #AS25205 Mike Hovis Equipment Operator	American Landfill Transportation/Disposal of ACM waste Watterson Environmental Ohio Asbestos Project Designer Diamond Environmental Ohio Asbestos Specialist Boblitt Land Surveying

3.0 ASBESTOS REMOVAL SEQUENCE AND OPERATIONAL APPROACH

This section details the specific operational tasks required for this project. The following is a listing of major regulations and/or standards that will be adhered to during the execution of the work plan.

- 29 CFR 1910.134, Occupational Safety and Health Administration (OSHA) Respiratory Protection Program.
- 29 CFR 1926.1101, OSHA Asbestos Construction Standard.
- 29 CFR 1910.120, OSHA Hazardous Waste Operations and Emergency Procedures.
- 40 CFR Part 61, EPA National Emissions Standards for Hazardous Air Pollutants (NESHAP).
- 40 CFR 763 Subpart E, EPA Asbestos Hazard Emergency Response Act (AHERA).
- 40 CFR 763 Subpart E Appendix C, EPA Model Accreditation Plan
- 49 CFR Part 61, United States Department of Transportation (DOT).

3.1 Notification

TolTest submitted a 10-day Asbestos Demolition and Renovation Notification to the State of Ohio and the Prior Notification of Asbestos Hazard Abatement Project to the Ohio Department of Health with a start date of August 18, 2010. TolTest will provide a copy of the notification to SAIC. SAIC will be responsible for submitting this notification to RVAAP Facility Management and United States Army Corp of Engineers (USACE).

3.2 Mobilization and Site Set-Up

Upon authorization to commence work and approval of this plan, TolTest will mobilize the removal crew to the project site. An inspection will be conducted to identify any hazards or unusual conditions in the vicinity of the work areas. General work areas will be segregated as needed with caution tape to delineate the work zones and to deter the intrusion of unauthorized personnel. Warning tape and signs will be used to demarcate the regulated areas.

3.3 Asbestos Removal Activities

Asbestos removal activities will be conducted in accordance with applicable federal, state, and local regulations. TolTest's asbestos abatement trained, State of Ohio accredited personnel will use asbestos-caution tape and appropriate signage to demarcate the regulated areas. Visual inspections performed by the competent person will be conducted in accordance with American Society for Testing and Material (ASTM) E 1368-00, Standard Practice for Visual Inspection of Asbestos Abatement Projects. The visual inspections will be performed as the final clearance. After the asbestos removal activities and post-abatement activities have concluded, TolTest's non-disposable equipment utilized during the removal will be thoroughly cleaned and visually inspected before being removed from the site. Cleaning waste and used filters will be disposed appropriately as asbestos contaminated waste materials.

3.3.1 Asbestos Removal Preparation

TolTest will begin the removal activities by demarcating the regulated area with stakes and perimeter asbestos-caution tape, erecting a decontamination unit, and connecting water, electricity, and a filtered drain to the decontamination unit. TolTest will also set up power to the decontamination unit and post warning signs around the regulated area demarcating where asbestos removal will occur.

TolTest's competent person will be on site, in the work area(s) as applicable, during all phases of the work. The competent person will be responsible for developing appropriate responses to any unforeseen and unplanned events that may occur during the course of the work. The response to any unforeseen and unplanned event (for example, apparent excessive air-borne dust generated by the removal/loading process, discovery of previously unidentified suspect ACM...etc.) shall, at a minimum, include determination of the following:

- Is work stoppage required?
- Is additional wetting/water misting of asbestos-contaminated soil required?
- Is additional personal protective equipment (PPE) required?
- Are additional engineering controls required?
- Are revised work procedures required?

The following are more detailed descriptions of the aforementioned tasks associated with the asbestos removal.

Mark Regulated Area

Exterior work areas will be segregated with caution tape at an adequate distance from the regulated areas to deter unauthorized personnel from approaching the regulated areas. Asbestos warning tape and appropriate signage will be used to demarcate the exterior regulated areas and prevent accidental intrusion into regulated areas by non-authorized personnel.

Erect Decontamination Unit

The decontamination unit for this project will be located in a location remote to all removal areas and in a location that will not interfere with removal activities. The decontamination unit will be placed in such a manner that the clean room will be outside the regulated area necessary for the exterior work. The decontamination unit will be constructed of a wood or polyvinyl chloride (PVC) base and frame. The unit contains three chambers: an equipment room (contaminated clothing change-out chamber), a decontamination shower located in the center chamber, and a clean room chamber. These chambers are separated by opposing, overlapping poly doors.

The shower drain will consist of an electric pump with a two-stage filter system. A 25-micron initial filter and a 5-micron final filter will remove asbestos fibers from the shower. These filters will be checked daily and replaced as necessary. Used filters are handled and disposed as ACMs. A portable water heater will be utilized to supply hot water for the shower if necessary. Electrical connections for the water heater and filter pump will be protected with ground fault circuit interrupters that will be tested on a daily basis.

The filtered shower water will be pumped into a 55-gallon drum located adjacent to the decontamination unit. TolTest will dispose of the filtered shower water by discharging the water in the nearest sanitary sewer system in accordance with the National Emissions Standards for Hazardous Air Pollutants regulations.

Posting of Warning Signs and Caution Tape around the Immediate Abatement Areas (i.e., Asbestos-contaminated Soil Stock Piles, Remote Decontamination Units, Asbestos Waste Load-out Staging Areas, etc.)

TolTest will place signs and asbestos caution tape demarcating the regulated areas as required by federal, state and local regulations. The signs and asbestos caution tape will be located at an adequate distance from the work area to inform construction site occupants and construction site workers that asbestos removal is taking place in that area. Additionally, caution tape will be located at an adequate distance from the exterior regulated areas to discourage unauthorized persons from approaching a regulated area. Relevant material safety data sheet (MSDS) information, the Health and Safety Plan (HASP), Daily Sign in Sheet, and daily air sampling results will be posted and/or readily available outside the regulated area away from the work currently taking place, near the remote decontamination unit.

3.3.2 Asbestos-contaminated Soil Removal

All personnel entering the asbestos work areas will be required to wear a double layer of disposable, full-body coveralls and a half-mask air-purifying respirator equipped with HEPA filters or combination HEPA/Organic Vapor filters during asbestos removal activities. A remote decontamination unit will be employed for all aspects of asbestos removal for this project. The outer disposable suit will be removed and disposed as ACM waste when exiting the regulated areas. The inner disposable suit, head cover, boots, and gloves will be removed within the equipment room of the remote decontamination unit and also disposed as ACM waste.

During all handling of the asbestos-contaminated soil, TolTest will mist the soil with water utilizing a water truck.

Appropriately wetted asbestos-contaminated soil will be removed by a front-end loader and immediately placed in a lined and covered roll-off dumpster for transport to and disposal at the approved landfill.

At least two persons shall be utilized to perform soil removal operations with one person misting the soil with a water hose, while the other person operates the front-end loader. Removal of the asbestos-contaminated soil will be by wet methods utilizing a hose to mist the soil as required during removal from the stockpile and deposition in the lined and covered roll-off dumpster. The soil will be contained in a roll-off that is both lined and covered with two 6 mil (or equivalent) polypropylene covers.

Once the soil is loaded into the lined roll-off, TolTest will cover the roll-off with two 6-mil thick polypropylene covers and will affix appropriate signage to the truck as required for transportation to the approved landfill.

The aforementioned tasks will be completed by State of Ohio licensed Asbestos Abatement Supervisors. A copy of certifications/licenses of the TolTest associates that will be performing these tasks are included in **Appendix A**.

3.3.3 Asbestos Air Sampling

Asbestos air sampling will be conducted in accordance with OSHA Class I and Class II asbestos removal requirements. Asbestos air samples will be collected on a 25 millimeter (mm) mixed-cellulose ester (MCE) filtered cassette and analyzed by Phase Contrast Microscopy (PCM). Samples will be analyzed in accordance with the National Institute for Occupational Safety and Health (NIOSH) 7400 Method or equivalent.

3.3.3.1 Baseline Sampling

Baseline air sampling activities will be conducted before any removal activities are performed. This is done to establish the background/baseline concentrations for airborne fibers, both asbestos and non-asbestos, in the areas where asbestos removal is to be conducted.

3.3.3.2 Personal Sampling

Personal air monitoring will consist of sampling at least 25% of the work force and will be conducted on a daily basis. Different tasks, such as front end loader equipment operator, misting of soil pile with hose by ground level worker, and supervisor/competent person in work area, are sampled individually. Personal sampling will be performed by using a portable, rechargeable pump unit worn on a belt with the cassette assembly draped over the shoulder of the worker to sample their respective breathing air. Personal samples will be collected at a rate of 0.5 to 2.0 liters per minute (lpm). Samples will be collected and analyzed on both an 8-hour time weighted average (TWA) and a 30-minute excursion.

Asbestos Permissible Exposure Limits (PEL) are as follows:

- The OSHA PEL for worker exposure to airborne asbestos is 0.1 fibers per cubic centimeter (f/cc) as an 8-hour TWA.
- The OSHA PEL for worker exposure to airborne asbestos is 1.0 f/cc for a 30-minute sample.
- The permissible level of airborne fiber concentrations in areas adjacent to the work area is 0.01 f/cc or background level, whichever is higher, as determined by PCM.

3.3.3.3 Environmental Sampling

Environmental sampling will occur in areas surrounding the regulated work areas to evaluate the potential fiber release outside the regulated areas. Environmental sampling occurs prior to asbestos removal and while asbestos removal activities are being conducted. If the level of airborne asbestos is measured to be greater than the background level measured prior to initiation of asbestos removal activities, work will be halted and work practices will be evaluated to determine their effectiveness. Appropriate measures will then be taken to change work practices to prevent future fiber releases.

Asbestos PEL are as follows:

- The OSHA PEL for worker exposure to airborne asbestos is 0.1 fibers per cubic centimeter (f/cc) as an 8-hour TWA.
- The OSHA PEL for worker exposure to airborne asbestos is 1.0 f/cc for a 30-minute sample.
- The permissible level of airborne fiber concentrations in areas adjacent to the work area is 0.01 f/cc or background level, whichever is higher, as determined by PCM.

3.3.3.4 Clearance Inspection

After removal activities have taken place for a designated work area, clearance inspection will be conducted. A visual inspection, in accordance with 40 Code of Federal Regulations (CFR), Part 763.90(i) will be completed by TolTest's Asbestos Supervisor.. This will include an inspection of each functional space where asbestos removal activities were conducted. The purpose of the visual inspection is to verify that no gross debris or asbestos remains in the area after the asbestos removal activities were completed.

3.4 Decontamination

TolTest will install a three chamber decontamination system established to promote project hygiene, proper housekeeping, and worker protection. The decontamination system will be attached directly to the containment and will be comprised of three chambers: a clean room, a shower room, and an equipment room constructed of 6 mil poly in a linear configuration. Wastewater generated during decontamination will be collected in the basin of the shower room. A dual stage filter pump connected to the shower basin will be used to filter potential contamination down to 5 microns from the wastewater prior to discharge into the sanitary sewer system.

Personnel will begin the decontamination process by utilizing a HEPA filtered vacuum to remove gross contamination from their disposable suits inside the containment area prior to entering the decontamination system. Personnel will then enter the three chamber decontamination system at the equipment room. PPE will be removed and discarded into a waste container; however, the respirator is not removed at this time. Personnel then enter the shower room and wash their hair and bodies with shampoo and soap. The respirator is then removed and cleaned inside the shower room. Once clean, personnel enter the clean room and don normal Level D PPE and work attire. The respirator will be stored in a designated location and allowed to air dry.

3.5 Transportation and Disposal Services

TolTest will coordinate disposal with RVAAP Facility Management by using a pre-approved landfill. TolTest will transport all waste to the landfill in approved containers. Manifest documentation will contain information pertaining to the Generator, Operator, Transporter, Disposal Manager, and quantity of asbestos.

3.6 Site Restoration

Once the removal objectives have been achieved, all TolTest property including equipment and materials will be removed from the site.

4.0 REPORTING REQUIREMENTS

TolTest will document and report all asbestos removal activities to SAIC via Daily Reports. These reports will include, but are not limited to; daily activities, production updates, a personnel log, incident reports, safety meeting minutes, materials received, and Quality Assurance (QA) / Quality Control (QC) oversight.

4.1 Asbestos Removal Logbook Generation and Submittal

This logbook contains contract specifications, insurance certificates, notification forms, checklists, training certificates, social security numbers, phone numbers, physicals, daily logs, respirator maintenance records, controlled access entry logs, filter maintenance logs, visual inspection reports, air sampling reports, final clearance reports, exposure assessments, waste manifests, and relevant MSDS information. This logbook must be retained and available for review for a period of three years. The logbook will be turned into Building 1037 at the completion of the removal action.

TolTest will provide copies of daily activity reports detailing all work performed, analytical results, copies of worker information and current licenses, site and vicinity maps, copies of waste manifests, copies of chain-of-custody documents, and asbestos removal drawings. Analytical results will be submitted within 3 working days of sample collection. All pertinent information will be included in the Asbestos Removal Logbook.

5.0 SCHEDULING

Work will be accomplished during normal working hours, Monday through Friday, between the hours of 0700 and 1700. Access to all areas must be maintained during those hours.

6.0 ENVIRONMENTAL PROTECTION

Environmental protection will be provided and maintained during all phases of asbestos removal activities as defined in *Section 2.0 of this Asbestos Plan*. Environmental protection will be provided to correct conditions that develop during completion of this work or that are required to control pollution that develops during normal work practices.

To the extent possible, it is intended that the natural resources within the project boundary and outside the limits of pertinent work performed during this task order (TO) be preserved in their existing condition or be restored to an equivalent or improved condition upon completion. Work will be confined to areas defined by the work schedule, plans, and specifications.

Should there be accidental fallout of asbestos from a non-abatement phase of work, work will stop immediately in the affected area and the situation will be evaluated by the competent person for appropriate corrective action and implementation of appropriate personal protective measures.

7.0 PROJECT QUALITY CONTROL

TolTest, Inc. will perform the project in accordance with the Project Plans. To ensure the removal is done according to this Procedure, a TolTest Competent Person will be responsible for the asbestos removal.

7.1 Competent Person

During this project, the Supervisor will serve as the OSHA competent person as per 29 CFR 1926.32(f). In addition, competent persons performing Class I and Class II work will be specially trained in a training course which meets the criteria of 40 CFR part 763 for supervisor. Responsibilities of the competent person include, but are not limited to; setting up the regulated area, ensure work integrity, instituting engineering controls, ensure adherence to regulatory procedures, and personnel monitoring.

Certifications for the Site Supervisor/Competent Person and the Asbestos Technician will be provided to the RVAAP Operations and Maintenance contractor prior to initiating removal operations.

8.0 SITE SAFETY AND HEALTH PLAN

TolTest will implement this removal in accordance with the Accident Prevention Plan (APP) for this project. This plan incorporates the following:

8.1 Key Personnel

The Project Supervisor/Competent Person has the overall responsibility for ensuring that the provisions of this plan are implemented in the field.

8.2 Personal Protective Equipment

PPE will be used by personnel for each of the site tasks and operations being performed. The specific type of protective equipment will vary in accordance with specific tasks. At a minimum, Level D PPE will be utilized continuously. Level D PPE includes:

- Work clothes
- Boots/shoe, steel toe
- Hard hat
- Safety glasses
- Reflective vests
- Canvas or leather gloves

During asbestos removal activities, Level C PPE will be utilized. In addition to the items accounted for in Level D PPE, Level C PPE includes:

- Half Face Air-Purifying Respirator (APR) equipped with HEPA filters (P100)
- Nitrile gloves
- Disposable suit

8.3 Site Control Measures

Control procedures will be implemented to prevent unauthorized access to the work area. Safety site controls will be utilized around the work area. The site supervisor will ensure that all personnel entering the site have the necessary training, medical approval documentation and have reviewed the APP. Personnel entering the site will be given a thorough briefing on the site hazards and safe work procedures prior to entering the work area.

All visitors will be expected to comply with applicable regulatory OSHA requirements as well as the requirements of this APP. Visitors will be expected to provide their own protective equipment. In the event that a visitor does not adhere to the provisions of the APP, they will be requested to leave the work area. All non-conformance incidents will be recorded in the Daily Reports. The Site Safety & Health Officer / Site Supervisor will document a written record of all personnel entering and exiting the site.

8.4 Site-Specific Respiratory Protection

Licensing, training certification, medical clearance, and fit test documentation of asbestos removal personnel will be provided prior to the commencement of field activities. Personnel involved in asbestos removal are required to participate in annual medical surveillance and possess a valid (within one year) Physician's Written Opinion, respirator fit test, and training certification. TolTest has developed and maintained a Respiratory Protection Program in accordance with OSHA 29 CFR 1910.134 which is provided in Appendix H of the Accident Prevention Plan.

8.5 Material Safety Data Sheets

Material Safety Data Sheets (MSDS) will be field inserted into a MSDS log book and maintained on site in a readily accessible location. A MSDS will be submitted for any product or material prior to its arrival on site. MSDS information will be made available for all on-site personnel.

8.6 Emergency Response Plan

TolTest will implement an Emergency Response and Contingency Plan, in accordance with OSHA standards 29 CFR 1910.120(L). This plan addresses as a minimum, the following procedures:

8.6.1 *Evacuation Routes and Procedures*

Daily safety meetings will be held prior to work commencing each day. In the event of an emergency, which necessitates evacuation of the site, all personnel will be expected to leave the work zone, and mobilize to a safe distance outside the fenced area. Evacuation routes will be addressed at the daily safety meeting. Personnel will remain at that area until the Site Superintendent provides further instructions.

8.6.2 *Emergency Alerting and Response Procedures*

The following information will be used for on-site emergencies, which require immediate actions to prevent additional problems or harm to responders, the public, property, or the environment.

A cell phone is located with the TolTest Site Superintendent. In the event of any injuries or accidents, the TolTest Corporate Health and Safety Manager, Mr. Rich Barcum, shall be notified within four hours of the occurrence. Mr. Barcum can be reached at (419) 794-3500. The Contracting Officer will be immediately notified for all major emergency situations.

8.6.3 On-Site/Off-Site Safety Personnel

The following information provided in **Table 2** will be used for on-site emergencies, which require immediate actions to prevent additional problems or harm to responders, the public, property, or the environment.

Table 2, Emergency Contact Information

Emergency Telephone Numbers	
Fire Department Ravenna City Fire Department 214 Park Way, Ravenna, OH 44266	911/911 - Emergency (330)297-5738
Police Department Ravenna Police Department 220 Park Way, Ravenna, OH 44266	911 - Emergency (330) 296-6486
Hospital Robinson Memorial Hospital 6847 North Chestnut Street, Ravenna, OH 44266	911 - Emergency (330) 297-2361
TolTest Corporate Office (Maumee, OH)	(419) 794-3500
TolTest Corporate Health and Safety Manager Richard Barcum CIH, CHMM, CSP	(419) 794-3500 (419) 351-3857 cell
TolTest Project Manager Brian Morgan	(812) 636 - 8501 office (419) 794-3663 direct line (812) 701-4198 cell
Site Superintendent Darrin John	(812) 701-8081 cell

Directions to the nearest hospital can be found in Appendix H of the site-specific Accident Prevention Plan developed for this project. These directions will also be posted on site for easy access in the case of an emergency.

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Appendix A-9. Accident Prevention Plan and SSHP

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**ACCIDENT PREVENTION PLAN
&
SITE SAFETY AND HEALTH PLAN**

Revision 01

Prepared For:

**RVAAP-01 Ramsdell Quarry Landfill Remedial Action
Ravenna Army Ammunition Plant, Ravenna, Ohio**

Contract Number: P010023776

TolTest Project No. 22765.03

Prepared By:



**508 West Elnora Street
Odon, Indiana 47562
(812) 636-8501
FAX (812) 636-7572**

August 2010

**ACCIDENT PREVENTION PLAN
&
SITE SAFETY AND HEALTH PLAN**

Revision 01


Prepared For:

**Ramsdell Quarry Landfill Remedial Action Ravenna Ravenna Army
Ammunition Plant, Ravenna, Ohio**

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Christopher W. Warren, CHST 08/11/2010
Date

Reviewed/Approved By:
Project Manager
(812) 701-4198



Brian Morgan 08/11/2010
Date

Reviewed/Approved By:
Corporate Health & Safety Manager
(419) 794-3500



Richard L. Barcum, CIH, CSP, CHMM 08/11/2010
Date

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Appendix D	Accident Reporting Forms
Appendix E	Hospital Directions
Appendix F	Alcohol and Drug Free Workplace Program
Appendix G	Soil Asbestos Removal Plan

1.0 BACKGROUND INFORMATION

TolTest, Inc. (TolTest) has prepared this Accident Prevention Plan (APP) to address work tasks required for **Ramsdell Quarry Landfill (RQL) Remedial Action, Ravenna Army Ammunition Plant (RVAAP) located in Ravenna, Ohio**. This APP is specific to the work activities that will be completed on this project. These activities include but are not limited to select demolition and construction tasks necessary for the completion of the quarry soil removal and site restoration.

Field activities will be conducted in accordance with USACE EM385-1-1, Occupational Safety and Health Administration (OSHA) 29 Code of Federal Regulations (CFR), and Environmental Protection Agency (EPA) 49 CFR. TolTest has developed this APP in accordance with EM385-1-1 Appendix A. An Activity Hazard Analysis (AHA) has also been developed in accordance with EM385-1-1 requirements and is located in **Appendix B**.

Project Description

The remedial action objective (RAO) at RQL is to prevent Security Guard/Maintenance Worker exposures to benz(a)anthracene, benzo(a)pyrene, benzo(b)fluranthene, dibenz(a,h)anthracene, and indeno(1,2,3-cd)pyrene in soil within a former quarry bed to a depth no greater than 1 ft below grade surface (BGS). The RQL AOC is approximately 14 acres and located in the northeastern portion of RVAAP.

The (RAO) for RQL soil removal is only required to the lateral extents of the MI areas requiring removal. The vertical extent of the excavation will be to a minimum of 1 ft below ground surface (bgs) or to bedrock. Once these extents are achieved, additional confirmation soil sampling of the COCs will not be required in the soil removal areas. However, if ACM is present in the soil, soil sampling for ACM will be required. If there is greater than 1% ACM in the soil, additional excavation may be required.

1.2 Experience Modification Rate

TolTest's experience modification rate (EMR) is 0.23.

1.3 OSHA 300A

TolTest's OSHA 300A form is located in **Appendix A**.

1.4 Activity Hazard Analysis

The Activity Hazard Analysis (AHA) (located in **Appendix B**) has been developed for each portion of this project including:

- Excavation
- Construction/selective demolition with the use of hand tools

- Carrying and placing material
- Use of hand and power tools
- Using heavy equipment
- Working near explosives
- Asbestos abatement activities

2.0 STATEMENT OF SAFETY AND HEALTH POLICY

One of the TolTest, Inc. Profitability Principles is to promote **Safety** by stressing safe work practices through meetings, training programs, and medical surveillance, in order to prevent accidents, protect associates and equipment, and provide a working environment free of hazards for the public.

We have adopted a “Zero Accidents” goal. We believe that every accident is preventable and ask all associates to share the responsibility for reducing personal injury, automobile, and equipment incidents to zero. We must now take the necessary steps to absolutely ensure that every action taken is accomplished in a safe and acceptable manner.

TolTest’s Safety and Health Policy Statement is located in our Corporate Incident Prevention Plan. A copy of TolTest’s Corporate Incident Prevention Plan and portions our Corporate Health and Safety Plan has been included in **Appendix C**.

3.0 RESPONSIBILITIES AND LINES OF AUTHORITIES

At TolTest, the safety and protection of associates, clients, and the community is a core value. This concern for safety is not restricted to field operations but extends to the offices and shop facilities. If an activity or condition is unsafe, the task will not proceed until the situation is corrected.

Every associate, regardless of job title, shares the responsibility for safety and should report any unsafe condition without fear of reprisal. Project Managers and Site Supervisors are responsible for administration and enforcement of the safety procedures and protocols at project locations. The Corporate Health and Safety Department is responsible for supporting and assisting the General Manager/Operating Unit Managers, Project Managers, and Site Supervisors in the execution of the health and safety program.

The identification and accountability of TolTest personnel at both the Corporate and Project level is as follows:

3.1 Project Manager

The TolTest Project Manager, **Mr. Brian Morgan**, is the key operational manager of project activities and is responsible for:

- Maintaining clear, up-to-date communications with on-site representatives;
- Coordinating resources required to complete the project;
- Monitoring personnel, compliance with regulations, procedures, and contractual requirements;
- Allocating TolTest resources to individual tasks, including the selection of a Site Superintendent, and/or project personnel;
- Monitoring the project schedule and budget;
- Overseeing site activities and day-to-day management; and
- Overseeing the administrative and support functions for the project.

3.2 Site Superintendent/ Competent Person

The TolTest Site Superintendent, **Mr. Darrin John** is responsible for maintaining files for task execution, site safety oversight, hazard identification, maintaining reference documents, attending project meetings, and project performance. Mr. John's additional responsibilities will include but not be limited to the following:

- Ensure that subcontractor conducts daily tailgate safety meetings to disseminate information to project personnel necessary to accomplish each day's activities;
- Monitor all activities by project personnel to include subcontractors and document site progress;

- Review and implement project plans;
- Provide on-site decision making to perform all operational tasks according to specifications;
- Provide administrative support, supervision, and management of contractor and subcontractor personnel, equipment, and materials;
- Conduct incident and accident investigations and prepare the required reports;
- Attend pre-construction conference and meetings associated with project progress and standings; and
- Troubleshoot unique field health and safety issues and provide feedback and suggestions.

3.3 Quality Control Representative (QC Manager)

As QC Manager, **Mr. Mike Hovis** will be responsible for the implementation and adherence to the TolTest Corporate QC Program and ensuring the project performance conforms to the applicable project specifications and drawing provided in the solicitation. Mr. Hovis will conduct the following tasks:

- Document quality control and quality assurance activities;
- Review and approve each submittal;
- Ensure material is legible and compliant with contract documents;
- Ensure testing is performed; and
- Supervise QC testing as required by the contract documents.

3.4 Site Safety and Health Officer (SSHO)

As SSHO, **Mr. Darrin John** will be responsible for the implementation and adherence to the TolTest Health and Safety Program and ensuring the project performance conforms to the applicable project specifications and plans the SSHO's additional responsibilities will include but not be limited to the following:

- Implement and ensure TolTest and subcontractor compliance with approved APP, AHA, and all other health and safety requirements;
- Maintain, APP, AHA and other applicable site specific safety reference material on the project site;
- Inspect materials and equipment received on-site to ensure compliance with contract requirements;
- Inspect onsite safety and health equipment to ensure proper operation and accuracy;
- Inspect field activities;
- Coordinate Personal Protective Equipment (PPE) supplies for TolTest Personnel only;
- Troubleshoot unique field health and safety issues and provide feedback and suggestions;

- Maintain a safety and health deficiency system tracking system that monitors recognized deficiencies until they are resolved; and
- Be responsible for ensuring all personnel entering the site have the proper training and/or security access.

3.5 Asbestos Trained Supervisor

The Asbestos Trained Supervisor will be responsible for the implementation and adherence to the TolTest Health and Safety Program and ensuring the project performance conforms to the applicable project specifications and plans. The Asbestos Trained Supervisor's additional responsibilities will include but not be limited to the following:

- Demarcate asbestos work area and instituting engineering controls
- Erect Decontamination area
- Submit a 10-day Asbestos Demolition and Renovation Notification to the State of Ohio and the Prior Notification of Asbestos Hazard Abatement Project to the Ohio Department of Health.
- developing appropriate responses to any unforeseen and unplanned events that may occur during the course of the work
- on-site inspections during asbestos removal activities
- ensure personnel are appropriately trained
- ensure all asbestos sampling is completed
- implement dust control measures
- seal and label all ACM shipping containers for offsite transport
- perform the final clearance inspections
- personnel monitoring

3.6 Corporate Health and Safety

Mr. Richard Barcum CIH, CHMM, CSP is the Corporate Health and Safety Manager and is responsible for program safety oversight and implementation and review of corporate safety policies. Mr. Barcum has independent direct authority over safety oversight and communication with the Project Manager and the Site Superintendent.

3.7 Competent/Qualified Person(s)

A Competent and/or Qualified Person(s) meeting the requirements of a Competent Person as specified by Occupational Safety and Health Administration (OSHA) will be assigned for the appropriate project functions.

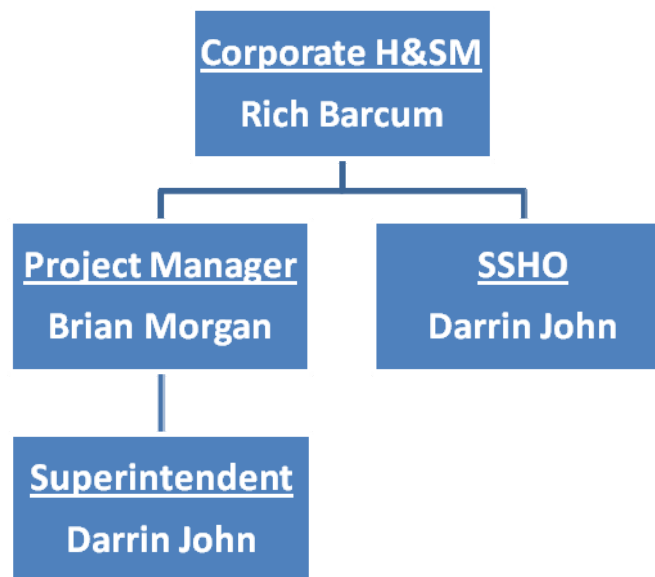
No work will be performed unless the designated competent person has approved work and is present on the job site. In addition, pre-task safety and health analysis will be conducted prior to the start of each task. These analyses will be conducted during tail-gate safety meetings. The AHA that has been developed for this project may be used as a tool in implementing precautions for the hazards found during pre-task safety and health analysis.

COMPETENT/QUALIFIED PERSON(S)	
Excavation – Darrin John	
Excavation – Mike Hovis	

38 Lines of Authority

The TolTest Corporate Health and Safety Department is responsible for oversight of the APP. The Corporate Health & Safety Manager (H&SM) or designee conducts compliance assessments and audits as required to ensure the safety of all personnel. As such, the Corporate H&SM or designee may suspend work being performed in an unsafe manner.

The SSHO is responsible for day-to-day implementation of and compliance with the health, safety, and, to a lesser extent, some quality assurance requirements. In this capacity, he maintains close coordination with the Project Manager and has the responsibility and authority to stop work when unsafe conditions exist or work is not being performed to specifications. Lines of authority on this project have been provided in this Section.



4.0 SUBCONTRACTOR AND SUPPLIERS

SUBCONTRACTORS / SUPPLIERS
PIKA International - UXO
Boblitt Surveying Inc – Site Surveying

Subcontractors that will be utilized by TolTest are required to abide by the provisions and limitations set forth in our master subcontractor agreement contract and the requirements and measures outlined in our Work Plan, APP, and AHA.

Any subcontractors and suppliers that will be used on the project will be advised of the safety requirements for the project upon issuance of subcontracts and/or purchase order. Upon arrival at the job site, new subcontractors and suppliers who access the site shall be indoctrinated by the Site Superintendent on the safety requirements. Subcontractors and suppliers shall be required to attend the daily tailgate safety meetings or conduct their own safety meeting to address specific hazards, precautions, and procures. Suppliers who deliver materials shall be required to report to the Site Superintendent prior to completing the delivery to make sure that the delivery person is aware of any potential hazards that may exist at the site, and to make sure that the delivery person takes appropriate safety precautions while on the site.

The responsibilities for subcontractors and suppliers are the same as those established for TolTest personnel. Personnel on site must fully comply with the safety provisions of the contract and the Site Superintendent has the overall responsibility to make sure the subcontractors and suppliers are informed of the requirements and that the requirements are met.

5.0 TRAINING

Site specific training and orientation will include the review of this APP and supporting Work Plan, SSHP, and AHA for on-site personnel. Verification of review will be confirmed by the sign off sheet located at the beginning of each document.

Daily tailgate safety meetings will be conducted by each Subcontractor with on-site personnel in attendance. Topics discussed during these tailgate safety meetings will be tailored to address the day's activities such as concrete work, masonry, welding, electrical work, or excavation, and may be derived from the elements of this APP and project AHA. These topics include but are not limited to the following:

- Site Access and RVAAP standard operating procedures.
- Plan review and requirements of the EM 385-1-1.
- Emergency contact information and incident reporting.
- Emergency evacuation procedures.
- Location of Material Safety Data Sheets, First Aid Kit, Fire Extinguishers, and Phone.
- Personal Protective Equipment.
- Work zone delineation and restricted access points.
- Stop Work Authority.
- Lines of authority and identification of personnel with first aid and CPR training.
- Phases of work and potential hazards

5.1 Certificates and Training

Subcontractor will verify that site personnel are trained specifically for the work activities, procedures, and equipment at a site. This training will at a minimum include:

- Project Specific Orientation
- Hazard Communication
- Control of Hazardous Energy (lockout/tagout)
- Site Emergency Plan
- Site Safety Program
- Contingency Plans
- Excavation Safety
- Bloodborne Pathogens (minimum of two associates)
- Non-asbestos abatement activities required to complete the web based Asbestos Awareness Training.
- Occupational Noise
- First Aid/CPR (minimum of two associates)
- Personal Protective Equipment (PPE) Use and Assessment
- Corporate Substance Abuse Policy
- Confined Space Entry (Supervisor/ Attendant/ Entrant)
- EPA Accredited Asbestos Abatement Worker Course and be licensed in the State of Ohio

Each training program will address applicable EM 385-1-1 and OSHA regulations and will provide the opportunity for workers to raise questions and discuss concerns. A written record of the completed training will be kept to document the subjects covered and the persons participating.

Periodic training will be provided for all associates working on-site when any changes are made to requires or procedures on this project. This training will be designed to inform of these changes and the safety precautions implemented to protect from all known hazards that may surface as a result of these changes. This training will be accomplished by reviewing the revised APP and/or AHA and signing the new declaration of understanding provided in the APP.

5.2 Emergency Response Training

In the event of an emergency, which necessitates evacuation of the site, all personnel will be expected to leave the work zone, and mobilize to an established safe distance. Evacuation routes will be addressed at the daily safety meeting. Personnel will remain at that area until the Site Superintendent provides further instructions. Emergency contact information may be found in **Section 8.2.4** of this document.

The review of this APP by all workers completing task on this project serves as an initial training of the Emergency Response procedures that have been put in place for this project. The following Emergency Response Plans may be found and reviewed in **Section 8.2** Emergency Response Plans of this APP:

- Procedures and tests (8.2.1);
- Spill plans (8.2.2);
- Firefighting plan (8.2.3);
- Posting of emergency telephone numbers (8.2.4); and
- Man overboard/abandon ship (8.2.5).

5.3 Verification of Training

Training records sufficient to verify the completion of applicable training required by EM 385-1-1, OSHA Standards, and/or site contractual requirements will be maintained at the Program Management Office (PMO) located in Maumee, Ohio.

6.0 SAFETY AND HEALTH INSPECTIONS

6.1 Safety Inspections

Machinery and equipment will be inspected and tested daily to ensure a safe operating condition. Records of tests and inspections will be maintained at the site, made available upon request, and become part of the project file. Designated work areas and ongoing activities will be visually inspected periodically each day to identify and minimize potential hazards. The observations from these inspections and corrective actions will be included in the Daily Reports.

The Site Superintendent/SSHO will also conduct daily inspections of the work site to ensure that associates are operating in accordance with all applicable Health and Safety regulations, policies, procedures, and approved plans for this project. The Site Superintendent/SSHO will maintain a written log of these inspections to include operation/area inspected, date of inspection, identified hazards, recommended corrective actions, estimated and actual dates of corrections. These safety inspection logs will be submitted with TolTest's daily quality control report. TolTest will also establish a deficiency tracking log as outlined in EM 385 1-1 A 01 A.06 (f) that will include date of observed deficiency, corrective action assignee information, and date the deficiency was corrected.

6.2 External Inspections

The Assigned Inspector will be notified 72 hours in advance of all Preparatory Inspections and 24 hours in advance of all Initial Inspections. The Assigned Inspector may elect to join in be present for these inspections or conduct separate quality assurance inspections to ensure that the project is being performed in accordance with approved project plans. A final inspection of the site may be conducted with the Assigned Inspector for final acceptance of the project.

7.0 INCIDENT REPORTING

All incidents will be reported, investigated, and analyzed to develop countermeasures that may prevent re-occurrence. These incidents will be reported to CO within 24 hours of occurrence. A standard TolTest incident report form can be found in **Appendix D**, and will be completed for each incident that takes place on this project. All incidents will be reported to the Corporate Health and Safety Department immediately.

7.1 Exposure Data

The Superintendent will be responsible for providing exposure data (man-hours worked) on a daily basis. This information will be reported on the Contractor's Daily Production Reports.

7.2 Accident Investigations, Reports, and Logs

The SSHO will be responsible for performing incident investigations and completing incident investigation reports using the Government Contractor Significant Injury Reports (CSIR) form to be transmitted to the Contracting Officer (CO) or designated representative as soon as possible but no later than 5 working days following the occurrence. All incidents will be reported to the CO as soon as possible, but not more than 24 hours after incident. The SSHO will coordinate incident investigations and reporting activities with the Corporate Health and Manager for the maintenance of OSHA recordable and other applicable injury logs.

The Corporate Health and Safety Department will provide additional support on all incident investigations and will assist in completing the CSIR when necessary.

Following investigation, prescribed corrective actions will be implemented in the field as soon as reasonably possible. While investigation is pending, hazards will be removed or other actions will be taken to protect from these hazards that may have caused the incident.

7.3 Immediate Notification of Major Accidents

The SSHO will make immediate notification of all major accidents to the Contracting Officer or designated representative and will follow up this notification with written reports within 4 hours of the occurrence. The following require immediate accident notification:

- A fatal injury;
- A permanent total disability;
- A permanent partial disability;
- The hospitalization of three or more people resulting from a single occurrence; and
- Property Damage of \$ 200,000 or more.

8.0 PLANS REQUIRED BY THE SAFETY MANUAL

8.1 Layout Plans (04.A.01)

Prior to the start of construction, layout plans will be coordinated with the CO concerning the on-site placement of equipment, material, waste containers, and site access.

There will be no temporary construction buildings, facilities, or fencing in place for this project.

8.2 Emergency Response Plan

Operations, materials and equipment involving potential exposure to hazardous substances, agents, or environments shall be evaluated by a qualified industrial hygienist, or the competent person, to evaluate a hazard control program for acceptance before the start of the operations. Emergency plans will be developed ensure associate safety in the case of a fire or any other emergency. These plans will be provided in writing and reviewed with all affected personnel.

8.2.1 Procedures and Tests (01.E.01)

The Site Superintendent will meet the CO or designated representative to find out the emergency response procedures applicable while working on this project. The Superintendent will use this information to determine evacuation routes and procedures once on-site. All associates working on-site will be notified of these routes and procedures during their initial arrival to the project. A reminder will be given during tailgate safety meetings. During severe weather conditions workers will be instructed by SSHO to head to designated area that is determined the CO or designated representative.

8.2.1.1 General Evacuation

In the case of an emergency situation, such as fire or significant release of toxic gases, an air horn will be sounded for approximately 10 seconds indicating the need for immediate evacuation. At that point the following procedures will be followed:

- All personnel will evacuate and assemble at a designated emergency rally point, which will be identified by the SSHO. The current rally point is the TolTest office trailer. This may be changed at any time by the SSHO. If this rally point is changed, the new rally point will be communicated in tailgate safety meetings.
- Safe distances between the rally point and the emergency area can only be determined at the time of an emergency, based on a combination of site and incident specific factors (e.g., wind direction). The safe distance will be determined by the SSHO.
- The location of the rally point should normally be upwind of the emergency site as determined by the wind direction indicator.
- For efficient and safe site evacuation and assessment of the emergency situation, the SSHO will have authority to call for support from outside services. Emergency response personnel (i.e., local fire and police) may enter the immediate emergency area as they deem necessary and appropriate to perform required services.

- Under no circumstances will incoming personnel or visitors be allowed to proceed into the area once the emergency signal has been given.
- The SSHO will ensure that access for emergency equipment is provided and that all combustion apparatus has been shut down once the alarm has been sounded.
- Upon establishing the safety of all onsite personnel, the personnel identified in the *Notifications* area of this section will be notified of all emergencies.

8.2.1.2 Potential or Actual Fire or Explosion

If the potential for fire or explosion exists in the work zone, or if an actual fire or explosion has taken place, an air horn will sound for 10 seconds at intervals. Immediately evacuate the site.

8.2.1.3 Protective Equipment Failure

If any site worker experiences a failure or alteration of protective equipment that affects the protection ability of the equipment, that person and co-worker(s) will immediately leave the Construction Work Zone (CWZ). Re-entry to the CWZ will not be permitted until the equipment has been repaired or replaced.

8.2.1.4 Physical Injury or Industrial Chemical Exposure

Emergency first aid will be applied onsite, if necessary. For non-emergency physical injuries or industrial chemical exposure requiring medical treatment beyond onsite first aid, the victim will be transported to an off-base medical facility. Emergency response actions listed in the applicable Material Safety Data Sheets (MSDS) for chemical exposures will be followed as closely as the situation will allow. Typical first aid responses to chemical exposure emergencies include:

- Inhalation – Move to fresh air and call for emergency assistance if needed by dialing "911" from a civilian/public phone, or contact the nearest hospital identified in this site-specific APP from any site cellular phone.
- Ingestion – Decontaminate and transport to emergency medical facility identified in this site-specific APP.
- Puncture Wound or Laceration – Decontaminate and transport to emergency medical facility identified in this site-specific APP.

For emergency/critical physical injuries, medical assistance must be summoned by dialing "911" from a civilian/public phone; or contact the hospital identified in the posted hospital directions from a site cellular telephone. The hospital directions are also provided in **Appendix E** of this APP.

8.2.1.5 Injury in the CWZ

In the event of an injury in the CWZ, all site personnel, except the injured party will exit the CWZ and assemble at the site field office if it is determined that others are in danger. The SSHO will evaluate the nature of the injury and the injured party will be decontaminated to the extent practical prior to removal from the CWZ.

Appropriate first aid will be initiated, an immediate request will be made for an ambulance, if necessary, and the designated medical facility will be notified as required. No persons will re-enter the CWZ until the cause of injury or symptoms are determined.

8.2.1.6 Injury outside the CWZ

In the event an injury occurs outside of the CWZ, the SSHO and will be notified immediately. Appropriate first aid will be administered and, if necessary, the injured individual will be sent to the designated medical facility. The injured associate may be transported for treatment using the posted directions to the nearest off-site medical facilities as detailed in **Appendix E** of this APP. If the injury does not affect the safe performance of other site personnel, operations may continue.

8.2.2 Spill Plans (01.E.01, 06.A.02)

Operations, materials and equipment will be evaluated to determine the presence of hazardous environments or if hazardous or toxic agents could be released into the work environment. The AHA will be used for the evaluation. The analysis will identify substances, agents and environments that present a hazard and recommend hazard control measures. Engineering and administrative controls will be used to control hazards; in cases where engineering or administrative controls are not feasible, PPE may be used.

If the potential for a hazardous environment is discovered during this evaluation, precautions implemented to protect workers from these potential hazards will be outlined in the AHA developed for this project. The AHA will identify all substances, agents, and environments that present a hazard and recommend hazard control measures.

8.2.3 Fire Fighting Plan (01 E.01, 19.A.04)

Fire extinguishers of the appropriate size and type will be maintained on site during each phase of the work. If work is being performed in more than one area simultaneously, TolTest will have a fire extinguisher at each location. These fire extinguishers will have a minimum rating of 10A:60BC. In the event of a fire, the RVAAP Base Operator will be contacted immediately and the Contracting Officer or designated representative will be contacted shortly after. If the fire is small enough to be extinguished using one extinguisher, a competent associate may choose to combat the fire. The fire will be fought with a fire extinguisher using the P.A.S.S. System (Pull, Aim, Squeeze, & Sweep).

Phone numbers for the fire department and other emergency contacts will be posted at the job site where accessible to all associates. Each associate will be trained on what to do in case of a fire and when and how to use a fire extinguisher, blankets, water or other fire extinguishing measures in a manner that would not jeopardize their personal safety. Regular job site inspections will be made to make sure fire extinguishers are fully charged and ready for use, and that fire prevention measures are in place.

8.2.4 Posting of Emergency Telephone Numbers (01.E.05)

The following information will be used for on-site emergencies, which require immediate actions to prevent additional problems or harm to responders, the public, property, or the environment.

The on-site emergency phone numbers for this project are detailed in this section. A telephone is located with the TolTest Site Superintendent. If this call is made using a cell phone, be sure to notify the operator that this call is being made from RVAAP and the location of the incident. This will ensure that the call is dispatched to the appropriate emergency services.

<i>Emergency Telephone Numbers</i>	
Ravenna City Fire Department 214 Park Way, Ravenna, OH 44266	911 - Emergency (330)297-5738
Ravenna Police Department 220 Park Way, Ravenna, OH 44266	911 - Emergency (330) 296-6486
Robinson Memorial Hospital 6847 North Chestnut Street, Ravenna, OH 44266	911 - Emergency (330) 297-2361
TolTest Odon Office	(812) 636-8501
TolTest Corporate Health and Safety Manager Mr. Richard Barcum CIH, CHMM, CSP	(419) 794-3500 (419) 351-3857 cell
Site Superintendent/SSHO Darrin John (CPR/First Aid Responder)	(812) 701-8081 cell
TolTest Project Manager Brian Morgan	(812) 636 - 8501 (812) 701 - 4198

Emergency telephone numbers for ambulance, physicians, hospital, fire and police will be conspicuously posted at the work site. The superintendent will have a cell phone at all times, and will make sure that any associate working in remote locations will have an operating cell phone or other means of communication if cell phone service is not available. Clearance will be obtained through the Contracting Officer or designated representative for the use of cell phones.

8.2.5 Man Overboard/Abandon Ship (19.A.04)

Not applicable.

8.2.6 Medical Support

Robinson Memorial Hospital is the medical facility that will be used in the case of an emergency. It is located at 6847 North Chestnut Street, Ravenna, OH 44266 and the phone number is (330) 297-2361. This information can also be found in the Emergency Telephone Number chart included in **Section 08.2.6** of this plan.

This chart and detailed hospital directions will be posted on-site for easy access in the event of an emergency. CPR/First Aid Responders assigned to this project are also highlighted in this chart.

8.3 Plan for Prevention of Alcohol and Drug Abuse (01.C.02)

TolTest's Alcohol and Drug Free Workplace Program is provided in **Appendix F**.

8.4 Site Sanitation Plan (Section 2)

TolTest will provide toilet facilities to meet EM 385-1-1 requirements for a construction site. At a minimum, the following will be provided:

- 20 or fewer workers - 1 toilet with a seat will be provided
- 20 – 199 workers – 1 toilet with a seat and 1 urinal will be provided per every 40 workers
- 200 or more workers - 1 toilet with a seat and 1 urinal will be provided per every 50 workers

Toilet protectors will be provided. In the event that running water cannot be provided, hand sanitizers will be supplied for workers. The location of these toilet facilities will be determined by the Superintendent and CO or designated representative prior to deliver to construction site. The location of each toilet facility will be given to workers during tailgate safety meetings.

Drinking water will be supplied to workers and located in designated break areas. These break areas will be determined by the Superintendent and CO or designated representative upon initial arrive to work site. The location of the water and designated break areas will be given to workers during tailgate safety meetings.

8.5 Access and Haul Road Plan (8.D.1)

TolTest will utilize existing roadways and will not create or cut new access roads. Existing roads will not be blocked nor traffic impeded for the purpose of work zone access. There will be tasks on this project that require the redirection of traffic and in some cases the restriction of access to roads running through work zone. When necessary, this will be implemented in accordance with CO requirements.

TolTest will notify the CO with-in 14 calendar days before closing any traffic lanes, blocking streets, or otherwise changing traffic routes. TolTest will provide, place, maintain, relocate, and remove all traffic control devices required for construction on this project. All traffic control will comply with the requirements of the current Manual on Uniform Traffic Control.

8.6 Respiratory Protection Plan (05.E.03)

TolTest has developed and implemented a Respiratory Protection Procedures to address the proper use of respirators on this project.

Personnel required to wear air purifying respirators must have a current (within one year) Physician's Written Opinion being medically cleared to wear a respirator. Personnel must also have a current fit test (within one year) to wear a respirator and be trained in the proper use of respirators. In addition, workers will not be permitted to use respirators unless training has been completed to address the following topics:

- Why the respirator is necessary and how improper fit, usage, or maintenance can compromise the protective effect of the respirator;
- Limitations and capabilities of the respirator;
- How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions;
- How to Inspect, put on and remove, use, and check the seals of the respirator;
- Procedures for maintenance and storage of the respirator; and
- How to recognize medical signs and symptoms.

8.7 Health Hazard Control Program (06.A)

All operations that are conducted in the completion of this project will be evaluated to determine if this possibility exists. The project AHA will be used to evaluate operations, materials and equipment to determine the presence of hazardous environments, and recommended hazard control measures.

If the exposure to a hazardous or toxic environment is discovered at any time, the chemical and/or environment will be evaluated by TolTest's CIH to develop a Hazard Control Program to be submitted for review prior to continuing work in areas that present the potential exposure to hazardous or toxic environments.

The AHA that has been developed for this project will also be revised to include precautions and procedures that will be implemented to protect workers from respiratory related injuries and illnesses.

8.8 Hazard Communication Program (06.B.01)

Due to the nature of work for this project, hazardous materials are present. Associates will receive hazard communication for lockout/tag out and are required to review the Work plan, AHAs, and this APP prior to entering the site.

Additionally, the superintendent will maintain an inventory of any hazardous materials brought onto the job site and will keep a notebook containing MSDS sheets. All associates will be informed of the location of MSDS sheets as part of their new employee indoctrination.

8.9 Process Safety Management Plan (06.B.04)

Not applicable.

8.10 Lead Abatement Plan (06.B.05 & Specifications)

Not applicable.

8.11 Asbestos Abatement Plan (06.B.05 & Specifications)

All personnel involved in asbestos abatement activities are required to complete an EPA Accredited Asbestos Abatement Worker Course and be licensed in the State of Ohio or Indiana EPA. All personnel not performing asbestos abatement activities but working inside of the construction work zone prior to completion of asbestos abatement activities are required to complete the web based Asbestos Awareness Training. The Soil Asbestos Removal Plan for this project is included in Appendix G.

8.12 Radiation Safety Program (06.E.03a)

Not applicable.

8.13 Abrasive Blasting (06.H.01)

Not applicable.

8.14 Heat/Cold Stress Monitoring Plan (06.I.02)

The SSHO will assess the condition of the associates, specific weather conditions, work tasks, and other environmental factors and conditions to determine when to begin monitoring. Work/rest regimens and fluid replacement schedules will be established for associates working while wearing impermeable work clothing.

8.14.1 Cold Stress

Site workers will be protected from exposure to cold so that the core body temperature does not fall below 98.6° F. Lower body temperatures will very likely result in reduced mental alertness, reduction in rational decision making, or loss of consciousness with the threat of fatal consequences. To prevent such occurrence, the following measures may be implemented:

Site workers are to wear warm clothing, such as gloves, heavy socks, etc., when the air temperature is below 45° F.

When the air temperature is below 32° F, clothing for warmth may include:

- Insulated suits, such as whole body thermal underwear
- Wool socks or polypropylene socks to keep moisture off the feet
- Insulated gloves
- Insulated boots
- Insulated head cover such as hard hat, winter liner, or knit cap

- Insulated jacket, with wind and water-resistant outer layer

At air temperatures below 32° F, the following work practices must be implemented:

- If the clothing of a site worker might become wet in any way on the job site, the outer layer of clothing must be water impermeable.
- If a site worker's underclothing becomes wet in any way, the worker must change into dry clothing immediately. If the clothing becomes wet from sweating (and the employee is uncomfortable), the employee may finish the task at hand prior to changing into dry clothing.
- Site workers will be provided with a warm (65° F or above) break area.
- The intake of coffee and tea should be limited, due to their circulatory and diuretic effects.
- The buddy system is to be practiced at all times onsite. Any site worker observed with severe shivering will leave work area immediately.
- Site workers should dress in layers, with thinner lighter clothing worn next to the body.

If cold stress becomes a realized concern, the SSHO will conduct training on the warning signs and appropriate first aid measures associated with the various levels of cold stress.

8.14.2 Heat Stress

Heavy physical labor can greatly increase the likelihood of heat fatigue, heat exhaustion, and heat stroke, the latter being a life threatening condition. Heat stress monitoring and observation of personnel will commence when the ambient temperature is 80° F or above (65° F, if chemical protective clothing is worn).

To prevent heat stress, the following control measures will be implemented.

- Site workers will be encouraged to drink plenty of water throughout the day.
- Onsite drinking water will be kept cool to encourage personnel to drink frequently.
- A work regimen that will provide adequate rest periods for cooling down will be established, as required.
- All personnel will be advised of the dangers and symptoms of heat stroke, heat exhaustion, and heat cramps.
- Associates will be instructed to observe and monitor themselves and coworkers for signs of heat stress and to take additional breaks as necessary.
- All breaks should take place in cool, well ventilated, and shaded rest areas.

8.15 Crystalline Silica Monitoring Plan (12.A.01)

Not applicable.

8.16 Night Operations Lighting Plan (16.C.19.d)

TolTest does not anticipate working at night. If it becomes necessary to complete construction related tasks outside at night, TolTest will develop and submit a Night Operations Lighting Plan before night work begins outside.

8.17 Fire Prevention Plan (Section 09.A.01)

Smoking is only permitted in designated smoke areas located on RVAAP. A hot work permit and safe work permit will be obtained prior to start of work. All construction activities will be completed in accordance with the fire protection requirements of RVAAP "Fire Prevention and Fire Protection," that apply during construction.

At a minimum two 20 pound 4A:20 BC rated fire extinguisher will also be staged near hot work in accordance with the hot work permit. A fire watch trained in accordance with National Fire Protection Association (NFPA) 51B will be present during all hot work operations and will remain present at least 30 minutes after hot work is completed or as long as stated on hot work permit. Combustible materials such as tool lubricants will be stored in an equipment trailer outside of the building away from work activities. Only small quantities of these materials will be brought into the building as required for daily application.

In addition to the fire extinguishers used specifically for hot work, fire extinguishers of the appropriate size and type will be maintained on site during each phase of the work. If work is being performed in more than one area simultaneously, TolTest will have a fire extinguisher at each location. These fire extinguishers will have a minimum rating of 10A:60BC. In the event of a fire, the Ravenna City Fire Department will be contacted immediately. If the fire is small enough to be extinguished using one extinguisher a competent associate may choose to combat the fire. The fire will be fought using the P.A.S.S. System (Pull, Aim, Squeeze, & Sweep).

8.18 Wild Land Fire Prevention Plan (09.K.01)

There is no apparent threat on this project from wild fires therefore no separate wild fire plan has been prepared.

8.19 Hazardous Energy Control Plan (12.A.01)

Utility disconnections and equipment lockouts may be implemented for this project if necessary to control hazardous energy. It is understood that the construction area will be closed off but RVAAP operations will continue during construction. TolTest will coordinate with the CO on any lockout/tag out events prior to implementation to prevent or minimize interference with RVAAP daily operations.

8.20 Critical Lift Procedures (16.C.18)

Not applicable.

8.21 Contingency Plan Severe Weather (19.A.03)

TolTest will abide by the RVAAP severe weather plan and evacuation route if necessary. The National Weather Service will be monitored and used to determine when weather requires the shutdown of operations.

If an Inclement Weather Advisory is issued, the Superintendent/SSHO will act in accordance with these recommendations. This advisory may at a minimum require the following:

- Tie down and secure material and loose debris at construction sites.
- Cover electrical equipment from exposure to the weather.
- Store loose tools, oil cans and extra fuses in a tool box.
- Store loose tools, oil cans and extra fuses in a tool box.
- Secure netting, scaffolding and sidewalk sheds.
- Suspend crane operations and secure crane equipment when wind speeds reach 30 mph or greater.
- Suspend hoist operations and secure exterior hoists when wind speeds reach 35 mph or greater, unless manufacturer specifications state otherwise.
- Brace and secure construction fences.

The Superintendent/SSHO has the authority to shutdown work due to severe weather even if an advisory is not issued by the National Weather Service to do so. The Superintendent/SSHO's decision to shutdown work may include but not be limited to the following:

- Lightning in the area
- Heavy rain
- Snow
- High winds

8.22 Float Plan (19.F.04)

Not applicable.

8.23 Site Specific Fall Protection Plan & Prevention Plan (Section 21)

Not applicable.

8.24 Demolition Plan (23.A.01)

Not applicable.

8.25 Excavation/trenching Plan (25.A.01)

TolTest does not anticipate excavating or trenching deeper than 2 ft. If there becomes a need to excavate or trench 5 ft or deeper, an Excavating/Trenching Plan will be developed and submitted for approval. The plan will be developed to meet EM 385-1-1 requirements.

8.26 Emergency Rescue (Tunneling) (26.A.05)

Not applicable.

8.27 Underground Construction Fire Prevention and Protection Plan (26.D.01)

Not Applicable.

8.28 Compressed Air Plan (26.I.01)

Not applicable.

8.29 Formwork and Shoring Erection and Removal Plan (27.B.02)

Not applicable.

8.30 Pre-Cast Concrete Plan (27.D)

Not Applicable.

8.31 Jacking Plan (Lift) Slab Plan (27.E.)

Not applicable.

8.32 Steel Erection Plan (27.F.01)

Not applicable.

8.33 Site Safety and Health Plan for HTRW work (28.B)

A Site Safety and Health Plan (SSHP) has been developed to address additional hazards on this project that are relevant to Hazardous Waste Operations and Emergency Response (HAZWOPER) work that will be completed. EM 385-1-1.28.B has a required list of information that must be provided in the SSHP. Much of this information is provided in the APP Sections of this Plan. Additional information that is not provided in the APP Sections of this plan has been provided in the SSHP of this plan.

- APP – Sections 1- 9
- SSHP – Sections 10 - 12

8.34 Blasting Plan (29.A.01)

Not applicable.

8.35 Diving Plan (30.A.13)

Not applicable.

8.36 Confined Space (34.A)

Not applicable.

8.37 Working Near UXO

The RVVAP formally produced ammunition for the U.S. Military during World War II, the Korean War, and the Vietnam Conflict. Past use of this area present the possibility of discovering UXO during construction and excavation activities. The following measures will be taken to protect workers, environment, and community from the possibility of detonating UXO:

- An UXO Technician II will be on-site during site preparation and excavation activities. As part of the daily rate included in the schedule of values, the UXO Technician will conduct an initial MEC avoidance sweep of the areas that will undergo ground disturbance and will be onsite to monitor/identify potential MEC encounters.
- Site preparation and excavation activities will only be conducted in areas that have had an MEC avoidance sweep and clearance has been given by UXO Technician II.
- All explosives encountered on jobsites will be treated as extremely dangerous.
- All workers that encounter explosives on the jobsite will follow the **3Rs: RECOGNIZE, RETREAT, and REPORT.**
 1. **RECOGNIZE:** Do not touch, disturb or move the item (explosives can become very unstable over time). They can detonate with movement or sometimes due to ground vibration. Explosives come in all shapes, sizes, and color but exposure to weather and time can alter or remove these markings.
 2. **RETREAT:** Mark the general location of the explosive hazard with tape, colored cloth, or colored ribbon. If available, attach the marker to a branch, structure or other existing object so that it is about 3 ft (.9 m) off the ground and visible from all approaches. Place the marker no closer than the point where you first recognized the explosive hazard and do not drive stakes into the ground or otherwise disturb the surface.

Leave by the same route you entered if possible. Clear site of all workers and secure from unauthorized entry.

3. **REPORT:** Once area has been evacuated, notification will be made immediately. Provide as much information as possible, including location, approximate size, shape, color and any other distinguishing features such as nomenclature or writing, fins, etc.,
- No smoking within 60 ft of known UXO.
 - No cell phones, short-wave radios, single side-ban radios, other communications, or navigation devices will be used within 60 ft of areas known to house explosives.
 - A barrier will be put in place 60 ft from known UXO to ensure that cell phones, short-wave radios, single side-ban radios, other communications, or navigation devices are only used at safe and approved distances.

9.0 RISK MANAGEMENT PROCESSES

TolTest is committed to providing a safe and healthful, accident-free workplace maintained in accordance with all regulations, guidelines, policies and standards. An AHA has been developed for this project to address the activities being performed and identify the work sequences, the specific anticipated hazards, site conditions, equipment, materials, and the control measures to be implemented to eliminate or reduce each hazard to an acceptable level of risk.

The AHA that has been developed for this project will be continually reviewed throughout the completion of the project. If any other activities arise that have not been identified and covered on the approved AHA, an AHA will be developed to address the activities being performed and the control measures to be implemented to eliminate or reduce each hazard to an acceptable level of risk. This AHA will be submitted for review prior to the start of work on this newly evaluated work activity.

TolTest will not begin work until the AHA for the work activity has been approved and discussed with all engaged in the activity, including the Contractor, subcontractor(s), and Government on-site representatives at preparatory and initial control phase meetings. Engineering controls will be explored prior to the use of PPE. PPE will be used whenever its use can prevent injury and engineering controls are not feasible.

9.1 Protective Requirements

TolTest will attempt to exhaust all options to protect project personnel before requiring the use of PPE. These options may include engineering controls, administration controls, or a combination of the two. Finally if hazards are still present, PPE will be required to protect from the remaining hazards. The specific type of PPE to be used on this project will vary in accordance with specific tasks. At a minimum, Level D PPE will be utilized continuously. Level D PPE includes:

- Work clothes
- Boots/Steel –toed
- Hard hat
- Safety glasses
- Cut resistant gloves (As needed)
- At a Minimum Class II Reflective Vest (If there becomes a need for heavy equipment operations and traffic control operations)

Selective demolition, excavation, and removal activities will include the utilization of Level C PPE. In addition to the provision of Level D, Level C includes:

- Disposable suit
- Air purifying respirator equipped with High Efficient Particulate Air (HEPA) filters
- Nitrile or neoprene gloves under canvas gloves

10.0 SITE SAFETY AND HEALTH PLAN

This document establishes the responsibilities, requirements, and procedures for the protection of TolTest personnel and subcontractor personnel who are authorized to conduct fieldwork at RVAAP. This SSHP addresses requirements and procedures that have not already been covered in the APP.

The information in this SSHP is provided solely for the protection of the health and safety of TolTest employees and to establish minimum health and safety requirements for subcontractors working under the direct supervision and control of TolTest on this project. TolTest assumes no liability for, or responsibility to, any other parties for the accuracy or completeness of the information contained herein for any use or reliance upon this SSHP by any other party. Subcontractor personnel are not relieved of their responsibility to comply with all applicable federal, state, and local health and safety requirements.

TolTest subcontractors are to independently evaluate this SSHP to determine what additional health and safety safeguards may be necessary or appropriate to protect their employees and others within the context of their own scope of work. Activity Hazard Analyses (AHA) is required for all tasks performed and must be reviewed and accepted by the SSHA prior to beginning work. Any hazards associated with the equipment and procedures of subcontractor personnel must be brought to the attention of all field team members during the daily tailgate safety meetings.

This document has been designed to meet EM 385-1-1 requirements, Federal and State OSHA standards and U.S. Environmental Protection Agency (EPA) requirements. Working conditions may necessitate modification of this plan. Except in emergency situations, no deviations from this plan may be implemented without the prior notification and approval of the designated SSHA.

10.1 Modifying the Health and Safety Plan

This SSHP may be modified if it becomes evident to personnel associated with this work that the provisions specified are not feasible or adequate to protect the health and safety of site personnel, or if new activities are added to the program for which adequate health and safety procedures have not been identified. Modifications may also be made whenever there are changes in the identified health and safety personnel and whenever there are changes in the emergency procedures or contacts.

Modifications will be accomplished by consultation with the key health and safety personnel for the project, who in turn will recommend appropriate modifications after conferring with TolTest's Corporate Health and Safety Department. All changes to the SSHP will be documented. The SSHA will be responsible for ensuring that staff and subcontractors are informed of all changes to the SSHP.

10.2 Work Suspension Authority

As stated in the TolTest Safety and Health Policies and Procedures found in TolTest's Health and Safety Procedures Manual, all associates have the right and duty to suspend work when conditions are unsafe, notify the SSHO, and assist in correcting these conditions. Upon notification to the SSHO of an unsafe condition, the SSHO has the authority to order a suspension of work. Work will be suspended until such time that the danger has been removed. The SSHO will ensure that a record of the work suspension is noted in the project field book or daily log.

11.0 HAZARD ANALYSIS

During completion of this contract, various tasks will be performed that potentially pose chemical and/or physical hazards. The contaminants or hazardous materials may include, but are not limited to, free product, arsenic impacted soils and groundwater, and oily waste.

11.1 Chemical Hazards

MSDS's will be kept onsite for all chemicals that may pose a threat of danger or that may react to materials being stored or used onsite during the completion of this contract. The work site is at an air base, smoking is prohibited except in designated areas indicated by the base.

11.1.1 Chemical Exposures

Preventing exposure to toxic chemicals is a primary concern during any activity that may present an exposure potential to site personnel. This site is not anticipated to be of substantial concern with regard to chemical exposure. However, TolTest personnel will be made aware of the potential to encounter chemical substances during remedial activities.

11.2 Removal of Asbestos Containing Material

TolTest will post danger signs meeting the specifications of OSHA 29 CFR 1926.1101 at any location where airborne concentrations of asbestos may exceed ambient background levels. Signs will be posted at a distance sufficiently far enough away from the work area to permit associates to read the sign and take the necessary protective measures to avoid exposure. Additional signs may need to be posted following construction of the workplace enclosure barriers.

TolTest will post in the clean room area of the worker decontamination enclosure a list containing the names, addresses, and telephone numbers of TolTest Corporate Office, the Building Owner, the Project Manager, the air sampling professionals and testing laboratory, the local hospital and/or emergency squad, local fire department, and any architects or other professional consultant directly involved in the project.

Abatement on this project includes but is not limited to the following ACM:
Soil containing asbestos

TolTest will comply with all applicable Federal and State regulations. TolTest will provide OSHA required personal air sampling.

11.3 Physical Hazards

The principal steps, potential hazards, and recommended controls to be implemented during the completion of operations for each project are outlined in the AHA located in **Appendix B** at the end of this document. Potential physical hazards associated with projects performed under this contract may include:

- Hot Work
- Electrical Work
- Excessive Noise
- Inclement Weather
- Manual Lifting
- Environmental Protection
- Hand and Power Tools
- Ropes, Slings, and Chains
- Service and Utility Lines
- Vehicle Traffic
- Unseen Obstacles
- Slips, Trips, and Falls

To ensure a safe work place, the SSHO will conduct and document regular safety inspections. The SSHO will inform all site workers of any applicable physical hazards related to each work zone during the daily toolbox meetings.

11.2.1 Hot Work

All work being completed in conjunction with this project that may be flame or spark producing will first be inspected by the SSHO and the Camp Ravenna Base Operator for the issue of a flame/hot work permit. This work will be conducted in accordance with API Standard 653, API Standard 650, API Publication 2207, and USACE requirements.

11.2.2 Electrical Work

Before work is to begin, the SSHO must ascertain whether any part of an energized power circuit, exposed or concealed, is located such that the performance of the work may bring the person, tool or machine into physical or electrical contact with the energized power circuit. Proper warning signs must be posted and maintained. Barriers or other restrictive measures will be provided to ensure that workspace for electrical equipment will not be used as a passageway during periods when energized parts of the system are exposed. The workers will be informed of the locations of these lines, the hazards involved and the protective measures taken.

No associate will work on any part of electrical equipment or power lines unless properly trained and qualified to be able to perform the associated tasks. No associate will work in such proximity to any part of an energized power circuit that the associate could come in contact during the course of work unless they are protected by de-energizing the circuit or by guarding it effectively by insulation or other means. Lockout/Tagout procedures will be performed in accordance with USACE requirements. The following general safety precautions will be observed:

- Work areas, walkways and similar locations will be kept clear of cords.
- Extension cords will not be fastened with staples, hung from nails or suspended by wires.
- Worn or frayed electrical cables will not be used.
- When fuses are installed or removed with one or both terminals energized, special tools insulated for the voltage will be used.
- For installation work, no changes in circuit protection will be made to increase the load in excess of the load rating of the circuit wiring.

In work areas where the possible location of underground electric power is unknown, employees using hand tools that could contact such electrical sources must be provided with insulated protective gloves.

11.2.3 Excessive Noise

Hearing protection will be required when noise levels exceed the OSHA action level of 85 dba in accordance with OSHA 29 CFR 1926.52 and EM 385-1-1 requirements

11.2.4 Manual Lifting

All employees must use proper lifting techniques to avoid injury when lifting heavy objects. All manual lifting in excess of 51 pounds will be accomplished with the aid of lifting devices or the buddy system. During manual lifting tasks such as lifting sample coolers, personnel are to lift the objects with the force of the load suspended on their legs and not their backs. Personnel are to maintain a straight back and hold the object close to the body. Mechanical lifting devices or the help of a fellow field team member should be used when the object is too heavy for one person to lift.

11.2.5 Slips, Trips, and Falls

Slip, trip and fall hazards are expected to be a major hazard encountered during construction site activities. Common surface falls can be divided into the following four categories:

- Slip, trip and fall hazards occur when a worker encounters an unseen foreign object in his/her path. When a foot strikes the object, the employee trips and falls.
- Step and fall accidents occur when a worker's foot suddenly meets a sticky surface or a defect in the walking surface. Expecting to continue at the established pace, the worker falls when his or her foot is unable to respond properly.
- Step and fall accidents occur when the foot encounters an unexpected step down. This can also happen when an employee thinks he or she has reached the bottom of the stairs when, in reality, there is one more step.
- Slip and fall accidents occur when the worker's center of gravity is suddenly thrown out of balance.

TolTest will use the following strategies to help prevent slip, trip and fall hazards:

- Practice good housekeeping. All working areas will be kept as clean and dry as possible. Housekeeping will be consistently maintained in order to minimize tripping hazards caused by debris, job supplies, and equipment.
- Require nonskid footwear. All employees will be required to wear footwear with nonskid soles.
- Inspect surfaces on, at a minimum, a daily basis.
- TolTest personnel and subcontractors will be reminded to maintain sure footing on all surfaces and to use extra caution due to slippery/wet conditions.

Personnel working within six feet of the edge of unprotected edges, such as roofs, greater than six feet in height will be required to wear full body harnesses attached to a suitable anchor point capable of withstanding 5,000 pounds of force. Personnel working off of ladders will be required to work facing the ladder and maintain three points of contact at all times.

11.2.6 Environmental Protection

Measures will be taken to prevent hazardous substances from entering the ground, drainage areas, or the water. Environmental requirements for the prevention of any spill are contained in EPA Regulation Title 40 CFR 112, *Oil Pollution Prevention and Response; Non-Transportation-Related Onshore and Offshore Facilities*. For oil and hazardous substance spills that may be large enough to violate federal, state, or local regulations, the Project Manager will be notified immediately.

Field personnel will preserve the integrity of the natural resources of the project area. This includes insuring that the surrounding area is not environmentally damaged in any way and preventing the release of hazardous substances into the surrounding air, land, or water. Sorbent pads or absorbent materials will be available at all times to clean and wipe up any small spills.

11.2.7 Hand and Power Tools

All hand and power tools and similar equipment, whether furnished by TolTest or its subcontractors, should be maintained in a safe condition and should only be used for the purposes it was designed for. Employees should be trained in the proper use and handling of tools and equipment. Employees should be trained in the proper use and handling of tools and equipment. Using the right tool in a correct manner, together with proper maintenance and storage of the tools, is necessary to prevent personal injury and property damage.

11.2.8 Ropes, Slings, and Chains

Equipment used for lifting, securing, or handling materials will be inspected prior to use on each shift and as necessary during its use to ensure that it is safe. Defective equipment will be removed from service. Equipment should not be loaded in excess of its recommended safe working load. Additional inspections will be performed during sling use, where service conditions warrant. Chains will not be used for lifting loads.

11.2.9 Service and Utility Lines

Before starting digging work, underground service and utility lines are to be marked to prevent possible personnel injuries, property damage, and service outages. Care should be taken when operating equipment close to power lines, using an observer for operations where it is difficult for the operator to maintain the desired clearance by visual means.

11.2.10 Vehicle Traffic

Care should be taken by all associates to watch for vehicles moving in and around the construction work zone. All vehicles being used onsite should be checked to assure that they are

in a safe operating condition. Vehicles being used in areas with limited visibility while in use (i.e., backing up) should have an observer for help moving safely in the construction work zone.

11.2.11 Unseen Obstacles

General housekeeping should be conducted during the course of construction to avoid the possibility of leaving obstacles in the work area. During the course of construction, alteration, or repairs, form and scrap lumber with protruding nails, and all other debris, will be kept cleared from work areas, passageways, and stairs, in and around buildings or other structures.

Combustible scrap and debris will be removed at regular intervals during the course of construction. Safe means will be provided to facilitate such removal. Construction work areas will be kept cleared from debris. Containers will be provided for the collection and separation of waste, trash, oily and used rags, and other refuse. Garbage and other waste will be disposed of at frequent and regular intervals.

12.0 HAZARDOUS WASTE OPERATIONS

The efforts of multiple organizations usually are necessary for completing investigations and remedial objectives associated with hazardous waste site work. Each individual assigned to oversee or conduct fieldwork will be responsible for conducting his/her job in a safe and healthful manner. However, to facilitate the implementation of this health and safety program, it is necessary to assign key responsibilities to specific individuals.

12.1 General Information

All personnel who enter a hazardous waste site or construction site must recognize and understand the potential hazards to health and safety associated with clean up operations at the site. It is the intent of this health and safety program to provide every person engaged in onsite activities a level of health and safety training consistent with his or her job functions and responsibilities.

Employees working onsite exposed to hazardous substances, health hazards, or safety hazards, their supervisors, and management responsible for the site will, at the time of assignment to the field, meet the OSHA hazardous waste site workers training requirements as stated in 29 CFR 1910.120/29 CFR 1926.65 or applicable state standards. Workers are categorized as either:

- General site workers defined as equipment operators, general laborers, and supervisory personnel, engaged in hazardous substance removal or other activities, which expose or potentially expose workers to hazardous substances and health hazards.
- Occasional site workers, defined as workers onsite occasionally for a specific limited task, such as but not limited to, ground-water monitoring, land surveying, or geophysical surveying, and who are unlikely to be exposed over PELs and action limits.

In addition to the OSHA hazardous waste operations and emergency response regulations, there are other ancillary safety and health regulations governing certain training aspects of this project. When a State regulation exists for a standard presented above, the standards of the State regulation supersede the Federal equivalent. These include the training requirements specified in:

- Injury and Illness Prevention Program (8 CCR 1509 and 8 CCR 3203)
- Respiratory Protection (29 CFR 1910.134)
- Hearing Conservation (29 CFR 1910.95)
- Hazard Communication Standard (29 CFR 1910.1200)
- Bloodborne Pathogens (29 CFR 1910.1030)
- Confined Space Entry (29 CFR 1910.146)
- Excavation and Trenching (29 CFR 1926 Subpart P)

12.2 Site-Specific Training

Training will be provided for all employees, contractors, and subcontractors who plan to enter the EZ and CRZ at the site and who have met the requirements of 29 CFR 1910.120/29 CFR 1926.65. Training will be conducted prior to job start-up and as needed thereafter. The SSHO will conduct initial training prior to job start-up to ensure that employees have a thorough understanding of the SSHP, SOPs, and physical, safety, biological, radiological, and chemical hazards of the site. This training will be conducted as necessary when new employees enter the EZ and CRZ. Topics addressed in the initial health and safety training will include:

- Names of employees and others responsible for safety and health
- Employee rights and responsibilities under OSHA
- Acute and chronic effects of exposure to hazardous substances that may be present, the potential routes of exposure and symptoms of exposure for these substances, the PELs and IDLH values, and the level of personal exposure that can be anticipated
- Air monitoring procedures, including the functions, limitations, use, and maintenance of monitoring equipment
- Discussion of action levels for changing site PPE or evacuating the site
- Review of the SSHP
- Contractor AHA
- Standard operating procedures prepared specifically to address various aspects of this project
- Engineering controls, such as dust suppression techniques
- Heat and/or cold stress prevention, treatment, and monitoring
- Personal cleanliness and restrictions on eating, drinking, and smoking
- PPE
- Medical surveillance program
- Decontamination
- Emergencies and review of emergency procedures and facilities, including bloodborne pathogens and universal precautions
- Fire prevention measures
- Site control measures
- Spill containment program for chemical handling locations
- Proper use of heavy equipment and machinery
- Other physical hazards such as slip/trip/falls, noise, electrocution, being struck by something

The SSHO will maintain documentation that each site worker has successfully completed this training program. Each site worker must sign and date a Personal Acknowledgment Form.

12.2.1 Documentation of Training

Documentation of training requirements is the responsibility of each employer. Written documentation verifying compliance with the training requirements of this section must be submitted to the TolTest SSHO prior to entering the EZ and CRZ. Documentation of each worker's current training credentials will be kept in the field office and submitted to regulatory compliance personnel upon request.

APPENDIX A

OSHA 300A FORM

OSHA'S Form 300A
Log of Work-Related Injuries and Illnesses

Year 2008



U.S. Department of Labor
Occupational Safety and Health Administration
Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Under the Log, count the individual entries you make for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or the equivalent. See 29CFR 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0 (G)	3 (H)	5 (I)	2 (J)

Number of Days

Total number of days of job transfer or restriction	Total number of days away from work
191 (K)	99 (L)

Injury and Illness Types

Total number of (M)			
(1) Injuries	4	(4) Respiratory conditions	0
(2) Musculoskeletal disorders	6	(5) Poisonings	0
(3) Skin Disorders	0	(6) Hearing loss cases	0
		(7) All other injuries	0

Post this Summary Page from February 1 to April 30 of the year following the year covered by the form.

Public reporting burden for the collection of information is estimated to average 50 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send completed forms to this office.

Establishment Information

Your establishment name TolTest, Inc.

Street 1480 Ford St.

City Maumee State Ohio ZIP 43537

Industry description (e.g., Manufacturer of motor truck trailers)
Environmental, Construction and Engineering

Standard Industrial Classification (SIC), if known (e.g. SIC 3715)

1731 1751 1795 1799

Employment Information (If you don't have these figures, see the worksheet on the back of this page to estimate.)

Annual average number of employees 320

Total hours worked by all employees last 798,418.00

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

[Signature] President

Company Executive 419-794-3500 Title 01/15/09
Phone Date

APPENDIX B

ACTIVITY HAZARD ANALYSIS

ACTIVITY HAZARD ANALYSIS		Date Prepared	Date Revised	Revision No.
		December 22, 2009	11AUG10	2
Project	Analysis prepared by:	Reviewed by:	Recommended PPE:	
Implementation of Remedial Design for Ramsdell Quarry Landfill. Ravenna Army Ammunition Plant, Ravenna, Ohio	Sean Boyle December 22, 2009	Chris Warren, CHST July 1, 2010	Work clothing (as dictated by the weather)(No tank tops or muscle shirts) Safety toe shoes Safety glasses with side shields Hard hat Work gloves	
Activity	Hazard	Recommended Controls		RAC
1. Carrying and Placing Material	Tripping hazards from materials	1. Removal materials will be disposed throughout the removal process. 2. Material not immediately removed will be placed in temporary piles in a location that is not in the main walkway or any doorways. 3. Housekeeping shall be maintained throughout the day. 4. Any temporary piles will be removed at the end of each work day. 5. There will be staging areas on the roof for material.		L
	Injury to back while carrying material	1. Workers will ensure that they observe proper lifting techniques and will minimize movements such as over reaching, bending and twisting. 2. Workers should not lift more than 51 lbs. without help from a co-worker(s) or mechanical assistance. 3. Use a dolly or other mechanical method when practical.		L
2. Using Heavy Equipment	Elevated noise levels	1. When associates are subjected to sound exceeding 85 decibels, feasible administrative or engineering controls shall be utilized. Such as minimizing the amount of associates working in this area while machine is in operation. 2. If such controls fail to reduce sound levels to acceptable levels, personal protective equipment shall be provided and used to reduce sound levels. 3. All observers should be kept at a safe distance away from the work area. 4. Hearing protection will be used when while backhoe and skid steer are in use.		L

Activity	Hazard	Recommended Controls	RAC
	Particles and debris in the eyes	<ol style="list-style-type: none"> 1. Where ANSI approved safety glasses with side shields. 2. Goggles and/or face shield may be used for additional protection. 3. Eye wash solution will be available to aid in removing particles from eyes. 	L
2. Using Heavy Equipment (cont.)	Hands, body parts, or clothing caught in equipment during operation	<ol style="list-style-type: none"> 1. All moving parts will be safeguarded to prevent hands, arms, and any other part of a worker's body from making contact with dangerous moving parts. 2. The safeguard will ensure that no objects can fall into moving parts. 3. Safeguards will not create a hazard of its own such as a shear point, a jagged edge, or an unfinished surface which can cause a laceration. 4. Safeguards will not impede an associate from performing the task. 5. Equipment will be inspected before use to ensure manufacture installed safeguards are in place and working properly. 6. Loose clothing and jewelry should not be worn around this equipment. 	L
	Injury from being struck by heavy equipment	<ol style="list-style-type: none"> 1. Use flag person or other means to control traffic. 2. Provide high visibility outer garments for workers exposed to vehicle and heavy equipment traffic. 3. Erect barricades, stop logs, and/or warning signals where mobile equipment operators have obstructed view. 4. Workers that may need to work in this area to help removed broken up concrete shall not be in area while backhoe/skid steer is in operations. 5. Workers should not enter milling area until instructed to by the equipment operator and the equipment operator has showed both hands to demonstrate that the equipment is not in operation. 6. Only trained and qualified operators will run equipment. 	L

Activity	Hazard	Recommended Controls	RAC
3. Construction/selective demolition with the use of hand tools such as sledge hammers	Injuries from the use of sledge hammers (flying debris, broken sledge hammer, and sledge hammer slipping out of hands)	<ol style="list-style-type: none"> When using a sledgehammer, wear heavy-duty work gloves. Never use a hammer with a chipped head. Sledge hammers with chipped head should be replaced or repaired in accordance with manufacturer's recommendations. Sledge hammers with broken or cracked handles should not be used. Replace broken or cracked handles. Keep all bystanders and unauthorized personnel out of work area. PPE Requirements: <ul style="list-style-type: none"> Work clothing (as dictated by the weather)(No tank tops or muscle shirts) Safety toe boots Safety glasses with side shields Hard hat Work gloves (Should be heavy duty work gloves for this activity) 	L
	Back injuries from using shovel	<ol style="list-style-type: none"> Keep your feet well separated for good balance. Always keep your knees flexed. Use the proper type of shovel for the task: <ol style="list-style-type: none"> Short handle shovels are used for spreading or laying asphalt, dirt, etc. Hold this shovel with one hand close to the load for proper balance and to reduce stress on your back. Long handle, pointed shovels are used for digging. This shovel should also be held close to the load when carrying material. Load your shovel sparingly on your first load and gradually increase your next load size until you reach the capacity, which you can handle in a safe and efficient manner. Keep your arms and elbows close to your body while handling loads. Never twist your body when spreading or laying asphalt, dirt, materials, etc. Twisting will only increase the risk of an injury. Always turn your forward foot and body in the direction you will spread or lay the material. For digging, use the ball of your foot (not the arch) to press the shovel into dirt, asphalt, gravel, etc. If the instep/arch is used and the foot slips off the shovel, the sharp corner of the shovel may cut through your shoe and into your foot or leg. 	L

Activity	Hazard	Recommended Controls	RAC
3. Construction/selective demolition with the use of hand tools such as sledge hammers (cont.)	Particles and debris in the eyes	<ol style="list-style-type: none"> 1. Where ANSI approved safety glasses with side shields. 2. Goggles and/or face shield may be used for additional protection. 3. Eye wash solution will be available to aid in removing particles from eyes. 	L
	Injuries from the use of sledge hammers (flying debris, broken sledge hammer, and sledge hammer slipping out of hands)	<ol style="list-style-type: none"> 1. When using a sledgehammer, wear heavy-duty work gloves. 2. Never use a hammer with a chipped head. Sledge hammers with chipped head should be replaced or repaired in accordance with manufacturer's recommendations. 3. Sledge hammers with broken or cracked handles should not be used. Replace broken or cracked handles. 4. Keep all bystanders and unauthorized personnel out of work area. 5. PPE Requirements: <ul style="list-style-type: none"> • Work clothing (as dictated by the weather)(No tank tops or muscle shirts) • Safety toe boots • Safety glasses with side shields • Hard hat • Work gloves (Should be heavy duty work gloves for this activity) 	L
4. Excavation	Sides of excavation can cave in	<ol style="list-style-type: none"> 1. Assign a Competent Person to the Excavation Work. 2. Protect against falls into trenches where depths exceed 6 feet. 3. Erect barricades, stop logs, and/or warning signals where mobile equipment operators have obstructed view of the excavation edge. 4. Complete initial and daily Competent Person Inspections. 5. Determine soil type. Use protective support system (sloping, shoring, shielding) where Competent Person identifies cave-in potential. 6. Provide means of egress (ladder, ramp, stairway) for every 25 feet of travel where depths are 4 feet or greater. 7. Conduct pre-job walk down with excavation crew. 8. Implement dust control measures as necessary. 9. Protect workers from loose and falling rock along the excavation face. 10. Shore or brace adjoining structures to prevent shifting/collapse. 11. Regularly inspect trenches for conditions. 	L

Activity	Hazard	Recommended Controls	RAC
4. Excavation (cont.)	Excavation filled with groundwater	<ol style="list-style-type: none"> 1. Assign a Competent Person to the Excavation Work. 2. Remove standing water from excavations or provide adequate protection prior to allowing workers to enter the excavation. 3. Provide adequate shoring or sloping of sides of the excavation. 4. Regularly inspect trenches for conditions. 	L
	Falls in or around the excavation	<ol style="list-style-type: none"> 1. Assign a Competent Person to the Excavation Work. 2. Protect against fall into trench where depths exceed 6 feet. 3. Ensure that all personnel entering the excavation or working within 6 feet of the excavation have received excavation safety training. 4. Regularly inspect trenches for conditions. 	L
	Contact with existing utilities	<ol style="list-style-type: none"> 1. Assign a Competent Person to the Excavation Work. 2. Identify the location of any subsurface obstructions. 3. Protect/support exposed subsurface installations. 4. Excavate by hand within 2 feet of underground installations. 5. Use nonconductive tools within 2 feet of energized direct buried cable. 	L
	Injuries due to improper Mechanical Material Handling	<ol style="list-style-type: none"> 1. The operator shall not cause the hoist to lift, lower, or travel while anyone is on the load or hook. 2. The operator will avoid carrying loads over people. 3. On a rope hoist, the load shall not be lowered below the point where two wraps of rope remain on each anchorage of the hoisting drum, unless a lower limit device is provided, in which case no less than one wrap may remain on each anchorage of the hoist. 4. Bolts, nuts, and rivets shall be checked to ensure that they are not loose. 	L

Activity	Hazard	Recommended Controls	RAC
4. Excavation (cont.)	Injury to personnel on the ground	<ol style="list-style-type: none"> 1. Competent person will inspect heavy equipment before each use. 2. Any deficiencies shall be repaired, or defective parts replaced, before continued use. 3. Heavy equipment operators and personnel working with this equipment need to be knowledgeable of basic equipment capacities, limitations, and specific job site restrictions, such as location of overhead electric power lines, unstable soil, or high wind conditions. 4. Personnel working around heavy equipment operations also need to be aware of hoisting activities or any job restrictions imposed by this equipment operation, and ensure job site coordination of equipment. 5. Check that all exposed moving parts are guarded. 6. Visually inspect the crane for fluid leaks, both air and hydraulic. 7. Check the turntable connections for weld cracks and loose or missing bolts. 8. Inspect and test all brakes and clutches for proper adjustment and operation. 	L
	Traffic concerns involving heavy equipment	<ol style="list-style-type: none"> 1. Use flag person or other means to control traffic. 2. Provide high visibility outer garments for workers exposed to vehicle traffic. 3. Erect barricades, stop logs, and/or warning signals where mobile equipment operators have obstructed view of the excavation edge. 	L
5. Working near Explosives (Explosive Safety)	Explosives detonated by signals transmitted in the area	<ol style="list-style-type: none"> 1. No cell phones, short-wave radios, single side-ban radios, other communications, or navigation devices will be used within 60 ft of areas known to house explosives. 2. A barrier will be put in place 60 ft from known UXO to ensure that cell phones, short-wave radios, single side-ban radios, other communications, or navigation devices are only used at safe and approved distances. 	M
	Explosives detonated by fire in the area	<ol style="list-style-type: none"> 1. No smoking within 60 ft of known UXO. 2. Smoking will only be permitted in smoke designated areas on RVAAP. 3. No hot work will be conducted within 60 ft of known UXO. 4. Hot work permits will be obtained prior to the start of any work that has the potential of creating a spark or generating heat (welding, cutting, heat operations). 	M

Activity	Hazard	Recommended Controls	RAC
5. Working near Explosives (Explosive Safety) (cont.)	Detonation of explosives encountered during construction	<ol style="list-style-type: none"> 1. All explosives encountered on jobsites will be treated as extremely dangerous. 2. All workers that encounter explosives on the jobsite will follow the 3Rs: RECOGNIZE, RETREAT, and REPORT. <ul style="list-style-type: none"> • RECOGNIZE: Do not touch, disturb or move the item (explosives can become very unstable over time). They can detonate with movement or sometimes due to ground vibration. Explosives come in all shapes, sizes, and color but exposure to weather and time can alter or remove these markings. • RETREAT: Mark the general location of the explosive hazard with tape, colored cloth, or colored ribbon. If available, attach the marker to a branch, structure or other existing object so that it is about 3 ft (.9 m) off the ground and visible from all approaches. Place the marker no closer than the point where you first recognized the explosive hazard and do not drive stakes into the ground or otherwise disturb the surface. • Leave by the same route you entered if possible. Clear site of all workers and secure from unauthorized entry. • REPORT: Once area has been evacuated, notification will be made immediately. Provide as much information as possible, including location, approximate size, shape, color and any other distinguishing features such as nomenclature or writing, fins, etc., 	M

Activity	Hazard	Recommended Controls	RAC
6. Asbestos Abatement Activities	Occupational exposure to asbestos	<ol style="list-style-type: none"> 1. Personnel must utilize air purifying respirators (APRs) equipped with HEPA filters (P100). Personnel must have medical clearance, fit test, and respirator training. Keep respirators clean and properly stored. Inspect respirators prior to each use. Personnel must be clean shaven as appropriate. When using APR P100 filters – filters must be changed every shift or when breathing becomes obstructed as necessary. Other PPE will include ANSI rated hardhats, steel toed boots, safety glasses, nitrile gloves, and disposable suits. 2. Personnel are required to follow decontamination procedures detailed in the asbestos abatement plan when exiting the asbestos regulated area. Decontamination will take place in an established 3 chamber decontamination system or a designated decontamination station. Disposable PPE will be discarded into the appropriate waste container. 3. Exposure air monitoring in the form of personal and excursion samples will be performed in accordance with NIOSH 7400 to ensure the PEL of 0.1 f/cc and the short-term exposure limit (STEL) of 1.0 f/cc is not being exceeded. 4. All site workers will be required to have completed an Asbestos Awareness Training Course per 29 CFR 1910.1001(j)(7)(iv) prior to entering potential ACM work zones. Actual handling or packaging of ACM wastes may only be performed by Ohio Department of Health Licensed Asbestos Hazard Abatement Workers per Ohio Administrative Code 3701-34. 	L

Activity	Hazard	Recommended Controls	RAC
	Environmental release of asbestos	<ol style="list-style-type: none"> 1. Avoid creating dust. Wet ACM with surfactant amended water. Keep waste wet. Do not grind, sand, or abrade ACM. Do not use compressed air to remove asbestos. Use HEPA filtered vacuums to aid in decontamination and cleanup activities. 2. Establish a regulated abatement area by posting asbestos danger signs. Drop cloths and HEPA filter vacuums are to be utilized to maintain and clean work area as detailed in the asbestos abatement plan. Exercise prescribed decontamination procedures when exiting the work area. 3. Verify area and final air clearance PCM air monitoring data to ensure less than 0.01 f/cc has been achieved. Conduct a final visual inspection of the work area to ensure that ACM has been properly removed. <p>Collect waste into 6 mil poly asbestos disposal bags. Double bag and seal waste bags. Store bags in an enclosed, locked, and demarcated waste container until transportation to an EPA Type II Landfill.</p>	L
Asbestos Abatement Activities (Con't)	Respirators	<ol style="list-style-type: none"> 1. Personnel must have medical clearance, fit test, and training. 2. Keep respirators clean and properly stored. Inspect respirators prior to each use. 3. Personnel must be clean shaven as appropriate. 4. When using APR P100 filters – filters must be changed every shift or when breathing becomes obstructed. 	L
	Air Monitoring	<ol style="list-style-type: none"> 1. Collect personal, excursion, area, and clearance samples in accordance with NIOSH 7400. 2. The PEL for asbestos is 0.1 f/cc. The STEL is 1.0 f/cc. The clearance standard is 0.01 f/cc. 	L

Activity	Hazard	Recommended Controls	RAC
	Asbestos Removal	<ol style="list-style-type: none"> 1. Avoid creating dust. Do not sand or grind asbestos containing materials. Wet asbestos containing materials with surfactant amended water. 2. Don appropriate Level C PPE to include APR respirators, disposable suits, nitrile gloves under canvas gloves, hard hat, steel toe work shoe, safety glasses (or full face respirator). 3. Regulate area by using red danger tape and asbestos danger signs to inform associates of work zones. 4. Refer to the Asbestos Abatement Plan for detailed removal procedures. 5. Personnel must be trained in accordance with TSCA Title II. Personnel must possess a valid KY license as an Asbestos Supervisor or Worker. 6. Follow decontamination procedures. 7. Use HEPA filtered vacuums frequently to clean up work area and assist in decontamination. 	L
	Personal Decontamination	<ol style="list-style-type: none"> 1. Use a HEPA filtered vacuum to remove gross contamination from body and PPE. 2. Place disposable PPE into an asbestos disposal bag. Respirators will be cleaned and stored properly. 	L
	Waste Handling	<ol style="list-style-type: none"> 1. Wet waste with surfactant amended water. 2. Collect waste into asbestos disposal bags or double wrap in 2 layers of 6 mil poly. 3. Each disposal bag or wrapped package must be marked with an asbestos danger label, DOT label, and generator information. <p>Friable waste must be stored in an enclosed, locked, and demarcated waste container.</p>	L

Equipment to be Used	Inspection Requirements	Training Requirements
Personal Protective Equipment	Check for wear and tear before and during use	Proof of Construction PPE Training
Misc. Hand tools including Shovels, Sledge Hammer, and Power Tools	Check tools according to manufacturer's guidelines Hand tools should be check for nicks, chips. Power tools should be checked to ensure that all guards are in place.	Proof of training to operate tools/equipment
Fire Extinguisher	Check to see if charged Check to see if pin has been removed Check hose	Proof of Fire Extinguisher Training
Manual Material Handling		Proof of Back Safety Training and Proper Lifting Techniques Training
Heavy Equipment to include Backhoe, Excavator, Trencher, and forklift	Inspect before use. Inspection checklist will be completed daily and attached to production report	Proof of Excavation Training, Must be familiar with the operation of equipment, Must have knowledge of manufacture's safety guidelines

Competent/Qualified Person(s)	Risk Assessment Code (RAC): L					
Excavation – Darrin John	Overall Risk Assessment Code (RAC) (Use highest code)					
Excavation – Mike Hovis	Risk Assessment Code (RAC) Matrix					
	Severity	Probability				
		Frequent	Likely	Occasional	Seldom	Unlikely
	Catastrophic	E	E	H	H	M
	Critical	E	H	H	M	L
	Marginal	H	M	M	L	L
	Negligible	M	L	L	L	L
	Step 1: Review each “Hazard” with identified safety “Controls” and determine RAC (See above)					
	“Probability” is the likelihood to cause an incident, near miss, or accident and identified as: Frequent, Likely, Occasional, Seldom or Unlikely.				RAC Chart	
	“Severity” is the outcome/degree if an incident, near miss, or accident did occur and identified as: Catastrophic, Critical, Marginal, or Negligible				E = Extremely High Risk	
					H = High Risk	
					M = Moderate Risk	
					L = Low Risk	
	Step 2: Identify the RAC (Probability/Severity) as E, H, M, or L for each “Hazard” on AHA. Annotate the overall highest RAC at the top of AHA.					

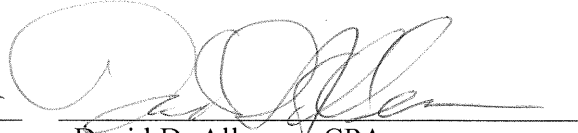
APPENDIX C

TOLTEST CORPORATE INCIDENT PREVENTION PLAN

Approved By:



Richard L. Barcum, CIH, CSP, CHMM
Corporate Safety Director



David D. Alleman, CPA
President

Procedure

INCIDENT PREVENTION PROGRAM: HEALTH AND SAFETY PROGRAM OVERVIEW

1.0 PURPOSE AND OBJECTIVE

TolTest will develop and administer an overall health and safety program. This policy and procedures manual will serve to be the vehicle through which this program is implemented. Additionally, this manual will establish a measure against which the program may be audited.

This procedure describes the TolTest health and safety program and the responsibilities of the supervisors, associates, and subcontractors. This written safety and health program will address applicable United State Safety and Health Administration (OSHA) standards set forth in 29 CFR 1910 and 29 CFR 1926 as well as various consensus standards and TolTest policies.

2.0 SAFETY ORGANIZATION

The safety program for TolTest is administered by the Corporate Safety Director reporting directly to the Chief Executive Officer.

Both the Corporate Health and Safety Department and each individual office and project location are responsible for auditing safety procedures and protocols. The office General Manager/Operating Unit Manager is responsible for administration and enforcement of the safety procedures and protocols at office locations. Project Managers and Site Supervisors are responsible for administration and enforcement of the safety procedures and protocols at project locations. The Corporate Health and Safety Department is responsible for supporting and assisting the General Manager/Operating Unit Managers, Project Managers, and Site Supervisors in the execution of the health and safety program.

3.0 SAFETY RESPONSIBILITY

At TolTest, the safety and protection of associates, clients, and the community is a core value. This concern for safety is not restricted to field operations but extends to

the offices and shop facilities. If an activity or condition is unsafe, the task will not proceed until the situation is corrected.

The President and Vice Presidents are the primary operational safety officials in the company. The responsibility for safety is delegated and shared by General/Operation Unit Managers, Project Managers, Site Supervisors and the associates. Health and Safety Department personnel are responsible to ensure that the primary safety officials are implementing this health and safety program.

Every associate, regardless of job title, shares the responsibility for safety and should report any unsafe condition without fear of reprisal. Both favorable and unfavorable safety reports and audits will be entered into an associate's personnel file. This will be reviewed and weighed during salary and promotion evaluations.

4.0 ASSOCIATE INVOLVEMENT IN HEALTH AND SAFETY PROGRAM

TolTest encourages and, in fact, requires each and every associate to be an active participant in the development, maintenance and enhancement of the Health and Safety Program. This includes but is not limited to the following:

- Attend and actively participate in all training programs
- Attend and actively participate in tailgate safety meetings
- Review programs and procedures and recommend improvements
- Review the health and safety aspects of the job prior to assignment and make recommendations for improvements
- Question those areas in which they do not have a full and complete understanding of the health and safety controls
- Work efficiently within the health and safety controls prescribed
- Remind others to work efficiently within the health and safety controls prescribed
- Notify supervision of unsafe conditions without fear of reprisal.
- Notify the Health and Safety Department or a member of senior management if a supervisor fails to adequately address an identified unsafe condition

5.0 PRIMARY HEALTH AND SAFETY PROGRAM FUNCTIONS

The primary functions of the health and safety program are:

- Defining the health and safety responsibilities of TolTest personnel
- Administration of the medical surveillance program
- Preparation of site safety plans
- Providing safety training/maintaining training records
- Providing safety procedures and protocols to be used at project sites, shops, and offices
- Conducting accident investigations and maintaining records
- Verifying OSHA compliance under 29 CFR 1910 and 1926
- Providing guidance and assistance with preparation of safety protocols for specific tasks
- Promoting health and safety consciousness within the company
- Designating the functional organization of safety committees to serve corporate and operating unit health and safety program needs.

6.0 MULTI-EMPLOYER WORKSITES

TolTest performs project work as either a prime contractor or a subcontractor, therefore TolTest projects fall under the auspices of OSHA's Multi-Employer Workplace Directive. This policy states: "On multi-employer worksites (in all industry sectors), more than one employer may be citable for a hazardous condition that violates an OSHA Standard" and categorizes employers into four primary groups--Controlling, Creating, Exposing, and Correcting--and outlines the safety responsibilities of these employer types. In order to comply with this directive, as a Prime (Controlling) Contractor, TolTest will:

- Create a site-specific safety program
- Enforce the safety policy for the project site
- Provide general supervision of project activity and safety

- Exercise authority to correct safety hazards
- Exercise authority to require other specialty employers to correct safety hazards
- Conduct and document frequent and regular inspections of subcontractor site-specific work
- Conduct and document frequent and regular safety meetings with subcontractors
- Require each subcontractor to implement their own safety and health program. Note: In the event that there is a contradiction between TolTest a subcontractor regarding health and safety policy, the subcontractor will be required to follow the more stringent and conservative requirement.
- Require each subcontractor to designate a health and safety representative for the project
- Require each subcontractor to share information about hazards, control, safety and health rules, and emergency procedures at the worksite with TolTest and other subcontractors
- Document that all of the above requirements are being performed as required

In order to comply with this directive, as a subcontractor (creating, exposing, or correcting employer) TolTest will:

- Create a site-specific safety program for TolTest work
- Enforce the safety policy for the project site as it pertains to TolTest associates
- Provide supervision of TolTest project activity and safety
- Exercise authority to correct safety hazards as they pertain to TolTest's scope of work
- Conduct frequent and regular inspections and safety meetings on a consistent and regular basis to protect their employees from safety hazards on the project site
- Provide an effective system to enforce the prompt correction of hazards, both recognized and foreseeable
- Inform the controlling contractor/employer of the hazard and take the appropriate steps to keep all associates away from the hazardous condition until it is fixed

- Designate a project health and safety representative
- Share information about hazards, control, safety and health rules, and emergency procedures at the worksite with the Prime Contractor and other subcontractors
- Document that all of the above requirements are being performed as required

7.0 REGULATORY COMPLIANCE POLICY

The policy of TolTest is to comply with all federal, state, local, and client regulations. It is the responsibility of all personnel to perform all work in full compliance with appropriate regulations. Safety and health personnel will immediately bring any condition regarding health and safety compliance to the attention of supervisory operating personnel.

TolTest will ensure regulatory compliance by all of its subcontractors, including OSHA 300 forms, safety records, OSHA training and medical surveillance.

8.0 SAFETY GOALS

The goal of the health and safety program is to ensure a safe working environment, protect workers from harm, and protect the company from liability associated with an unsafe working environment.

Other goals are to eliminate workplace incidents, gain associate acceptance through cooperation and training, and provide our clients with a responsible, well-trained, safety oriented work force.

9.0 SAFETY TRAINING

TolTest will ensure that personnel have sufficient training to execute their jobs in a safe and healthy manner. If associates lack the required training, TolTest will provide it.

The supervisor is responsible to determine the training requirements of a task and ensure associates have the necessary training to complete the task safely. Health and safety personnel will assist with this determination and training.

The Corporate Health and Safety Department is responsible to audit compliance with training requirements and communicate this information to the General/Operating Unit Managers.

Training records and documentation will be maintained by the Corporate Health and Safety Department. Office locations may elect to maintain copies of training records but Corporate Health and Safety will be the central repository of all training records.

10.0 MEDICAL SURVEILLANCE

All associates are subject to the TolTest medical surveillance program. This program conforms to federal OSHA requirements and is titled HS100: Medical Policies and Procedures.

11.0 INCIDENT INVESTIGATION

All incidents will be thoroughly investigated by the supervisor of the associate(s) involved in the incident. Instructions for completing the investigation are contained in IPP200: Reporting, Investigation, Review.

Serious incidents, such as those involving hospitalization or injuries requiring more than one visit to a physician, may be investigated by the Corporate Health and Safety Department.

12.0 FIRST AID

Each facility and work location must be evaluated to determine the potential requirement for medical emergencies. At a minimum, a first-aid kit will be provided. An adequate number of associates with current certification in first aid and cardiopulmonary resuscitation (CPR) will be maintained on project sites.

The Project Manager or designee shall ensure that emergency medical attention is readily available. If site conditions require, a subcontract emergency medical technician (EMT) and/or ambulance will be provided on site.

On every TolTest project or office location, the Project Manager, General Manager or designee is required to develop, document and communicate a site specific Emergency Response Plan. At a minimum, this plan will include a map of the project site depicting facility/project evacuation routes, evacuation procedures, evacuation staging areas, a map to the nearest emergency medical facility, and the appropriate means to summon emergency medical services. The Emergency Response Plan will be communicated to each TolTest associate prior to beginning work on the project and addressed periodically during scheduled safety meetings. The plan will be provided to each TolTest subcontractor. TolTest subcontractors will be required to provide documentation that they communicated the plan to their employees prior to each employee starting work on the project site. The plan will be provided to each non-TolTest subcontractor working on the same project site as TolTest. The

communication of the plan to non-TolTest subcontractors will be documented in the project daily logs.

13.0 POSITION STATEMENT ON MODIFIED WORK

TolTest will attempt to eliminate all incidents through strict compliance with OSHA regulations and TolTest health and safety procedures, as well as supervisor and associate safety training, safety audits, and constant attention to safety. Should an associate be injured or become ill in the course of and arising from his/her employment, TolTest will attempt to provide modified work. Modified work (light duty) will be made available in order to bring the injured associate back to the work environment, for the benefit of the associate and the company, whenever medically appropriate.

Associates are expected to return to modified work when medically capable. The work assigned to the injured associate will meet the restrictions set forth by the treating and/or company physician. Examples of modified work include, but are not limited to office work and light shop work.

14.0 FIELD SAFETY INSPECTIONS

Periodic safety inspections will be made of the work area. The inspection will be conducted according to the parameters outlined in IPP202: Health and Safety Inspections. Discrepancies found during inspections will be corrected as soon as practicable. Serious safety violations will be corrected immediately.

Additionally, the Corporate Health and Safety Department may make periodic unannounced inspections of work sites at their own discretion or at the request of an associate, supervisor, or manager.

15.0 REVIEW OF HEALTH AND SAFETY STATISTICS

Group/Unit Managers are required to review incident statistics on the following schedule. These statistics will be furnished by the Corporate Health and Safety Department.

Quarterly

Incident Rates by Division
Summary of all incident for the following quarter

Annually

OSHA 300 Form Summary (post February 1 through April 30)
Incident Rates by Division
Summary of all incident for the following year

16.0 SPECIFIC WRITTEN SAFETY PROCEDURES

Certain safety procedures, for example, confined space entry, have been established which require specific permits to be prepared prior to work in order to ensure that operations or tasks are conducted safely and in full compliance with OSHA and other applicable regulations.

All TolTest personnel who may be required to use these procedures will receive training and will be held accountable to comply with the permit requirements.

17.0 STATE OSHA AND OTHER REGULATIONS

Where state, local, or client regulations differ from federal regulation cited in this manual, the more stringent regulation will apply. If necessary, the Manager, Corporate Health and Safety will modify this manual with a state specific procedure by attaching an amendment to this manual.

A list of states with their own OSHA regulations is included in Attachment 2.

18.0 CHANGES

Any user of this manual is welcome to recommend changes. Any associate may recommend changes to this manual. Changes normally result from finding errors, regulatory changes, new regulations, equipment modification, new equipment purchases, and changes to operational procedures. The format for making a recommended change is:

- 18.1 Submit a written recommendation to the Corporate Health and Safety Department via your immediate supervisor.
- 18.2 The Corporate Health and Safety Department will review the recommendation. Recommendations warranting inclusion in this manual will be forwarded to the Manager, Corporate Health and Safety.
- 18.3 After review, the Manager, Corporate Health and Safety will determine if the suggestion(s) should be included as an amendment or new procedure in this manual.

18.4 Changes to this manual will be distributed immediately upon approval. Periodically, this manual will be republished.

19.0 EXCEPTION PROVISIONS

Variances to this procedure shall be requested in accordance with established variance procedures.

20.0 ATTACHMENTS

1. Regional OSHA Offices
2. State-Plan States

ATTACHMENT 1

REGIONAL OSHA OFFICES

Federal OSHA

REGION 1

(CT*, MA, ME, NH, RI, VT*)

Regional
JFK Federal Building, Room
Boston, Massachusetts
(617)
(617) 565-9827 FAX

Office
E340
02203
565-9860

REGION 2

(NJ, NY*, PR*, VI*)

Regional
201 Varick Street, Room
New York, New York
(212)
(212) 337-2371 FAX

Office
670
10014
337-2378

REGION 3

(DC, DE, MD*, PA, VA*, WV)

Regional Office
U.S. Department of Labor/OSHA
The Curtis Center-Suite 740 West
170 S. Independence Mall West
Philadelphia, PA 19106-3309
TELE: (215) 861-4900
FAX: (215) 861-4904

REGION 4

(AL, FL, GA, KY*, MS, NC*, SC*, TN*)

Regional
61 Forsyth Street, SW
Atlanta, Georgia 30303
(404)
(404) 562-2295 FAX

Office
SW
30303
562-2300

REGION 5

(IL, IN*, MI*, MN*, OH, WI)

Regional
230 South Dearborn Street, Room
Chicago, Illinois 60604
(312)
(312) 353-7774 FAX

Office
3244
60604
353-2220

REGION 6

(AR, LA, NM*, OK, TX)

Regional Office
525 Griffin Street, Room
Dallas, Texas 75202
(214)
(214) 767-4137 FAX

Office
602
75202
767-4731

Region 7

(IA*, KS, MO, NE)

Regional Office
City Center Square
1100 Main Street, Suite 800
Kansas City, MO 64105
(816) 426-5861

Region 8

(CO, MT, ND, SD, UT*, WY*)

Regional Office
1999 Broadway, Suite 1690
Denver, CO 80202
303-844-1600)

Region 9

(American Samoa, AZ*, CA*, Guam, HI*, NV, Trust Territories of the Pacific)

Regional Office

71 Stevenson Street

Room 420

San Francisco, CA 94105

415-975-4310

REGION 10

(AK*, ID, OR*, WA*)

Regional

1111 Third Avenue,

Seattle, Washington

(206)

(206) 553-6499 FAX

Office

Suite 715

98101-3212

553-5930

* These states and territories operate their own OSHA-approved job safety and health programs (Connecticut and New York plans cover public employees only). States with approved programs must have a standard that is identical to, or at least as effective, as the federal standard.

ATTACHMENT 2 STATE PLAN STATES

Alaska Department of Labor and Workforce Development
P.O. Box 21149
1111 W. 8th Street, Room 306
Juneau, Alaska 99802-1149
Ed Flanagan, Commissioner (907) 465-2700
Fax: (907) 465-2784
Richard Mastriano, Program Director (907) 269-4904
Fax: (907) 269-4915

Industrial Commission of Arizona
800 W. Washington
Phoenix, Arizona 85007-2922
Larry Etchechury, Director, ICA(602) 542-4411
Fax: (602) 542-1614
Darin Perkins, Program Director (602) 542-5795
Fax: (602) 542-1614

California Department of Industrial Relations
455 Golden Gate Avenue - 10th Floor
San Francisco, California 94102
Steve Smith, Director (415) 703-5050
Fax:(415) 703-5114
Dr. John Howard, Chief (415) 703-5100
Fax: (415) 703-5114
Vernita Davidson, Manager, Cal/OSHA Program Office (415) 703-5177 Fax: (415) 703-5114

Hawaii Department of Labor and Industrial Relations
830 Punchbowl Street
Honolulu, Hawaii 96813
Leonard Agor, Director (808) 586-8844 Fax: (808) 586-9099
Jennifer Shishido, Administrator (808) 586-9116
Fax: (808) 586-9104

Connecticut Department of Labor
200 Folly Brook Boulevard
Wethersfield, Connecticut 06109
Shaun Cashman, Commissioner (860) 566-5123
Fax: (860) 566-1520

Conn-OSHA (Connecticut)
38 Wolcott Hill Road
Wethersfield, Connecticut 06109
Donald Heckler, Director (860) 566-4550 Fax: (860) 566-6916

Indiana Department of Labor
State Office Building
402 West Washington Street, Room W195
Indianapolis, Indiana 46204-2751
John Griffin, Commissioner (317) 232-2378
Fax: (317) 233-3790
John Jones, Deputy Commissioner (317) 232-3325
Fax: (317) 233-3790

Iowa Division of Labor
1000 E. Grand Avenue
Des Moines, Iowa 50319-0209
Byron K. Orton, Commissioner (515) 281-6432
Fax: (515) 281-4698
Mary L. Bryant, Administrator (515) 281-3469
Fax: (515) 281-7995

Kentucky Labor Cabinet
1047 U.S. Highway 127 South, Suite 4
Frankfort, Kentucky 40601
Joe Norsworthy, Secretary (502) 564-3070
Fax: (502) 564-5387
William Ralston, Federal/State Coordinator
(502) 564-3070 ext.240 Fax: (502) 564-1682

Maryland Division of Labor and Industry
Department of Labor, Licensing and Regulation
1100 North Eutaw Street, Room 613
Baltimore, Maryland 21201-2206
Kenneth P. Reichard, Commissioner (410) 767-2999
Fax: (410) 767-2300
Ileana O'Brien, Deputy Commissioner (410) 767-2992
Fax: 767-2003
Keith Goddard, Assistant Commissioner, MOSH
(410) 767-2215 Fax: 767-2003

Michigan Department of Consumer and Industry
Services - Bureau of Safety and Regulation
P.O. Box 30643
Lansing, MI 48909-8143
Douglas R. Earle, Director
(517) 322-1814 Fax: (517)322-1775

Minnesota Department of Labor and Industry
443 Lafayette Road
St. Paul, Minnesota 55155
Gretchen B. Maglich, Commissioner (651) 296-2342
Fax: (651) 282-5405
Roslyn Wade, Assistant Commissioner
(651) 296-6529 Fax: (651) 282-5293
Patricia Todd, Administrative Director, OSHA
Management Team
(651) 282-5772 Fax: (651) 297-2527

Nevada Division of Industrial Relations
400 West King Street, Suite 400
Carson City, Nevada 89703
Roger Bremmer, Administrator (775) 687-3032
Fax: (775) 687-6305

Nevada Occupational Safety and Health Enforcement
Section (OSHES)
1301 N. Green Valley Parkway
Henderson, Nevada 89014
Tom Czehowski, Chief Administrative Officer
(702) 486-9168 Fax: (702) 990-0358
[Las Vegas (702) 687-5240]

New Jersey Department of Labor
John Fitch Plaza - Labor Building
Market and Warren Streets
P.O. Box 110
Trenton, New Jersey 08625-0110
Mark B. Boyd, Commissioner (609) 292-2975
Fax: (609) 633-9271
Leonard Katz, Assistant Commissioner
(609) 292-2313 Fax: (609) 1314
Louis J. Lento, Program Director, PEOSH
(609) 292-3923 Fax: (609) 292-4409

New Mexico Environment Department
1190 St. Francis Drive
P.O. Box 26110
Santa Fe, New Mexico 87502
Peter Maggiore, Secretary (505) 827-2850 Fax: (505)
827-2836
Sam A. Rogers, Chief (505) 827-4230 Fax: (505) 827-
4422

New York Department of Labor
W. Averell Harriman State Office Building - 12,
Room 500
Albany, NY 12240
Linda Angello, Commissioner (518) 457-2746
Fax: (518) 457-6908
Richard Cucolo, Director, Division of Safety and
Health
(518) 457-3518 Fax: (518) 457-1519

North Carolina Department of Labor
4 West Edenton Street
Raleigh, North Carolina 27601-1092
Cherie Berry, Commissioner (919) 807-2900
Fax: (919) 807-2855
John Johnson, Deputy Commissioner, OSH Director
(919) 807-2861 Fax: (919) 807-2855
Kevin Beauregard, OSH Assistant Director
(919) 807-2863 Fax: (919) 807-2856

Oregon Occupational Safety and Health Division
Department of Consumer & Business Services
350 Winter Street, NE, Room 430
Salem, Oregon 97310-0220
Peter DeLuca, Administrator (503) 378-3272
Fax: (503) 947-7461
David Sparks, Deputy Administrator for Policy
(503) 378-3272 Fax: (503) 947-7461
Michele Patterson, Deputy Administrator for
Operations (503) 378-3272 Fax: (503) 947-7461

Puerto Rico Department of Labor and Human
Resources
Prudencio Rivera Martínez Building
505 Muñoz Rivera Avenue
Hato Rey, Puerto Rico 00918
Víctor Rivera Hernández, Secretary
(787) 754-2119 Fax: (787) 753-9550
Brenda Sepúlveda, Assistant Secretary for
Occupational Safety and Health
(787) 756-1100, 1106 / 754-2171 Fax: (787) 767-6051
José Droz, Deputy Director for Occupational Safety
and Health
(787) 756-1100, 1106 / 754-2188 Fax: (787) 767-6051

South Carolina Department of Labor, Licensing, and
Regulation
Koger Office Park, Kingstree Building
110 Centerview Drive
PO Box 11329
Columbia, South Carolina 29211
Rita McKinney, Director (803) 896-4300
Fax: (803) 896-4393
William Lybrand, Program Director (803) 734-9644
Fax: (803) 734-9772

Tennessee Department of Labor
710 James Robertson Parkway
Nashville, Tennessee 37243-0659
Michael E. Magill, Commissioner (615) 741-2582
Fax: (615) 741-5078
John Winkler, Acting Program Director
(615) 741-2793 Fax: (615) 741-3325

Utah Labor Commission
160 East 300 South, 3rd Floor
PO Box 146650
Salt Lake City, Utah 84114-6650
R. Lee Ellertson, Commissioner (801) 530-6901
Fax: (801) 530-7906
Jay W. Bagley, Administrator (801) 530-6898
Fax: (801) 530-6390

Vermont Department of Labor and Industry
National Life Building - Drawer 20
Montpelier, Vermont 05620-3401
Tasha Wallis, Commissioner (802) 828-2288
Fax: (802) 828-2748
Robert McLeod, Project Manager (802) 828-2765
Fax: (802) 828-2195

Virgin Islands Department of Labor
2203 Church Street
Christiansted, St. Croix, Virgin Islands 00820-4660
Cecil R. Benjamin, Acting Commissioner
(340) 773-1990 Fax: (340) 773-1858
Marcelle Heywood, Program Director (340) 772-1315
Fax: (340) 772-4323

Virginia Department of Labor and Industry
Powers-Taylor Building
13 South 13th Street
Richmond, Virginia 23219
Jeffrey Brown, Commissioner (804) 786-2377
Fax: (804) 371-6524
Jay Withrow, Director, Office of Legal Support (804)
786-9873 Fax: (804) 786-8418

Washington Department of Labor and Industries

General Administration Building
PO Box 44001
Olympia, Washington 98504-4001
Gary Moore, Director (360) 902-4200
Fax: (360) 902-4202
Michael Silverstein, Assistant Director [PO Box
44600] (360) 902-5495 Fax: (360) 902-5529
Steve Cant, Program Manager, Federal-State
Operations [PO Box 44600]
(360) 902-5430 Fax: (360) 902-5529

Wyoming Department of Employment

Workers' Safety and Compensation Division
Herschler Building, 2nd Floor East
122 West 25th Street
Cheyenne, Wyoming 82002
Stephan R. Foster, Safety Administrator
(307) 777-7786 Fax: (307) 777-3646

APPENDIX D

ACCIDENT REPORTING FORMS

ATTACHMENT 1 ASSOCIATE INJURY REPORT

This report is to be initiated by the associate's supervisor. Please answer all questions completely. This report must be forwarded to the Manager, Corporate Health and Safety within 24 hours of the injury/illness.

Injured's Name _____ Sex _____ SSN _____ Birth Date _____

Home Address _____

City _____ State _____ Zip _____ Phone () _____

Job Title _____ Hire Date _____ Hourly Wage _____

Date of Incident _____ Time _____ Time Reported _____ To Whom? _____

Project/Department Name _____ Address _____

Project No _____ Time Shift Began _____ Did Associate Leave Work? ☐ No ☐ Yes When? _____

Has associate returned to work? ☐ No ☐ Yes When _____ Did associate miss a regularly scheduled shift? ☐ No ☐ Yes

Doctor/Hospital Name _____ Address _____

Witness Name(s) _____ Statement Attached? ☐ No ☐ Yes

Nature of Injury _____ Exact Body Part _____

Medical Attention: ☐ None ☐ First Aid On Site ☐ Doctor's Office ☐ Hospital ER ☐ Hospitalized

Job Assignment at Time of Incident _____

Describe Incident _____

Associate: _____
Print Signature Date

Comments on Incident and Corrective Action(s) _____

What Unsafe Condition(s) and/or Act(s) Contributed to the Incident? _____

What Corrective Action(s) Have Been Taken to Prevent Recurrence? _____

Supervisor: _____
Print Signature Date

ASSOCIATE INJURY REPORT

CONTINUED

Manager, Corporate Health and Safety

Concur With Action Taken? ☐ Yes ☐ No Remarks _____

OSHA Classification: ☐ First Aid ☐ Recordable, No Lost/Restricted Workdays

☐ Recordable, Lost Workdays ☐ Recordable, Restricted Activity ☐ Fatality

Days Away From Work _____ Days Restricted Work _____

Worker's Compensation Claim Number (if applicable) _____

TolTest Tracking No. _____

Verbal Received (Date/Time) _____ Report Received (Date/Time) _____

Drug Screen ☐ Yes ☐ No Alcohol Screen ☐ Yes ☐ No

Manager, Corporate Health and Safety:

Print Signature Date

A. Type of Injury or Illness Code: _____ E. Agent Code: _____

B. Injured Body Part Code: _____ F. Safety Rule Violated Code: _____

C. Activity at Time of Incident Code: _____ G. Incident Prevention Code: _____

D. Injury Cause Code: _____ H. Instruction/RE-Instruction Code: _____

ATTACHMENT 2 GENERAL LIABILITY, PROPERTY DAMAGE AND LOSS REPORT

This report is to be completed for all losses or damage to company property in excess of \$1000 and all third party damage, regardless of value, resulting from company activities.

Project/Department/Location _____ Project No. _____ Date _____

Address _____

How Did Damage or Loss Occur: _____

Description and Value (\$) of Damaged/Lost/Stolen Property:

Location of Damaged/Lost/Stolen Property (Before Loss): _____

Date and Time of Damage, Loss or Theft: _____

Owner of Damaged/Lost/Stolen Property:

Name _____ Phone No. () _____

Address _____ City _____

Employer and Address _____

Injured Parties (Also completed a Supervisor's Associate Injury Report if a Company Associate):

Name _____ Phone No. () _____

Address _____ City _____

Employer and Address _____

Description of Injury _____

Witnesses:

1. Name _____ Phone No. () _____

Address _____ City _____

Employer and Address _____

2. Name _____ Phone No. () _____

Address _____ City _____

Employer and Address _____

Were Pictures Taken? ☐ Yes ☐ No

Were Police Notified? ☐ Yes ☐ No Dept _____ Report No. _____

Completed By:

Print Signature Date

Manager, Corporate Health and Safety:

Print Signature Date

ATTACHMENT 3 INCIDENT INVESTIGATION REPORT

*** MUST BE COMPLETED WITHIN 72 HOURS ***

Investigation Date _____ Date of Incident _____

Employee Name _____

Supervisor Name _____

Dept. Name/Project Number/Project Name _____

Location of Incident _____

■ Incident Classification

Injury ☐ First Aid Vehicle ☐ Chargeable DOT ☐ DOT Vehicle
☐ OSHA Recordable ☐ Non-Chargeable ☐ DOT Reportable
☐ Lost Workday
☐ Restricted Workday Near Miss ☐ General Liability ☐

■ Description (Provide facts, describe how incident occurred, provide diagram [on back] or photos)

■ Analysis 1 (What unsafe acts or conditions contributed to the incident?)

■ Analysis 2 (What systematic or management deficiencies contributed to incident?)

■ Corrective Action(s) (List corrective action items, responsible person, scheduled completion date)

■ Witnesses (Attach statements or indicate why unavailable)

Investigated By _____
Print Signature Date

Manager, Corp. _____
Health and Safety Print Signature Date

ATTACHMENT 4 VEHICLE INCIDENT REPORT

INCIDENT DESCRIPTION

This report is to be initiated by the associate involved in the incident or his/her direct supervisor. Please answer all questions completely. This report must be forwarded to the Manager, Corporate Health and Safety within 24 hours of the incident.

INCIDENT DATE _____ TIME _____ A.M. or P.M.
LOCATION OF INCIDENT (ADDRESS, CITY AND STATE) _____
DESCRIPTION OF INCIDENT _____

WITNESS _____ PHONE NO. () _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
POLICE OFFICER'S NAME _____ DEPARTMENT _____

COMPANY VEHICLE

DRIVER _____ DRIVERS LICENSE _____ STATE _____
ADDRESS _____ CITY _____ STATE _____ ZIP: _____
WORK PHONE NO () _____ SSN _____ PROJECT NAME/NO _____ OFFICE/DEPT _____
VEHICLE NO _____ YEAR _____ MAKE _____ MODEL _____ LICENSE PLATE NO _____
STATE _____ VEHICLE OWNER _____ COMPANY _____ LEASED/RENTED _____ PRIVATE VEHICLE
VEHICLE TYPE _____ COMMERCIAL MOTOR VEHICLE _____ NON COMMERCIAL
IF NOT COMPANY-OWNED: OWNER _____ PHONE NO () _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
VEHICLE DAMAGE _____
NO. OF VEHICLES TOWED FROM SCENE _____ NUMBER OF INJURIES _____ NUMBER OF FATALITIES _____
WERE HAZARDOUS MATERIALS RELEASED? _____ YES _____ NO IF YES, DESCRIBE MATERIALS _____

OTHER VEHICLE

DRIVER _____ DRIVERS LICENSE _____ STATE _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
PHONE NO () _____ SSN _____
OWNERS NAME (CHECK IF SAME AS DRIVER) _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
INSURANCE COMPANY _____ POLICY NO _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
VEHICLE: YEAR _____ MAKE _____ MODEL _____ PLATE NO _____ STATE _____
VEHICLE IDENTIFICATION NUMBER _____
VEHICLE DAMAGE _____
PASSENGERS YES NO INJURIES YES (List names and telephone numbers below) NO

WEATHER _____ CLEAR _____ CLOUDY _____ FOG _____ RAIN _____
SLEET _____ SNOW _____ OTHER _____
PAVEMENT _____ ASPHALT _____ STEEL _____ CONCRETE _____ WOOD _____
GRAVEL/DIRT _____ BRICK/STONE _____ OTHER _____
CONDITION _____ DRY _____ WET _____ ICY _____ POTHOLES _____
OTHER _____
TRAFFIC CONTROL _____ TRAFFIC LIGHT _____ STOP SIGN _____ RAILROAD _____
NO INTERSECTION _____ NO CONTROL _____

VEHICLE INCIDENT REPORT (continued)

ROADWAY _____ NUMBER OF LANES EACH DIRECTION _____ RESIDENTIAL _____
_____ DIVIDED HIGHWAY _____ UNDIVIDED HIGHWAY _____

Draw and name roadways showing each vehicle, direction of travel, and point of impact. Indicate travel direction before the incident with a solid line and post-incident movement with a broken line.

SYMBOLS:

Your Vehicle



Other Vehicle(s)



Pedestrian



Stop Sign



Yield



Railroad



ADDITIONAL INFORMATION: _____

ASSOCIATE _____
(Print) (Signature) (Date)

SUPERVISOR _____
(Print) (Signature) (Date)

CORPORATE HEALTH & SAFETY MNGR. _____
(Print) (Signature) (Date)

HEALTH & SAFETY DEPARTMENT

TRACKING # _____ INCIDENT REPORT ORDERED _____ AT FAULT Y N

ORIGINAL: _____ H&S FILE _____ D&A SCREEN _____ DEFENSIVE DRIVING Y N

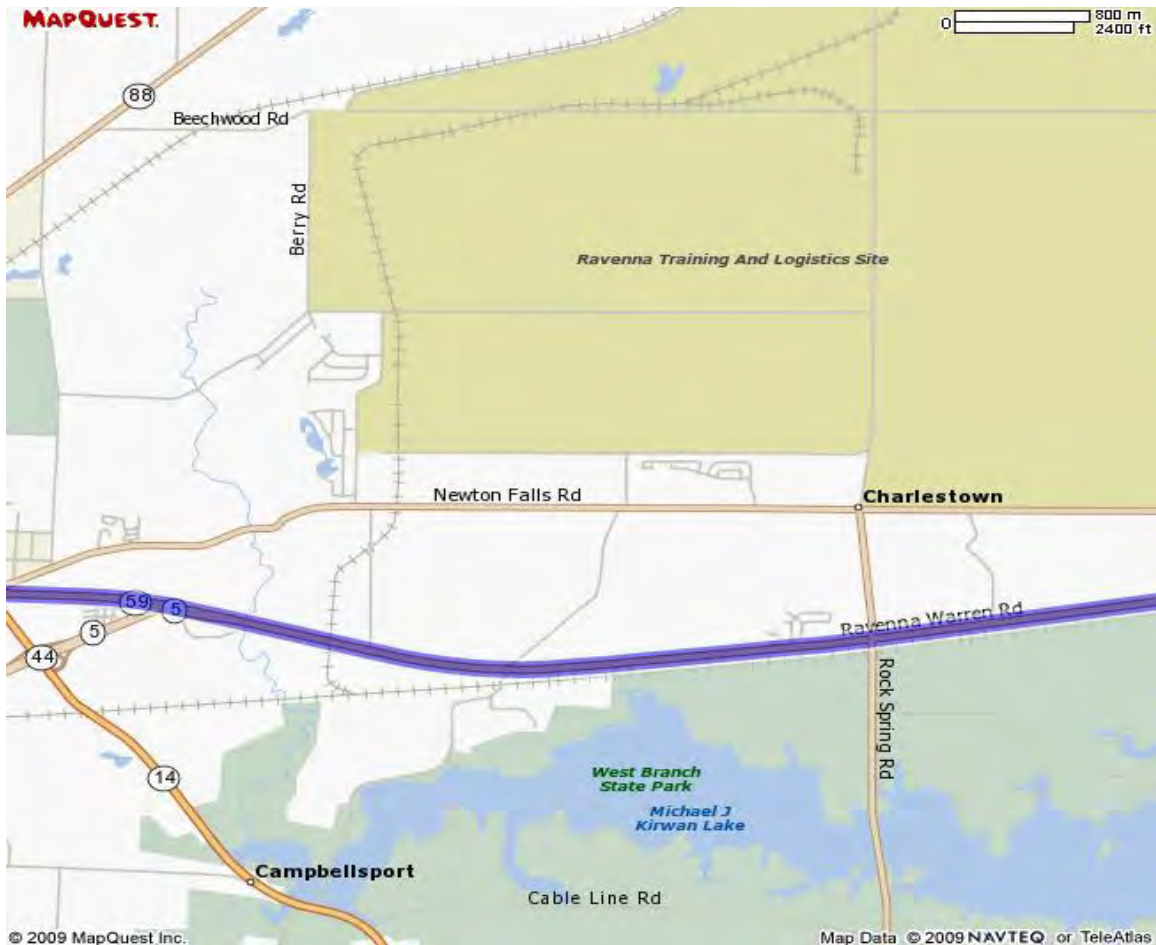
CC: _____ ASSOCIATE _____ DEPT. SAFETY REP _____ W/C FILE _____ DENISE

APPENDIX E

HOSPITAL DIRECTIONS

APPENDIX E Hospital Directions

Robinson Memorial Hospital
6847 North Chestnut Street, Ravenna, OH 44266
Phone: (330) 297-2361



Driving Directions	Distance
1: Start out going WEST on RAVENNA WARREN RD/OH-5 W toward GREENLEAF RD . Continue to follow RAVENNA WARREN RD .	6.6 Miles
2: Turn RIGHT onto OH-14/CLEVE E LIVERPOOL RD/OH-44 .	2.4 Miles
3: Turn LEFT onto N CHESTNUT ST .	0.2 Miles
4: End at 6847 N CHESTNUT ST .	0.0 Miles

APPENDIX F

ALCOHOL AND DRUG FREE WORKPLACE PROGRAM

Approved By:

Richard L. Barcum, CIH, CSP, CHMM
Manager, Corporate Health and Safety

David D. Alleman
President

Andrea M Gursik
Manager, Human Resources

Procedure

ALCOHOL AND DRUG FREE WORKPLACE PROGRAM

1.0 PURPOSE AND SUMMARY

This section summarizes TolTest's alcohol and drug abuse policy and programs to promote and maintain an alcohol and drug free workplace, and to comply with federal regulations governing substance abuse.

2.0 SCOPE

The Alcohol and Drug Free Workplace Program applies to all associates.

3.0 RESPONSIBILITY MATRIX

3.1 Procedure Responsibility

The Manager, Corporate Health and Safety is responsible for the issuance, revision and maintenance of this procedure.

3.2 Program Responsibility

This program will be monitored by the Corporate Health and Safety Department

4.0 GENERAL

TolTest recognizes that substance abuse in the workplace is a major concern. It affects not only job performance and the work environment but could also undermine our clients' confidence in TolTest and the safety of its operations. TolTest believes that by identifying and correcting substance abuse, the safety, health, and general well-being of associates at all levels of employment will be maintained.

TolTest is required to notify each associate of its commitment to an alcohol and drug free workplace. To comply with policy, TolTest will (a) establish an ongoing program to ensure an alcohol and drug free workplace; and (b) provide direction for alcohol and drug abuse assistance.

5.0 PROGRAM IMPLEMENTATION

TolTest will take the following steps to implement the program:

- 5.1 Inform its associates of the hazards of using alcohol and illegal substances.
- 5.2 Screen its associates for the misuse of alcohol, and use of illegal substances consistent with federal and state laws and TolTest policy.
- 5.3 Not employ substance abusers consistent with federal and state laws and TolTest policy.
- 5.4 Implement disciplinary action, consistent with this policy.
- 5.5 Within policy, assist associates with substance abuse problems and rehabilitation efforts.

6.0 DEFINITIONS

- 6.1 Alcohol – The intoxicating agent in beverage alcohol. The substance known as ethyl alcohol, hydrated oxide of ethyl, or spirit of wine which is commonly produced by the fermentation or distillation of grain, starch, molasses, sugar, potatoes or other substances, and includes all dilutions and mixtures of these substances.
- 6.2 Controlled Substance – Amphetamines, cocaine metabolites, marijuana metabolites, opiates, and phencyclidine (PCP). Controlled substances include any of the drugs listed above which are legally obtainable but have not been legally obtained by the associate involved. This includes prescribed drugs not legally obtained and prescribed drugs not being used as prescribed.
- 6.3 Legal Drugs – Prescribed drugs and over-the-counter drugs which have been (under U.S. law) legally obtained and are being used for their intended purpose, or as prescribed and manufactured.
- 6.4 Medical Review Officer – A licensed physician responsible for receiving laboratory results generated by an employer's drug testing program (third party reviewer). This physician has knowledge of substance abuse disorders and related toxicology. The physician has appropriate medical training to interpret and evaluate an individual's confirmed positive test results together

with either his or her medical history and/or any other relevant biomedical information.

- 6.5 TolTest Supplied Vehicle – Any TolTest owned/leased/rented motor vehicle or heavy equipment or a personally owned vehicle utilized for company business purposes.
- 6.6 Pending Result – A laboratory result which required input from the associate for resolution by the MRO. The designation “pending” should be used if the MRO is unable to contact the associate after (5) days.
- 6.7 Unfit for Duty – For the purpose of this Program, “unfit for duty” shall mean an associate who is adversely affected by alcohol, drugs or any combination of alcohol and drugs, in an observable manner. The symptoms are not confined to misbehavior, nor to obvious impairment of physical or mental ability, such as slurred speech or difficulty maintaining balance.
- 6.8 Reasonable Suspicion - For there to be reasonable suspicion of alcohol or drug use, a TolTest Supervisor must articulate specific observations about the associate’s appearance, behavior, speech, or body odors at the time of the suspicion. The person making those observations must be a properly trained supervisor or company official, and that person may not conduct the drug and/or alcohol test.
- 6.9 Random Testing – A blind selection process in which all eligible associates in a prescribed drug and alcohol testing pool has an equal opportunity/chance/probability of being selected from the larger population of the prescribed drug and alcohol testing pool.
- 6.10 Illicit Drugs - Illicit drugs are controlled substances that possess a high potential for abuse, have no currently accepted medical use in the United States, and demonstrate a lack of accepted safety for use under medical supervision.
- 6.11 Dilute Specimen - Dilution is the process of reducing the concentration of drug or drug metabolites in the sample. A dilute specimen, by definition, is a urine specimen that has a creatinine of less than 20 g/dl and a specific gravity of 1.003 or less.
- 6.12 Adulterated Specimen - where chemical adulterants are directly added to a urine specimen for the purposes of attempting to provide a false negative on a drug test.

7.0 PROGRAM

7.1 Prohibitions – TolTest Policy prohibits the following with regard to alcohol or drugs:

- 7.1.1 Use, possession, manufacture, distribution, dispensation or sale of illegal drugs or paraphernalia associated with such, or excessive alcohol on TolTest premises; TolTest business; at project sites at which TolTest is working; any housing facility maintained by or paid for by TolTest; in TolTest supplied vehicles; or during working hours.
- 7.1.2 Unauthorized use, possession, manufacture, distribution, dispensation or sale of a controlled substance on TolTest premises; TolTest business; at project sites at which TolTest is working; any housing facility maintained by or paid for by TolTest; in TolTest supplied vehicles; or during working hours. This includes use of prescribed medications and narcotics without a valid prescription.
- 7.1.3 Unauthorized storage in a locker, desk, automobile (including personal) or other repository on TolTest premises; at any project site at which TolTest is working; or any housing facility maintained by or paid for by TolTest, of any illegal drug or the paraphernalia associated with such, or any controlled substance or alcohol.
- 7.1.4 Being under the influence of: illegal drugs or a controlled substance; alcohol on TolTest premises; TolTest business; at any project site at which TolTest is working; any housing facility maintained by or paid for by TolTest; in TolTest supplied vehicles; or during working hours.
- 7.1.5 Use of alcohol off TolTest premises that adversely affects the associate's work performance; his/her own or others' safety at work; or TolTest's regard or reputation in the community or with its customers.
- 7.1.6 Possession, use, manufacture, distribution, dispensation or sale of illegal drugs or a controlled substance off TolTest premises that adversely affects the associate's work performance, his/her own or others' safety at work, or TolTest's regard or reputation in the community or with its customers.
- 7.1.7 Switching or adulterating any urine and/or blood sample submitted for testing.
- 7.1.8 Refusing consent to testing or refusing to submit a urine and/or blood sample for testing when requested by the company or its agent.

- 7.1.9 Refusing to submit to a search when requested by the company or its agent in accordance with this policy.
- 7.1.10 Failure to adhere to the requirements of any alcohol or drug treatment or counseling program in which the associate is enrolled.
- 7.1.11 Continuance of employment for any associate convicted under any criminal drug statute for a violation occurring in the workplace.
- 7.1.12 Continuance of employment for any associate arrested or convicted under any criminal drug statute under circumstances which adversely affects the company's regard or reputation in the community or with its customers.
- 7.1.13 Continuance of employment for any associate who refuses to sign a statement agreeing to abide by TolTest's Alcohol and Drug Free Workplace Program.

8.0 SUBSTANCE SCREENING – NON-RAPID TESTING

TolTest reserves the right to require associates to undergo alcohol or drug screening as described in this procedure.

- 8.1 Laboratory – TolTest will utilize a U.S. Department of Health and Human Services (DHHS) accredited laboratory which is able to assure that appropriate methods will be used. Laboratory procedures will follow the context of a quality assurance program. Trained personnel will be used in the analysis and interpretation of the results. When selecting a laboratory, TolTest will consider equipment, personnel, quality assurance, standardized procedures, quality control, and certification.
- 8.2 Collection of Specimens – Urine specimens will be used to determine the presence of illegal drugs. The collection of urinary specimens from the associate (donor) will be accomplished to assure each donor that personal dignity and privacy will be respected.

Specimens will be collected by trained personnel. The donor will be present until the container is sealed and the donor writes his/her initial across the seal. The chain of custody will be documented thereafter.

- 8.3 Test Results – If the results of the initial screening exceed the specified cut-off levels, a confirmation test will automatically be conducted by Gas Chromatograph/Mass Spectrometry (GC/MS) to confirm the initial results. If this confirmation is negative, then the results will be reported as negative and entered into the donor's file.

However, if the confirmation test exceeds the prescribed limits and the result is positive, the MRO will contact the donor to evaluate valid explanations for the test result. If none are identified, the results will be reported as positive. Test results will be handled in a confidential manner and available only to those individuals who need to know the results to administer this program or other TolTest policies as they apply.

When the MRO is unable to contact the associate after five (5) days to discuss the valid explanations, the MRO shall report the test results as “pending.” Associates with “pending” results shall be suspended without pay until the MRO is contacted and the test results resolved.

When the MRO is unable to contact the donor after three (3) attempts in twenty four (24) hours, they will have the designated TolTest representative assist. If the donor has not contacted the MRO within 72 hours of contact from the designated TolTest representative, the test will be reported as “positive.” If neither the MRO nor the designated TolTest representative are able to contact the donor within ten (10) days, the test will be reported as positive.

- 8.4 Dilute Samples –All non-DOT donors whose samples are determined to be dilute will be given the opportunity to retest or be placed into the Alternative Random Pool described in paragraph 17.0 below. All DOT donors whose samples are determined to be dilute will be given the opportunity to retest a maximum of one time. Refusal to retest for DOT donors will be reported as a positive. Subsequent dilute samples for DOT donors will be reported as dilute negative.

8.5 Testing Limits

Substance	Initial Screen Level	GC/MS Confirmation Test Level
Opiates	2000 ng/ml	2000 ng/ml
Phencyclidine	25 ng/ml	25 ng/ml
Marijuana Metabolites	50 ng/ml	15 ng/ml
Cocaine Metabolites	300 ng/ml	150 ng/ml
Amphetamines*	1000 ng/ml	500ng/ml

* includes Methamphetamines

9.0 SUBSTANCE SCREENING – RAPID TESTING

Where allowed by state and federal regulation, TolTest may elect to utilize Rapid Drug Testing to streamline the process.

- 9.1 Collection of Specimens – Urine specimens will be used to determine the presence of illegal drugs. The collection of urinary specimens from the associate (donor) will be accomplished to assure each donor that personal dignity and privacy will be respected.

Specimens will be collected by trained personnel. The rapid test kit will be utilized according to the manufacturer's instructions.

- 9.2 Test Results – If the results of the initial screening exceed the specified cut-off levels (non-negative), the sample will be sealed with the donor present and the donor will write his/her initial across the seal. The chain of custody will be documented thereafter. The sample will then be sent to a U.S. Department of Health and Human Services (DHHS) accredited laboratory which is able to assure that appropriate methods will be used. Laboratory procedures will follow the context of a quality assurance program. Trained personnel will be used in the analysis and interpretation of the results. When selecting a laboratory, TolTest will consider equipment, personnel, quality assurance, standardized procedures, quality control, and certification. A confirmation test will be conducted by Gas Chromatograph/Mass Spectrometry (GC/MS) to confirm the initial results. If this confirmation is negative, then the results will be reported as negative and entered into the donor's file.

However, if the confirmation test exceeds the prescribed limits and the result is positive, the MRO will contact the donor to evaluate valid explanations for the test result. If none are identified, the results will be reported as positive. Test results will be handled in a confidential manner and available only to those individuals who need to know the results to administer this program or other TolTest policies as they apply.

When the MRO is unable to contact the associate after five (5) days to discuss the valid explanations, the MRO shall report the test results as "pending." Associates with "pending" results shall be suspended without pay until the MRO is contacted and the test results resolved.

When the MRO is unable to contact the donor after three (3) attempts in twenty four (24) hours, they will have the designated TolTest representative assist. If the donor has not contacted the MRO within 72 hours of contact from the designated TolTest representative, the test will be reported as "positive." If neither the MRO nor the designated TolTest representative are able to contact the donor within ten (10) days, the test will be reported as positive.

- 9.3 Dilute Samples – All donors whose samples are determined to be dilute will be given the opportunity to retest or be placed into the Alternative Random Pool described in paragraph 17.0 below.

9.4 Testing Limits

Substance	Initial Screen Level	GC/MS Confirmation Test Level
Opiates	2000 ng/ml	2000 ng/ml
Phencyclidine	25 ng/ml	25 ng/ml
Marijuana Metabolites	50 ng/ml	15 ng/ml
Cocaine Metabolites	300 ng/ml	150 ng/ml
Amphetamines	1000 ng/ml	500ng/ml

* includes Methamphetamines

10.0 **ASSOCIATE ASSISTANCE PROGRAM**

TolTest encourages the earliest possible diagnosis and treatment for alcohol or drug abuse and supports sound treatment efforts. However, the decision to seek diagnosis and accept treatment for alcohol or drug abuse is the associate's responsibility.

Associates with an alcohol or drug abuse problem should request assistance from the Manager, Corporate Health and Safety or Manager, Human Resources. Associates who voluntarily request assistance in dealing with an alcohol or drug abuse problem may do so without jeopardizing their continued employment with TolTest, provided they undergo evaluation by a qualified Substance Abuse Professional (SAP) strictly adhere to the recommendations of the SAP, and immediately cease abuse of alcohol or drugs. Additionally, the associate will be placed into the Alternative Random pool for a period of up to a twenty-four (24) months following enrollment in the program.

11.0 **IDENTIFICATION OF SUBSTANCE ABUSERS**

The following screening (testing) procedures are used to detect the abuse of alcohol and controlled substances by TolTest associates (Substance Abusers). Compliance with this program is considered to be a condition of employment.

At a minimum, TolTest will utilize some or all of the following components to assure a "drug-free" workplace.

- Employment testing is required for all new associates, and is a condition of employment. An offer of employment will not be valid if the test is positive or if the applicant or associate does not submit to testing.
- Post incident testing may be utilized following an incident that results in an OSHA Recordable Injury/Illness, an At-Fault Vehicle Incident, or damage to TolTest or client equipment or property.

- Associates may be selected, using a random selection process, at any time in their employment with TolTest and will likely be selected more than once.
- DOT testing is required by the Federal Department of Transportation for drivers of vehicles governed by DOT regulations. DOT testing consists of random, pre-employment, follow-up, return-to-duty, reasonable suspicion and post-incident testing.
- Reasonable Cause Testing is utilized when a supervisor, with the concurrence of Health and Safety, determines that an associate's observable behavior is out of the ordinary.
- Customer/Client and Regulatory required testing shall be conducted as required by the customer/client or regulatory authority (i.e. Department of Energy or Pipeline Operations under RSPA). If an associate tests positive in a client conducted test, he or she shall be removed from the client's premises and will be subject to disciplinary action, up to and including termination of employment.

12.0 EMPLOYMENT TESTING

Employment substance abuse testing is performed after an offer has been accepted, either verbally or in writing, and prior to an associate starting work.

NOTE: New associates in non-safety sensitive positions may be authorized by the Corporate Health and Safety Department to begin work prior to submitting a controlled substance test. In such instances, the test must be obtained within one (1) week of the start date. An offer for employment is invalid if the test is positive or the associate does not submit to testing.

12.1 Procedures for Employment Testing

- 12.1.1 The new associate (donor) will sign a consent to an employment/post-offer drug test and release of test results.
- 12.1.2 The donor will provide the sample as directed by the medical personnel conducting the test.
- 12.1.3 The medical personnel will confirm the identity of the donor by requesting to view a picture I.D. The sample may not be collected if the donor does not provide a picture I.D.
- 12.1.4 After the sample container is closed, it shall be sealed in accordance with instructions from the laboratory.
- 12.1.5 The donor shall sign the tamper seal.

12.1.6 The medical provider shall complete the chain of custody form, package the sample and send it overnight express delivery to the laboratory.

13.0 POST-INCIDENT

An associate involved in an incident may be required to submit to tests for alcohol and controlled substances following an incident. Any TolTest management or supervisory associate is authorized to request post-incident testing.

Associates are prohibited from using alcohol for eight (8) hours following any incident or until the required post-incident alcohol test is administered, whichever occurs first. Every effort should be made to conduct the post-incident drug and alcohol tests within two (2) hours following any incident. At a minimum post-incident alcohol tests are required to be administered within eight (8) hours following any incident; drug tests are required to be administered within twenty four (24) hours following any incident. Any associate involved in an incident must therefore remain readily available for testing and may be considered to have refused to submit to testing if he or she fails to do so. This requirement will not, however, require an associate to delay any necessary medical attention following an incident or to remain at the scene of an incident when his/her absence is necessary to obtain assistance in responding to the incident or to obtain necessary emergency medical care. When an injury is involved, the post-incident testing must take place in conjunction with an examination by a physician. The physician must make note of the presence of any clinical signs or symptoms of substance abuse. In addition to being eligible for disciplinary action under Section 21 of this policy, any associate who is determined to have been under the influence of drugs or alcohol in violation of this policy may also jeopardize their Workers Compensation Benefits.

13.1 Post-incident DOT alcohol and drug testing is mandatory under DOT regulation in incidents involving:

- A fatality.
- When a driver receives a citation for a moving traffic violation.
- A vehicle which is towed from the scene or in which someone is treated medically away from the scene and a citation for a moving violation is issued to the Commercial Motor Vehicle driver.

13.2 Alcohol and drug testing may be required, at the discretion of the Manager, Corporate Health and Safety, of associates involved in the following incidents:

- An incident requiring first aid treatment (any incident not requiring offsite medical treatment).
- When a driver receives a citation for a moving traffic violation while operating a TolTest supplied vehicle.
- Damage to a TolTest supplied vehicle, or property damage.
- Near miss incidents – Any incident where no injury or property damage occurred, but where the potential for injury or property damage existed.

13.3 The following associates would typically be chosen for testing (for alcohol and controlled substances) following an incident or near miss:

- The associate directly involved in the incident (e.g., injured associate).
- The operator of any TolTest supplied vehicle which was directly involved in the incident.
- The associate who was signaling or directing an equipment operator (as referenced above).
- Any other associate who was directly involved in work activities which led to the incident, and had an opportunity to influence the occurrence or prevention of the incident.

14.0 LAW ENFORCEMENT DIRECTED TESTING

This section applies to any drug and/or alcohol testing including, but not limited to, breath alcohol testing, field sobriety testing, blood testing, etc., ordered and/or administered by law enforcement personnel for TolTest associates engaged in work time activities or operating a TolTest owned, rented, or leased vehicle during non-working hours.

- The above mentioned testing will be sufficient to meet TolTest's Post-Incident Drug and Alcohol Testing Requirements.
- Negative results will be viewed as a negative TolTest drug and/or alcohol test.
- Positive results will be viewed as a positive TolTest drug and/or alcohol test and the associate will be subject to disciplinary action as outlined in this policy.

- Refusal to submit to testing will be viewed as a positive TolTest drug and/or alcohol test and the associate will be subject to disciplinary action as outlined in this policy.

Note: TolTest reserves the right to perform additional drug and/or alcohol subsequent to testing ordered and/or administered by law enforcement personnel.

15.0 RANDOM TESTING

Random substance abuse testing is applicable to all associates within the United States and any United States Territory. The random selection process will be completely objective and anonymous. All tests will be unannounced to the involved associates and the dates for testing will be reasonably spread throughout the course of the year.

Any associate notified of selection for random alcohol and/or controlled substances testing will be expected to proceed to the test site by 2:00 pm on the day they are notified. Every effort will be made by Health and Safety to coordinate random testing with supervisors to minimize operational impacts.

Placement into the various random test pools will be at the discretion of the Manager, Corporate Health and Safety. The following schedule of random alcohol and controlled substance testing will be adhered to:

15.1 Administrative Positions

TolTest will conduct random controlled substance tests at a minimum annual percentage rate of 5% of the average number of associates in non-safety positions (i.e. administrative positions).

15.2 Department of Transportation Requirements

TolTest will conduct random controlled substance tests at a minimum annual percentage rate of 50% of the average number of associates operating Commercial Motor Vehicles for TolTest. Random alcohol abuse testing at a minimum annual percentage rate of 10% of the average number of associates operating Commercial Motor Vehicles for TolTest. This is a requirement of the Federal Department of Transportation.

15.3 Non-Administrative Positions

TolTest will randomly select at least one (1) associate in a non-administrative position every month. All non-administrative associates located at the office or project location of the selected associate will be subjected to the random drug testing program. On the day of the test, the Manager, Corporate Health

and Safety or their representative will randomly select by social security number the total number of non-administrative associates to be tested based upon the table in Attachment 1.

15.4 Random Testing

Random testing will be conducted on a project by project and/or office by office basis based on the individual selected in the random selection process mentioned above. Random testing for projects and/or offices may be conducted utilizing on-site collection via a third-party collector, a previously selected TolTest approved medical facility or properly trained TolTest collectors within the Health and Safety Department.

Note: On-site collection is not meant to imply that collection will always take place at the physical project site. Due to entry restrictions onto some project locations, off-site collection may be necessary. In all cases, a collection location as close as possible to the project/office location will be selected.

16.0 **REASONABLE CAUSE TESTING**

An associate may be screened for alcohol or drug abuse for reasonable cause only when TolTest has determined that reasonable cause for screening exists. Justification must be performance oriented and determined by direct and documented observation of the associate, with concurrence from the Manager, Corporate Health and Safety (Attachment 2).

- If a supervisor observes that an associate's performance abnormally varies from performance standards, or that the associate's on-the-job conduct endangers the associate or others, the supervisor may bring the observation to the attention of the Health and Safety Department. Before screening, the supervisor must document the observation in writing and review the observation and evidence with the Manager, Corporate Health and Safety or Manager, Human Resources. In the absence of written documentation, prior to screening, all reasonable cause cases will be thoroughly investigated by the Corporate Health and Safety or Human Resources Departments.

Note: This process will remain anonymous.

- Upon determination that Reasonable Cause is justified, the Manager, Corporate Health and Safety or Manager, Human Resources will consult with the suspected individual and review the observations and evidence. The associate will be given the opportunity to submit to an immediate drug or alcohol test or be placed into the Associate Assistance Program.

- Submit to immediate drug or alcohol test – If the associate submits to an immediate drug test and the results are negative for illicit drugs, no further action will take place. If the associate submits to an immediate drug test and the results are positive for illicit drugs, the associate will be subject to disciplinary action, up to and including termination.
- Enter the Associate Assistance Program – If the associate elects to enter the Associate Assistance Program, the requirements as outlined in paragraph 9.0 above will take precedence.

17.0 ALTERNATIVE RANDOM POOL

A separate Alternative Random Pool will be populated by those associates who submit dilute samples and those enrolled in an Associate Assistance Program as defined in 10.0 above. A third party will randomly select at least one (1) associate in the Alternative Random Pool every month. If the associate selected is in the Associate Assistance Program, the associate will remain in the Alternative Random Pool until their obligation under the Associate Assistance Program is fulfilled. If the associate selected is in the pool as a result of Reasonable Cause, the guidelines outlined in paragraph 16.0 will take precedence.

18.0 TESTING UPON RE-HIRE

An associate, whose employment with TolTest is interrupted for greater than 3 months will be required to undergo additional post-offer substance abuse testing.

19.0 CUSTOMER AND REGULATORY REQUIREMENTS

When necessary, TolTest will supplement the Alcohol and Drug Free Workplace Program to meet testing required by regulatory, contract, or customer requirements for access to a facility, site, or operation.

20.0 CONTRACTORS/SUBCONTRACTORS AND OWNER-OPERATORS

Because this drug and alcohol testing program is required by the Drug-Free Workplace Act of 1988, and Federal Acquisition Regulations (FAR), its provisions will apply to any individual who performs any safety sensitive services on behalf of TolTest pursuant to any contract, lease or other agreement with TolTest, even though such individual may not be an associate of TolTest. Moreover, mere compliance with the provisions of this procedure or the application of this procedure to any person shall not operate to convert any independent contractor or other person into an associate of TolTest unless such other circumstances indicate the existence of the employer-associate relationship.

Whenever required of TolTest by contractual agreement, all contractors and subcontractors providing services to TolTest will be required to certify the establishment of or existence of a program which minimally complies with the Drug-Free Workplace Act of 1988. Contractors and subcontractors must execute their certification of compliance before commencing services at TolTest project sites.

21.0 DISCIPLINARY ACTION

TolTest reserves the right and authority to initiate disciplinary actions, up to and including termination, in accordance with current Human Resource policy against any associate found to have violated the Alcohol and Drug Free Workplace Program.

The associate may be eligible for re-hire after a period of 12 months following termination provided that there is evidence, acceptable to TolTest, of the successful completion of an approved substance abuse rehabilitation program; the associate successfully passes each subsequent alcohol and/or drug test; the associate continues to participate in the follow-up maintenance program as recommended by the rehabilitation facility; and the associate agrees to be subject to unannounced substance abuse tests from time to time for a period of not to exceed twenty-four (24) months following completion of the rehabilitation program.

22.0 ASSOCIATE RESPONSIBILITY

It is a condition of employment that all associates abide by the terms of the Alcohol and Drug Free Workplace Program. In the event of any conviction for a criminal drug violation occurring on a TolTest job site, in a TolTest facility, or while in or operating a TolTest vehicle, the associate must notify the Manager, Corporate Health and Safety or Manager, Human Resources within five (5) days of the date of the conviction.

23.0 PROGRAM CLARIFICATION AND ADMINISTRATION

A copy of the Alcohol and Drug Free Workplace will be provided to all applicants and made available to all associates. Each applicant and associate shall read and understand this policy and sign the Alcohol and Drug Free Workplace Acknowledgement Form (Attachment 3). This acknowledgement will then be retained in the associate's personnel file.

All classified advertisements for employment with TolTest will advise prospective applicants that TolTest has an Alcohol and Drug Free Workplace Program.

Questions regarding any provision of this program should be forwarded to the TolTest Corporate Health and Safety Department or the TolTest Human Resources Department.

24.0 TRAINING

- 24.1 Associate Awareness – In its efforts to develop associate awareness of the hazards of substance abuse, TolTest will provide associates annual awareness training consisting of components covered during health and safety meetings and distribution of written materials. Information contained within these components will be made available to associates.
- 24.2 Supervisor Training – Supervisory training will consist of initial skill-building and informational training and annual refresher training. This training will be a combination of classroom training, safety meetings and written material.

25.0 EXCEPTION PROVISIONS

Variances to this procedure shall be requested in accordance with established variance procedures.

26.0 ATTACHMENTS

1. Non-Administrative Random Drug Testing Percentages
2. Observed Behavior Reasonable Cause Record
3. Alcohol and Drug Free Workplace Acknowledgement Form

ATTACHMENT 1
NON-ADMINISTRATIVE RANDOM DRUG TESTING PERCENTAGES

No. of Associates	Maximum No. of Tests
1 – 10	3
11 – 20	6
21 – 30	9
31 – 40	12
41 – 50	15
51 – 60	18
61 – 70	21
71 – 80	24
81 – 90	27
91 – 100	30
> 100	25%

ATTACHMENT 2
OBSERVED BEHAVIOR REASONABLE CAUSE RECORD

Associate's Name:	Date Observed:	Time Observed:
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Address of Incident (Street/City/State/Zip Code):

Observed associate behavior for reasonable cause for the use of alcohol or controlled substances must be witnessed by at least two supervisors, if at all feasible. If only one supervisor is available, only one supervisor need witness the conduct. The witnesses must have received training in the detection of probably drug use by observing a person's behavior. The documentation of the associate's conduct must be prepared and signed by the witnesses within 24 hours of the observed behavior or before the results of the tests are released, whichever is earlier.

MARK ITEMS THAT APPLY AND DESCRIBE SPECIFICS

1. APPEARANCE Normal ____ Sleepy ____ Tremors ____

Description: _____

2. BEHAVIOR Normal ____ Erratic ____ Irritable ____

Inappropriate Gait ____ Mood Swings ____ Lethargic ____

Description: _____

3. MOTOR SKILLS Normal ____ Impaired ____

Description: _____

4. OTHER OBSERVATIONS FOR REASONABLE CAUSE _____

SUPERVISOR:

Signature	Title	Preparation Date	Time
-----------	-------	------------------	------

MANAGER, CORPORATE HEALTH AND SAFETY

Signature	Title	Preparation Date	Time
-----------	-------	------------------	------

☐ Submit to Test ☐ Refuse to Test ☐ Associate Assistance Program

ATTACHMENT 3
ALCOHOL AND DRUG FREE WORKPLACE ACKNOWLEDGEMENT FORM

I have been provided with a copy and have read TolTest Procedure HS102 Alcohol and Drug Free Workplace Program. Additionally, I understand that as a condition of my employment with TolTest, I am required to abide by the requirements of this procedure.

Associate/Applicant's Printed Name

Associate/Applicant's Signature

Date

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Appendix A-10. Notifications of Asbestos Project

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Postmark	Date Received	Notification No.	By
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Ohio Department of Health

Prior Notification of Asbestos Hazard Abatement Project

Read carefully all the instructions and questions prior to completing the notification form.

- Notifications including check shall be typed and sent to the Ohio Department of Health, Attn: Revenue Processing, P.O. Box 15278, Columbus, Ohio 43215.
- Checks shall be made payable to: Treasurer, State of Ohio, for the amount of sixty-five dollars (\$65.00).
- Any licensed asbestos hazard abatement contractor who performs any asbestos hazard abatement projects within the State of Ohio shall submit prior notifications to the Director at least ten business days before beginning each planned asbestos hazard abatement project as required by Chapter 3701-34 of the Ohio Administrative Code.
- Type of notification ☒ original ☐ revision number _____ revised line(s) number _____
☐ emergency ☐ blanket ☐ cancellation
- Type of abatement involving at least 50 linear feet or 50 square feet
☒ removal ☐ repair ☐ encapsulation ☐ enclosure ☐ renovation

6. Owner name Ravenna Army Ammunition Plant							
Address 8451 State Route 5				City Ravenna		State OH	ZIP 44266
Contact Mark Patterson					Contact telephone number (330) 358-7312		
7. License number AC1701		Abatement Contractor TolTest Inc.				Expiration 12/31/10	
Address 508 W. Elnora				City Odon		State IN	ZIP 47562
Contact Brian Morgan					Telephone number (812) 636.8501		
8. Certification number AS29651		Name of asbestos hazard abatement specialist for project Jeffrey Hooten				Expiration 7/10/11	
9. Project information—Building name Ramsdell Quarry Landfill area of concern							
Address Ravenna Army Ammunition Plant				City Ravenna		State OH	County Portage
Site location (<i>specific</i>) Soil (contaminated with ACM) within quarry							
10. Project description							
Type of asbestos material <input type="checkbox"/> surfacing <input type="checkbox"/> mechanical <input checked="" type="checkbox"/> other _____							
Asbestos removal from <input type="checkbox"/> pipe <input type="checkbox"/> boiler <input checked="" type="checkbox"/> other soil							
Engineering controls <input type="checkbox"/> AFD <input type="checkbox"/> glove bag <input checked="" type="checkbox"/> other exclusion zones and wet methods							
11. Estimate of asbestos containing material							
linear feet 150 Cubic Yards of ACM soil				square feet			
12. Abatement dates							
set up 08/18/10		abatement 08/18/10		completion (acm work only) 09/01/10			
Hours of operation 7am-5pm							
Days of the week	Monday x	Tuesday x	Wednesday x	Thursday x	Friday x	Saturday	Sunday
13. Approved landfill—Name American Landfill						EPA permit number	
City Waynesburg				State OH		Telephone number 330-866-3265	
14. Name of person filing this notice Lora Frasier						Date 8/4/10	

Do NOT WRITE IN THIS SPACE

Postmark	Date Received	Notification No.	By
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Ohio Department of Health Prior Notification of Asbestos Hazard Abatement Project

Read carefully all the instructions and questions prior to completing the notification form.

- Notifications including check shall be typed and sent to the Ohio Department of Health, Attn: Revenue Processing, P.O. Box 15278, Columbus, Ohio 43215.
- Checks shall be made payable to: Treasurer, State of Ohio, for the amount of sixty-five dollars (\$65.00).
- Any licensed asbestos hazard abatement contractor who performs any asbestos hazard abatement projects within the State of Ohio shall submit prior notifications to the Director at least ten business days before beginning each planned asbestos hazard abatement project as required by Chapter 3701-34 of the Ohio Administrative Code.
- Type of notification ☐ original ☒ revision number 1 revised line(s) number 8 12
☐ emergency ☐ blanket ☐ cancellation
- Type of abatement involving at least 50 linear feet or 50 square feet
☒ removal ☐ repair ☐ encapsulation ☐ enclosure ☐ renovation

6. Owner name Ravenna Army Ammunition Plant			
Address 8451 State Route 5		City Ravenna	State OH
Contact Mark Patterson		Contact telephone number (330) 358-7312	
7. License number AC1701	Abatement Contractor TolTest Inc.		Expiration 12/31/10
Address 508 W. Elnora		City Odon	State IN
Contact Brian Morgan		Telephone number (812) 636.8501	
8. Certification number AS25205	Name of asbestos hazard abatement specialist for project John D Coen Sr		Expiration 1/31/11
9. Project information—Building name Ramsdell Quarry Landfill area of concern			
Address Ravenna Army Ammunition Plant		City Ravenna	State OH
Site location (specific) Soil (contaminated with ACM) within quarry			
10. Project description			
Type of asbestos material <input type="checkbox"/> surfacing <input type="checkbox"/> mechanical <input checked="" type="checkbox"/> other			
Asbestos removal from <input type="checkbox"/> pipe <input type="checkbox"/> boiler <input checked="" type="checkbox"/> other soil			
Engineering controls <input type="checkbox"/> AFD <input type="checkbox"/> glove bag <input checked="" type="checkbox"/> other exclusion zones and wet methods			
11. Estimate of asbestos containing material			
linear feet		square feet	
150 Cubic Yards of ACM soil			
12. Abatement dates			
set up 08/18/10		abatement 08/18/10	completion (acm work only) 09/01/10
Hours of operation 7am-4pm			
Days of the week	Monday	Tuesday	Wednesday
	x	x	x
13. Approved landfill—Name American Landfill			EPA permit number
City Waynesburg			State OH
			Telephone number 330-866-3265
14. Name of person filing this notice Lora Frasier			Date 8/20/10

Do Not WRITE IN THIS SPACE

Postmark	Date Received	Notification No.	By
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Ohio Department of Health Prior Notification of Asbestos Hazard Abatement Project

Read carefully all the instructions and questions prior to completing the notification form.

- Notifications including check shall be typed and sent to the Ohio Department of Health, Attn: Revenue Processing, P.O. Box 15278, Columbus, Ohio 43215.
- Checks shall be made payable to: Treasurer, State of Ohio, for the amount of sixty-five dollars (\$65.00).
- Any licensed asbestos hazard abatement contractor who performs any asbestos hazard abatement projects within the State of Ohio shall submit prior notifications to the Director at least ten business days before beginning each planned asbestos hazard abatement project as required by Chapter 3701-34 of the Ohio Administrative Code.
- Type of notification ☐ original ☒ revision number 2 revised line(s) number 11 12
☐ emergency ☐ blanket ☐ cancellation
- Type of abatement involving at least 50 linear feet or 50 square feet
☒ removal ☐ repair ☐ encapsulation ☐ enclosure ☐ renovation

6. Owner name Ravenna Army Ammunition Plant			
Address 8451 State Route 5		City Ravenna	State OH
Contact Mark Patterson		ZIP 44266	
		Contact telephone number (330) 358-7312	
7. License number AC1701		Abatement Contractor TolTest Inc.	
Address 508 W. Elnora		City Odon	State IN
Contact Brian Morgan		ZIP 47562	
		Telephone number (812) 636.8501	
8. Certification number AS25205		Name of asbestos hazard abatement specialist for project John D Coen Sr	
		Expiration 1/31/11	
9. Project information—Building name Ramsdell Quarry Landfill area of concern			
Address Ravenna Army Ammunition Plant		City Ravenna	State OH
Site location (specific) Soil (contaminated with ACM) within quarry		County Portage	
10. Project description			
Type of asbestos material	<input type="checkbox"/> surfacing	<input type="checkbox"/> mechanical	<input checked="" type="checkbox"/> other
Asbestos removal from	<input type="checkbox"/> pipe	<input type="checkbox"/> boiler	<input checked="" type="checkbox"/> other soil
Engineering controls	<input type="checkbox"/> AFD	<input type="checkbox"/> glove bag	<input checked="" type="checkbox"/> other exclusion zones and wet methods
11. Estimate of asbestos containing material			
linear feet	650 Cubic Yards of ACM soil		square feet
12. Abatement dates			
set up	08/18/10	abatement	08/18/10
completion (acm work only)	09/09/10		
Hours of operation 7am-4pm			
Days of the week	Monday	Tuesday	Wednesday
	X	X	X
			X
			X
			X
			X
			X
13. Approved landfill—Name American Landfill			EPA permit number
City Waynesburg			State OH
			Telephone number 330-866-3265
14. Name of person filing this notice Lora Frasier			Date 9/2/10

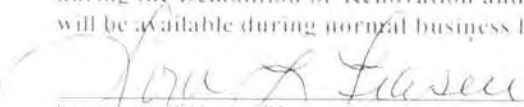
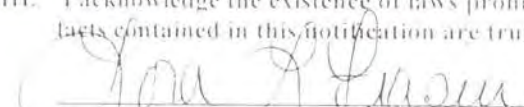
**OHIO ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF DEMOLITION AND RENOVATION**

Page 1 of 2

Operator Project #22765-03	Postmark	Date Received	Notification #																												
I. Type of Notification (check one): <input checked="" type="checkbox"/> Original <input type="checkbox"/> Revised <input type="checkbox"/> Canceled																															
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**OHIO ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF DEMOLITION AND RENOVATION**

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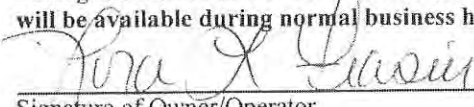
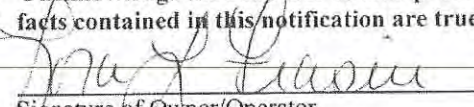
**OHIO ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF DEMOLITION AND RENOVATION**

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Ohio Asbestos Hazard Evaluation Specialist: <u>N/A</u> <div style="display: flex; justify-content: space-between;"> Name Certification # </div>							
VII. Approximate Amount of Asbestos Materials:							
	RACM to be Removed	Nonfriable Asbestos Material to be Removed		Nonfriable Asbestos Material NOT to be Removed			
		Category I	Category II	Category I	Category II		
Pipes (linear feet)							
Surface Area (square feet)							
Facility Components (cubic feet)		150 Cubic Yards of ACM soil					
VIII. Scheduled Dates Demolition or Renovation: Start: _____ Complete: _____							
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**OHIO ENVIRONMENTAL PROTECTION AGENCY
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OHIO ENVIRONMENTAL PROTECTION AGENCY NOTIFICATION OF DEMOLITION AND RENOVATION

Page 1 of 2

Operator Project #22765.03	Postmark	Date Received	Notification #
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I. Type of Notification (check one): ☐ Original ☒ Revised ☐ Canceled

II. Facility Description (include building name, number, and floor or room number)
 Building Name: Ramsdell Quarry Landfill area of concern
 Address: Ravenna Army Ammunition Plant
 City: Ravenna State: OHIO Zip Code: 44266 County: Portage
 Site Location (specific): Soil (contaminated with ACM) within quarry
 Building Size (square feet): Not applicable # of Floors: NA Age in Years: 50+ yrs
 Present Use: No current use - only surveyed and monitored Prior Use: Adjacent to closed landfill.

III. Type of Operation (check one): ☐ Demo ☐ Ordered Demo ☒ Renovation ☐ Emergency Renovation ☐ Fire Training

IV. Is Asbestos Present? (check one): ☒ Yes ☐ No

V. Facility Information
 Owner Name: Ravenna Army Ammunition Plant
 Address: 8451 State Route 5 State: OH Zip Code: 44266
 City: Ravenna Telephone: (330) 358-7312 Fax: (330) 358-2924
 Contact: Mark Patterson License # AC1701
 Removal Contractor Name: ToTest Inc
 Address: 508 W. Elmore State: IN Zip Code: 47562
 City: Odon Telephone: (812) 636-8501 Fax: (812) 636-7572
 Contact: Brian Morgan License # _____
 Other Operator (demolition/general): N/A
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Ohio Asbestos Hazard Evaluation Specialist: N/A Certification # _____
 Name: _____

VII. Approximate Amount of Asbestos Materials:

	RACM to be Removed	Nonfriable Asbestos Material to be Removed		Nonfriable Asbestos Material NOT to be Removed	
		Category I	Category II	Category I	Category II
Pipes (linear feet)					
Surface Area (square feet)					
Facility Components (cubic feet)					

VIII. Scheduled Dates Demolition or Renovation: Start: _____ Complete: _____

IX. Dates for Asbestos Removal (MM/DD/YY): Start: 8/18/10 Complete: 9/09/10

Days of the Week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Hours of Operation	7am-4pm	7am-4pm	7am-4pm	7am-4pm	7am-4pm		

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Appendix A-11. Manifest Log, Waste Profile, and Waste Manifests

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Ramsdell Quarry Landfill Remedial Action
Waste Manifest Log

Disposal Date	Type of Waste	Source/ Location	Date of Generation	Transporter	Truck License No.	Disposal Facility	Waste Profile No.	Manifest Document No.	Facility Quantity (tons)	Copy of manifest leaving site (Y/N)	Signed Manifest Rec'd (Y/N)	Signed Manifest to Regs (Y/N)	Notes
8/24/2010	Nonhaz	RQL	8/24/2010	WM- Chardon	PGK2183	American Landfill	109586OH	438136	13.08	Y	Y	Y	None
8/25/2010	Nonhaz	RQL	8/24/2010	WM- Chardon	PGK2183	American Landfill	109586OH	438137	7.38	Y	Y	Y	None
8/25/2010	Nonhaz	RQL	8/24/2010	WM- N.Jackson	PGP1835	American Landfill	109586OH	438138	14.63	Y	Y	Y	None
8/25/2010	Nonhaz	RQL	8/24/2010	WM- Chardon	PGK2183	American Landfill	109586OH	438139	14.80	Y	Y	Y	None
8/26/2010	Nonhaz	RQL	8/25/2010	WM- N.Jackson	PGP1835	American Landfill	109586OH	438140	13.41	Y	Y	Y	None
8/26/2010	Nonhaz	RQL	8/25/2010	WM- Chardon	PGK2183	American Landfill	109586OH	438141	10.16	Y	Y	Y	None
8/26/2010	Nonhaz	RQL	8/25/2010	WM- Chardon	PGK2183	American Landfill	109586OH	438166	14.01	Y	Y	Y	None
8/26/2010	Nonhaz	RQL	8/25/2010	WM- Chardon	PGK2183	American Landfill	109586OH	438167	11.59	Y	Y	Y	None
8/26/2010	Nonhaz	RQL	8/26/2010	WM- N.Jackson	PGP1835	American Landfill	109586OH	438168	12.95	Y	Y	Y	None
8/26/2010	Nonhaz	RQL	8/26/2010	WM- Chardon	PGK2183	American Landfill	109586OH	438169	10.70	Y	Y	Y	None
8/27/2010	Nonhaz	RQL	8/26/2010	WM/Sines	PHD2756	American Landfill	109586OH	438170	12.75	Y	Y	Y	None
8/27/2010	Nonhaz	RQL	8/26/2010	WM- Chardon	PGK2183	American Landfill	109586OH	438171	11.72	Y	Y	Y	None
8/30/2010	Nonhaz	RQL	8/30/2010	JMW Trucking	PVH3188	American Landfill	109586OH	438172	15.28	Y	Y	Y	None
8/30/2010	Nonhaz	RQL	8/30/2010	JMW Trucking	PVH3202	American Landfill	109586OH	438173	18.67	Y	Y	Y	None
8/30/2010	Nonhaz	RQL	8/25/2010	WM- Chardon	PGK2183	American Landfill	109586OH	438174	12.75	Y	Y	Y	None
8/31/2010	Nonhaz	RQL	8/30/2010	JMW Trucking	PHA1220	American Landfill	109586OH	438175	19.11	Y	Y	Y	None
8/30/2010	Nonhaz	RQL	8/30/2010	JMW Trucking	PVH3188	American Landfill	109586OH	438176	17.83	Y	Y	Y	None
8/31/2010	Nonhaz	RQL	8/31/2010	JMW Trucking	PVH3202	American Landfill	109586OH	438177	22.88	Y	Y	Y	None
8/31/2010	Nonhaz	RQL	8/31/2010	JMW Trucking	PVH3161	American Landfill	109586OH	438178	21.80	Y	Y	Y	None
8/31/2010	Nonhaz	RQL	8/31/2010	JMW Trucking	PVH3188	American Landfill	109586OH	438179	22.02	Y	Y	Y	None
8/31/2010	Nonhaz	RQL	8/31/2010	JMW Trucking	PHA1220	American Landfill	109586OH	438180	21.59	Y	Y	Y	None
8/31/2010	Nonhaz	RQL	8/31/2010	JMW Trucking	PVH3161	American Landfill	109586OH	438181	20.37	Y	Y	Y	None
8/31/2010	Nonhaz	RQL	8/31/2010	JMW Trucking	PVH3202	American Landfill	109586OH	438182	21.07	Y	Y	Y	None
8/31/2010	Nonhaz	RQL	8/31/2010	JMW Trucking	PVH3188	American Landfill	109586OH	438183	21.64	Y	Y	Y	None
8/31/2010	Nonhaz	RQL	8/31/2010	JMW Trucking	PVH3188	American Landfill	109586OH	438184	24.74	Y	Y	Y	None
9/1/2010	Nonhaz	RQL	9/1/2010	JMW Trucking	PVH3202	American Landfill	109586OH	438185	20.28	Y	Y	Y	None
9/1/2010	Nonhaz	RQL	9/1/2010	JMW Trucking	PVH3170	American Landfill	109586OH	438186	23.22	Y	Y	Y	None
9/1/2010	Nonhaz	RQL	9/1/2010	JMW Trucking	PVH3168	American Landfill	109586OH	438187	19.42	Y	Y	Y	None
9/1/2010	Nonhaz	RQL	8/24/2010	WM- Chardon	PGK2183	American Landfill	109586OH	438188	12.80	Y	Y	Y	None
9/1/2010	Nonhaz	RQL	9/1/2010	JMW Trucking	PVH3169	American Landfill	109586OH	438189	21.11	Y	Y	Y	None
9/1/2010	Nonhaz	RQL	9/1/2010	JMW Trucking	PVH3161	American Landfill	109586OH	196391	19.05	Y	Y	Y	None
9/1/2010	Nonhaz	RQL	9/1/2010	JMW Trucking	PVH3202	American Landfill	109586OH	196392	20.70	Y	Y	Y	None
9/1/2010	Nonhaz	RQL	9/1/2010	JMW Trucking	PVH3188	American Landfill	109586OH	196393	19.63	Y	Y	Y	None
9/1/2010	Nonhaz	RQL	9/1/2010	JMW Trucking	PVH3169	American Landfill	109586OH	196394	21.43	Y	Y	Y	None

Ramsdell Quarry Landfill Remedial Action
Waste Manifest Log

Disposal Date	Type of Waste	Source/ Location	Date of Generation	Transporter	Truck License No.	Disposal Facility	Waste Profile No.	Manifest Document No.	Facility Quantity (tons)	Copy of manifest leaving site (Y/N)	Signed Manifest Rec'd (Y/N)	Signed Manifest to Regs (Y/N)	Notes
9/1/2010	Nonhaz	RQL	9/1/2010	JMW Trucking	PVH3161	American Landfill	109586OH	196395	23.49	Y	Y	Y	None
9/2/2010	Nonhaz	RQL	9/1/2010	JMW Trucking	PVH3170	American Landfill	109586OH	196396	23.24	Y	Y	Y	None
9/3/2010	Nonhaz	RQL	8/24/2010	WM- Chardon	PGK2183	American Landfill	109586OH	196397	8.14	Y	Y	Y	None
9/2/2010	Nonhaz	RQL	9/1/2010	JMW Trucking	PVH3202	American Landfill	109586OH	196398	23.50	Y	Y	Y	None
9/2/2010	Nonhaz	RQL	9/2/2010	JMW Trucking	PVH3169	American Landfill	109586OH	196399	23.64	Y	Y	Y	None
9/2/2010	Nonhaz	RQL	9/2/2010	JMW Trucking	PVH3161	American Landfill	109586OH	196400	21.80	Y	Y	Y	None
9/2/2010	Nonhaz	RQL	9/2/2010	JMW Trucking	PVH3188	American Landfill	109586OH	196401	20.95	Y	Y	Y	None
9/2/2010	Nonhaz	RQL	9/2/2010	JMW Trucking	PVH3170	American Landfill	109586OH	196402	23.01	Y	Y	Y	None
9/2/2010	Nonhaz	RQL	9/2/2010	JMW Trucking	PVH3202	American Landfill	109586OH	196403	24.02	Y	Y	Y	None
9/2/2010	Nonhaz	RQL	8/24/2010	WM- Chardon	PGK2183	American Landfill	109586OH	196404	7.26	Y	Y	Y	None
9/2/2010	Nonhaz	RQL	9/2/2010	JMW Trucking	PVH3188	American Landfill	109586OH	196405	22.49	Y	Y	Y	None
9/2/2010	Nonhaz	RQL	9/2/2010	JMW Trucking	PVH3161	American Landfill	109586OH	196406	23.47	Y	Y	Y	None
9/3/2010	Nonhaz	RQL	9/2/2010	JMW Trucking	PVH3169	American Landfill	109586OH	196407	22.98	Y	Y	Y	None
9/3/2010	Nonhaz	RQL	9/2/2010	JMW Trucking	PVH3170	American Landfill	109586OH	196408	23.00	Y	Y	Y	None
9/3/2010	Nonhaz	RQL	9/2/2010	JMW Trucking	PVH3202	American Landfill	109586OH	196409	23.39	Y	Y	Y	None
9/3/2010	Nonhaz	RQL	8/24/2010	WM- Chardon	PGK2183	American Landfill	109586OH	196410	9.36	Y	Y	Y	None
9/3/2010	Nonhaz	RQL	9/3/2010	JMW Trucking	PVH3161	American Landfill	109586OH	196411	20.52	Y	Y	Y	None
9/3/2010	Nonhaz	RQL	9/3/2010	JMW Trucking	PVH3173	American Landfill	109586OH	196412	19.55	Y	Y	Y	None
9/3/2010	Nonhaz	RQL	9/3/2010	JMW Trucking	PVH3188	American Landfill	109586OH	196413	21.66	Y	Y	Y	None
9/3/2010	Nonhaz	RQL	9/3/2010	JMW Trucking	PVH3202	American Landfill	109586OH	196414	23.21	Y	Y	Y	None
9/3/2010	Nonhaz	RQL	9/3/2010	JMW Trucking	PVH3169	American Landfill	109586OH	196415	21.72	Y	Y	Y	None
9/7/2010	Nonhaz	RQL	8/24/2010	WM- Chardon	PGK2183	American Landfill	109586OH	196416	8.17	Y	Y	Y	None
9/3/2010	Nonhaz	RQL	9/3/2010	JMW Trucking	PVH3161	American Landfill	109586OH	196417	18.92	Y	Y	Y	None
9/7/2010	Nonhaz	RQL	8/25/2010	WM- Chardon	PGK2183	American Landfill	109586OH	196418	15.30	Y	Y	Y	None
9/8/2010	Nonhaz	RQL	8/24/2010	WM- Chardon	PGK2183	American Landfill	109586OH	196419	9.98	Y	Y	Y	None
9/8/2010	Nonhaz	RQL	8/24/2010	WM- Chardon	PGK2183	American Landfill	109586OH	196420	13.86	Y	Y	Y	None
9/9/2010	Nonhaz	RQL	8/24/2010	WM- Chardon	PGK2183	American Landfill	109586OH	196421	16.41	Y	Y	Y	None
9/9/2010	Nonhaz	RQL	8/25/2010	WM- Chardon	PGK2183	American Landfill	109586OH	196422	9.18	Y	Y	Y	None

1106.79

Generator's Nonhazardous Waste Profile Sheet



Requested Disposal Facility American Landfill Profile Number _____

☐ Renewal for Profile Number _____ Waste Approval Expiration Date _____

A. Waste Generator Facility Information (must reflect location of waste generation/origin)

1. Generator Name: Ravenna Army Ammunition Plant
2. Site Address: 8451 State Route 5
3. City/ZIP: Ravenna, OH 44288
4. State: OH
5. County: Portage
6. Contact Name/Title: Mark Patterson / Facility Manager
7. Email Address: mark.c.patterson@us.army.mil
8. Phone: 330-358-7312
9. FAX: 330-358-2924
10. NAICS Code: 92811
11. Generator USEPA ID #: OHD5210020738
12. State ID# (if applicable): N/A

B. Customer Information ☐ same as above

P. O. Number: _____

1. Customer Name: EQ-The Environmental Quality Company
2. Billing Address: 36255 Michigan Ave.
3. City, State and ZIP: Wayne, MI 48184
4. Contact Name: Jim Vigrass
5. Contact Email: jim.vigrass@eqonline.com
6. Phone: 734-899-6225
7. Transporter Name: _____
8. Transporter ID # (if appl.): _____
9. Transporter Address: _____
10. City, State and ZIP: _____

C. Waste Stream Information

1. DESCRIPTION

a. Common Waste Name: Ravenna Arsenal Non-Haz Soil (Ramsdell Quarry)

State Waste Code(s): None

b. Describe Process Generating Waste or Source of Contamination:

Contaminated soil from within Ramsdell Quarry Landfill. The areas from which the soil will be removed were used to burn waste explosives and dumping of liquid residues from annealing operations.

c. Typical Color(s): brown

d. Strong Odor? ☐ Yes ☒ No Describe: _____

e. Physical State at 70°F: ☒ Solid ☐ Liquid ☐ Powder ☐ Semi-Solid or Sludge ☐ Other: _____

f. Layers? ☒ Single layer ☐ Multi-layer ☐ NA

g. Water Reactive? ☐ Yes ☒ No If Yes, Describe: _____

h. Free Liquid Range (%): _____ to _____ ☒ NA(solid)

i. pH Range: ☐ ≤2 ☐ 2.1-12.4 ☐ ≥12.5 ☒ NA(solid) ☐ Actual: _____

j. Liquid Flash Point: ☐ < 140°F ☐ ≥ 140°F ☒ NA(solid) ☐ Actual: _____

k. Flammable Solid: ☐ Yes ☒ No

l. Physical Constituents: List all constituents of waste stream - (e.g. Soil 0-80%, Wood 0-20%): ☐ (See Attached)

Constituents (Total Composition Must be > 100%)		Lower Range	Unit of Measure	Upper Range	Unit of Measure
1. Soil		>92%			
2. Construction Debris		<5%			
3. Wood, vegetation, rocks		<2%			
4. PPE		<1%			
5. _____					
6. _____					

2. ESTIMATED QUANTITY OF WASTE AND SHIPPING INFORMATION

a. ☒ One Time Event ☐ Base ☐ Repeat Event

b. Estimated Annual Quantity: 2,400 ☒ Tons ☐ Cubic Yards ☐ Drums ☐ Gallons ☐ Other (specify): _____

c. Shipping Frequency: 95-110 loads Units per ☐ Month ☐ Quarter ☐ Year ☒ One Time ☐ Other

d. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If yes, answer e.) ☐ Yes ☒ No

e. USDOT Shipping Description (if applicable): _____

3. SAFETY REQUIREMENTS (Handling, PPE, etc.): _____



Generator's Nonhazardous Waste Profile Sheet

D. Regulatory Status (Please check appropriate responses)

1. Is this a USEPA (40 CFR Part 261)/State hazardous waste? If yes, contact your sales representative. ☐ Yes ☒ No
2. Is this waste included in one or more of categories below (Check all that apply)? If yes, attach supporting documentation. ☐ Yes ☒ No
 - ☐ Delisted Hazardous Waste
 - ☐ Excluded Wastes Under 40 CFR 261.4
 - ☐ Treated Hazardous Waste Debris
 - ☐ Treated Characteristic Hazardous Waste
3. Is the waste from a Federal (40 CFR 300, Appendix B) or state mandated clean-up? If yes, see instructions. ☒ Yes ☐ No
4. Does the waste represented by this waste profile sheet contain radioactive material? ☐ Yes ☒ No
 - a. If yes, is disposal regulated by the Nuclear Regulatory Commission? ☐ Yes ☐ No
 - b. If yes, is disposal regulated by a State Agency for radioactive waste/NORM? ☐ Yes ☐ No
5. Does the waste represented by this waste profile sheet contain concentrations of regulated Polychlorinated Biphenyls (PCBs)? ☐ Yes ☒ No
 - a. If yes, is disposal regulated under TSCA? ☐ Yes ☐ No
6. Does the waste contain untreated, regulated, medical or infectious waste? ☐ Yes ☒ No
7. Does the waste contain asbestos? ☐ Yes ☒ No If Yes, ☐ Friable ☐ Non Friable
8. Is this profile for remediation waste from a facility that is a major source of Hazardous Air Pollutants (Site Remediation NESHAP, 40 CFR 63 subpart GGGGG)? ☐ Yes ☒ No
If yes, does the waste contain <500 ppmw VOHAPs at the point of determination? ☐ Yes ☐ No

E. Generator Certification (Please read and certify by signature below)

By signing this Generator's Waste Profile Sheet, I hereby certify that all:

1. Information submitted in this profile and all attached documents contain true and accurate descriptions of the waste material;
2. Relevant information within the possession of the Generator regarding known or suspected hazards pertaining to this waste has been disclosed to WM/the Contractor;
3. Analytical data attached pertaining to the profiled waste was derived from testing a representative sample in accordance with 40 CFR 261.20(c) or equivalent rules; and
4. Changes that occur in the character of the waste (i.e. changes in the process or new analytical) will be identified by the Generator and disclosed to WM (and the Contractor if applicable) prior to providing the waste to WM (and the Contractor if applicable).
5. Check all that apply:

☐ Attached analytical pertains to the waste. Identify laboratory & sample ID #'s and parameters tested: _____

Pages: _____

☒ Only the analyses identified on the attachment pertain to the waste (identify by laboratory & sample ID #'s and parameters tested).

Attachment #: Attachment #1.2

☐ Additional information necessary to characterize the profiled waste has been attached (other than analytical).

Indicate the number of attached pages: _____

☐ I am an agent signing on behalf of the Generator, and the delegation of authority to me from the Generator for this signature is available upon request.

☐ By Generator process knowledge, the following waste is not a listed waste and is below all TCLP regulatory limits.

Certification Signature: Mark Patterson

Title: Facility Manager

Company Name: Ravenna AAP

Name (Print): Mark Patterson

Date: 6/7/10

FOR WM USE ONLY

Management Method: ☐ Landfill ☐ Bioremediation

Approval Decision: ☐ Approved ☐ Not Approved

☐ Non-hazardous solidification ☐ Other: _____

Waste Approval Expiration Date: _____

Management Facility Precautions, Special Handling Procedures or Limitation on approval: _____

☐ Shall not contain free liquid

☐ Shipment must be scheduled into disposal facility

☐ Approval Number must accompany each shipment

☐ Waste Manifest must accompany load

WM Authorization Name / Title: _____ Date: _____

State Authorization (if Required): _____ Date: _____

Generator's Nonhazardous Waste Profile Sheet

SAIC / Asbestos
RQL



Requested Disposal Facility _____ Profile Number: _____
☐ Renewal for Profile Number _____ Waste Approval Expiration Date _____

A. Waste Generator Facility Information (must reflect location of waste generation/origin)

1. Generator Name: Ravenna Army Ammunition Plant
 2. Site Address: 8451 State Route 5
 3. City/ZIP: Ravenna, OH 44288
 4. State: OH
 5. County: Portage
 6. Contact Name/Title: Mark Patterson / Facility Manager
 7. Email Address: mark.patterson@us.army.mil
 8. Phone: 330-358-7312 9. FAX: 330-358-2924
 10. NAICS Code: 92811
 11. Generator USEPA ID #: OHD5210020738
 12. State ID# (if applicable): N/A

B. Customer Information (same as above)

1. Customer Name: EQ-The Environmental Quality Co. 6. Phone: 404-494-3520 FAX: 404-494-3560
 2. Billing Address: 36255 Michigan Avenue 7. Transporter Name: _____
 3. City, State and ZIP: Wayne, MI 48184 8. Transporter ID # (if appl.): _____
 4. Contact Name: Claudine Clark 9. Transporter Address: _____
 5. Contact Email: claudine.clark@eqonline.com 10. City, State and ZIP: _____

C. Waste Stream Information

1. DESCRIPTION

a. Common Waste Name: Soil contaminated with debris and asbestos

State Waste Code(s): None

b. Describe Process Generating Waste or Source of Contamination:

Contaminated soil and asbestos containing debris from within Ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.

c. Typical Color(s): brown

d. Strong Odor? ☐ Yes ☒ No Describe: _____

e. Physical State at 70°F: ☒ Solid ☐ Liquid ☐ Powder ☐ Semi-Solid or Sludge ☐ Other: _____

f. Layers? ☒ Single layer ☐ Multi-layer ☐ NA

g. Water Reactive? ☐ Yes ☒ No If Yes, Describe: _____

h. Free Liquid Range (%): _____ to _____ ☒ NA(solid)

i. pH Range: ☐ <2 ☐ 2.1-12.4 ☐ >12.5 ☒ NA(solid) ☐ Actual: _____

j. Liquid Flash Point: ☐ < 140°F ☐ > 140°F ☒ NA(solid) ☐ Actual: _____

k. Flammable Solid: ☐ Yes ☒ No

l. Physical Constituents: List all constituents of waste stream - (e.g. Soil 0-80%, Wood 0-20%): ☐ (See Attached)

Constituents (Total Composition Must Be > 100%)	Lower Range	Unit of Measure	Upper Range	Unit of Measure
1. <u>Soil</u>	<u>50</u>	<u>% by volume</u>	<u>60</u>	<u>% by volume</u>
2. <u>Construction Debris with asbestos containing material</u>	<u>40</u>	<u>% by volume</u>	<u>50</u>	<u>% by volume</u>
3. <u>Wood, vegetation, rocks</u>	<u>5</u>	<u>% by volume</u>	<u>10</u>	<u>% by volume</u>
4. <u>PPE</u>	<u>0</u>	<u>% by volume</u>	<u>2</u>	<u>% by volume</u>
5. _____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____

2. ESTIMATED QUANTITY OF WASTE AND SHIPPING INFORMATION

a. ☒ One Time Event ☐ Base ☐ Repeat Event

b. Estimated Annual Quantity: 2,500 ☒ Tons ☐ Cubic Yards ☐ Drums ☐ Gallons ☐ Other (specify): _____

c. Shipping Frequency: 160 - 170 loads Units per ☐ Month ☐ Quarter ☐ Year ☒ One Time ☐ Other

d. Is this a U.S. Department of Transportation (USDOT) Hazardous Material? (If yes, answer e.) ☒ Yes ☐ No

e. USDOT Shipping Description (if applicable): RQ Asbestos, Class 9, NA2212, PGIII

3. SAFETY REQUIREMENTS (Handling, PPE, etc.): Respirator - air purifying with HEPA cartridge as required by landfill policy.



Generator's Nonhazardous Waste Profile Sheet

D. Regulatory Status (Please check appropriate responses)

1. Is this a USEPA (40 CFR Part 261)/State hazardous waste? If yes, contact your sales representative. ☐ Yes ☒ No
2. Is this waste included in one or more of categories below (Check all that apply)? If yes, attach supporting documentation. ☐ Yes ☒ No
 - ☐ Delisted Hazardous Waste
 - ☐ Excluded Wastes Under 40 CFR 261.4
 - ☐ Treated Hazardous Waste Debris
 - ☐ Treated Characteristic Hazardous Waste
3. Is the waste from a Federal (40 CFR 300, Appendix B) or state mandated clean-up? If yes, see instructions. ☒ Yes ☐ No
4. Does the waste represented by this waste profile sheet contain radioactive material? ☐ Yes ☒ No
 - a. If yes, is disposal regulated by the Nuclear Regulatory Commission? ☐ Yes ☐ No
 - b. If yes, is disposal regulated by a State Agency for radioactive waste/NORM? ☐ Yes ☐ No
5. Does the waste represented by this waste profile sheet contain concentrations of regulated Polychlorinated Biphenyls (PCBs)? ☐ Yes ☒ No
 - a. If yes, is disposal regulated under TSCA? ☐ Yes ☐ No
6. Does the waste contain untreated, regulated, medical or infectious waste? ☐ Yes ☒ No
7. Does the waste contain asbestos? ☒ Yes ☐ No If Yes, ☒ Friable ☐ Non Friable
8. Is this profile for remediation waste from a facility that is a major source of Hazardous Air Pollutants (Site Remediation NESHAP, 40 CFR 63 subpart GGGGG)? ☐ Yes ☒ No

If yes, does the waste contain <500 ppmw VOHAPs at the point of determination? ☐ Yes ☐ No

E. Generator Certification (Please read and certify by signature below)

By signing this Generator's Waste Profile Sheet, I hereby certify that all:

1. Information submitted in this profile and all attached documents contain true and accurate descriptions of the waste material;
2. Relevant information within the possession of the Generator regarding known or suspected hazards pertaining to this waste has been disclosed to WM/the Contractor;
3. Analytical data attached pertaining to the profiled waste was derived from testing a representative sample in accordance with 40 CFR 261.20(c) or equivalent rules; and
4. Changes that occur in the character of the waste (i.e. changes in the process or new analytical) will be identified by the Generator and disclosed to WM (and the Contractor if applicable) prior to providing the waste to WM (and the Contractor if applicable).
5. Check all that apply:
 - ☐ Attached analytical pertains to the waste. Identify laboratory & sample ID #'s and parameters tested: _____
 - ☒ Only the analyses identified on the attachment pertain to the waste (identify by laboratory & sample ID #'s and parameters tested). Attachment #: _____ # Pages: _____
 - ☐ Additional information necessary to characterize the profiled waste has been attached (other than analytical). Indicate the number of attached pages: _____
 - ☐ I am an agent signing on behalf of the Generator, and the delegation of authority to me from the Generator for this signature is available upon request.
 - ☐ By Generator process knowledge, the following waste is not a listed waste and is below all TCLP regulatory limits.

Certification Signature: Mark Patterson Jern

Title: Facility Mgr.

Company Name: Ravenna Army Ammunition Plant

Name (Print): Mark Patterson

Date: 7-2-10

FOR WM USE ONLY

Management Method: ☐ Landfill ☐ Bioremediation

Approval Decision: ☐ Approved ☐ Not Approved

☐ Non-hazardous solidification ☐ Other: _____

Waste Approval Expiration Date: _____

Management Facility Precautions, Special Handling Procedures or Limitation on approval:

- ☐ Shall not contain free liquid
- ☐ Shipment must be scheduled into disposal facility
- ☐ Approval Number must accompany each shipment
- ☐ Waste Manifest must accompany load

WM Authorization Name / Title: _____ Date: _____

State Authorization (if Required): _____ Date: _____

NON-HAZARDOUS WASTE MANIFEST

NO. 438136

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44288

Carrier: Waste Management

Vehicle No.: PGK 2183 / 4109433

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:
Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
1095860H	Soil Contaminated with Debris and Asbestos	20 yards	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patterson Jom

Date: 08/24/10

Transporter Signature: [Signature]

Date: 8-24-10

Disposal Facility Signature: 73 Brett Fuller

Date: 8/24/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438136

REGULATED ASBESTOS MATERIAL WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION			
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>			
II. Operator's Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Telephone: <u>()</u> Fax: <u>()</u>			
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>			
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>			
V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	<u>001</u>	<u>CM</u>	<u>20</u>
VIII. Special Handling Instructions and Additional Information <div style="text-align: center;">_____</div>			
IX. 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 government regulations.			
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 30%;"> <u>Mark Patterson jpm</u> Signature </div> <div style="width: 20%;"> <u>08/20/10</u> Date </div> <div style="width: 40%;"> <u>Mark Patterson, Facility Mgr.</u> Type or Print Name and Title </div> </div>			

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**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~W.M. NORTH JACKSON~~ CHARRON
 Address: 10237 CUTTS RD
 City: CHARRON OHIO State: OHIO Zip Code: 44024
 Telephone: () Fax: ()
 Signature: [Signature] Date: 8/24/10 Type or Print Name and Title: ROY W McFEE

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Telephone: () Fax: ()
 Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 8/24/10 Type or Print Name and Title: Brett Fuller Scales

NON-HAZARDOUS WASTE MANIFEST

NO. 438137

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44288

Carrier: Waste Management

Vehicle No.: PGK2183

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:
Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH	Soil Contaminated with Debris and Asbestos	20	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mary Patterson Jm

Date: 8/24/10

Transporter Signature: [Signature]

Date: 8/24/10

Disposal Facility Signature: [Signature]

Date: 8/28/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438137

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: _____ Address: _____ City: _____ State: _____ Zip Code: _____ Telephone: <u>()</u> Fax: <u>()</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 25%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 30%; padding: 5px; text-align: center;">Number</th> <th style="width: 40%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;"><u>001</u></td> <td style="text-align: center; padding: 5px;"><u>CM</u></td> <td style="text-align: center; padding: 5px;"><u>20</u></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	<u>001</u>	<u>CM</u>	<u>20</u>							
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**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON CALHOUN HAULING
 Address: 10237 CUFFS RD
 City: CALHOUN OHIO State: OHIO Zip Code: 44602
 Telephone: () Fax: ()
 Signature: [Signature] Date: 8-24-10 Type or Print Name and Title: ROY W MYERS

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Telephone: () Fax: ()
 Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 8-25-10 Type or Print Name and Title: R. Russ Seal Co

NON-HAZARDOUS WASTE MANIFEST

NO. 438138

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44288

Carrier: Waste Management

Vehicle No.: PGA835

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition Plant

TIC 297455

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
1095860H RQL	Soil Contaminated with Debris and Asbestos	20	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patterson JAm

Date: 08/25/10

Transporter Signature: Bob Baker

Date: 8/25/10

Disposal Facility Signature: Butt Fuller

Date: 8/25/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438138

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
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REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON
Address: 12201 COUNCIL DR.
City: NORTH JACKSON State: OKLAHOMA Zip Code: 74415
Telephone: (339) 538-3600 Fax: ()

Bob Baker 8-25-10 Bob Baker
Signature Date Type or Print Name and Title

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()

Signature Date Type or Print Name and Title

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Brett Fuller 8/25/10 Brett Fuller Scales
Signature Date Type or Print Name and Title

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438139

290758

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44288

Carrier: Waste Management

Vehicle No.: 1

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:
Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH RQL	Soil Contaminated with Debris and Asbestos	20	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patterson

Date: 08/25/10

Transporter Signature: [Signature]

Date: 8-25-10

Disposal Facility Signature: [Signature]

Date: 8 25 10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438139

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
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**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)
 Name: WM - NORTH JACKSON CARDON
 Address: 10237 CUTIS RD
 City: CARDON State: OHIO Zip Code: 44024
 Telephone: () Fax: ()
 Signature: [Signature] Date: 8-28-10 Type or Print Name and Title: ROL MYERS

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)
 Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Telephone: () Fax: ()
 Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 8-25-10 Type or Print Name and Title: R. Ruggs, Scale Op

NON-HAZARDOUS WASTE MANIFEST

NO. 438140

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44288

Carrier: Waste Management

Vehicle No.: PGP1835

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition Plant

Tic 299014

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
10355501	Soil Contaminated with Debris and Asbestos	20	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patterson JDM

Date: 08/25/10

Transporter Signature: [Signature]

Date: 8/25/10

Disposal Facility Signature: [Signature]

Date: 8/26/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438140

REGULATED ASBESTOS MATERIAL WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION											
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>											
II. Operator's Name: <u>Tolet</u> Address: <u>508 West Elm St</u> City: <u>Odun</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>											
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Number	Type										
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VIII. Special Handling Instructions and Additional Information 											
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REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON
Address: 12201 COMPTON
City: NORTH JACKSON State: OHIO Zip Code: 44415
Telephone: (330) 538-3600 Fax: ()
Signature: [Signature] Date: 8-25-10 Type or Print Name and Title: Bob Baker

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 8-26-10 Type or Print Name and Title: R. Ruess Scale Up

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438141

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44288

Carrier: Waste Management

Vehicle No.: PGK2183

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:
Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
1095860H RQL	Soil Contaminated with Debris and Asbestos	20 yds	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patterson

Date: 08/25/10

Transporter Signature: [Signature]

Date: 8/25/10

Disposal Facility Signature: [Signature]

Date: 8/26/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438141

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

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Number	Type																
FRIABLE ASBESTOS	001	CM															
VIII. Special Handling Instructions and Additional Information <div style="height: 80px;"></div>																	
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REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON C. H. R. on
Address: 10237 C. H. S. RD
City: CARVER OHIO State: OHIO Zip Code: 44824
Telephone: () Fax: ()
Signature: [Signature] Date: 8-25-10 Type or Print Name and Title: Ray M. R. E. L. S.

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 8-26-10 Type or Print Name and Title: R. R. E. S. C. A. L. E. O. P.

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438166

GENERATOR: #300246

DELIVER TO:

Ravenna Army Ammunition Plant

American Landfill 330-866-3265

8451 State Route 5

7916 Chapel St

Ravenna, OH 44288

Waynesburg, OH 44688

Carrier: Waste Management

Company Responsible for Disposal Charges:

Vehicle No.: PGK2183

Ravenna Army Ammunition Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
1095860H RQL	Soil Contaminated with Debris and Asbestos	20	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patterson HAM

Date: 8/26/10

Transporter Signature: [Signature] Roy McEEL

Date: 8/26/10

Disposal Facility Signature: Brett Fuller

Date: 8/26/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Toltest</u> Address: <u>508 West Elnora St</u> City: <u>Dion</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-4572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 25%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 30%; padding: 5px; text-align: center;">Number</th> <th style="width: 40%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">FRIABLE ASBESTOS</td> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">CM</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	CM							
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FRIABLE ASBESTOS	001	CM															
VIII. Special Handling Instructions and Additional Information <div style="text-align: center; height: 40px;"> </div>																	
IX. 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 government regulations.																	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u>Mark Patterson</u> Signature </div> <div style="text-align: center;"> <u>08/26/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson, Facility Mgr.</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON CHARDON

Address: 10237 CLYDE RD

City: CHARDON OHIO

Telephone: ()

State: OHIO

Zip Code: 44024

Fax: ()

Signature [Signature]

Date 08/26/10

Type or Print Name and Title ROSC W MYERS

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____

Address: _____

City: _____

Telephone: ()

State: _____

Zip Code: _____

Fax: ()

Signature _____

Date _____

Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature [Signature]

Date 8/26/10

Type or Print Name and Title Brett Fuller Scales

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438167

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Carrier: Waste Management

Vehicle No.: PGP1835

Company Responsible for Disposal Charges:

Ravenna Army Ammunition Plant

TLC 300388

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
1095860H ROL	Soil Contaminated with Debris and Asbestos	24	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
			Net Wt.
County: Portage			

Generator Signature: Mark Patterson HAM

Date: 08/26/10

Transporter Signature: Bob Baker

Date: 8/26/10

Disposal Facility Signature: Brett Faller

Date: 8/26/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438167

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Toltest</u> Address: <u>5008 West Elnora St</u> City: <u>OLON</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
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REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON
Address: 12201 COUNCIL DR
City: NORTH JACKSON State: GA Zip Code: 31107
Telephone: (334) 538-3600 Fax: ()
Signature: [Signature] Date: 08/26/10 Type or Print Name and Title: Bob Baker

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name:
Address:
City: State: Zip Code:
Telephone: () Fax: ()
Signature: Date: Type or Print Name and Title:

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 8/26/10 Type or Print Name and Title: Brett Fuller Scales

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438168

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: Waste Management

Vehicle No.: PGP1835

DELIVER TO:

American Landfill 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition
Plant

TIB 300875

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
1095860H RQL	Soil Contaminated with Debris and Asbestos	20	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patterson Jm

Date: 08/26/10

Transporter Signature: Bob Baker

Date: 8-26-10

Disposal Facility Signature: Brutt Fuller

Date: 8/26/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>T.H. Test</u> Address: <u>508 WEST ELORA ST</u> City: <u>Odon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LAND FILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
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REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON #PGP1835
Address: 12201 COUNCIL Dr
City: NORTH JACKSON State: OHIO Zip Code: 44415
Telephone: (330) 538-3600 Fax: ()
Signature: [Signature] Date: 08/26/10 Type or Print Name and Title: Bobb Baker

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 8/26/10 Type or Print Name and Title: Brett Fuller Scales

NON-HAZARDOUS WASTE MANIFEST

NO. 438169

300885
GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: Waste Management

Vehicle No.: PGP1835PGK2183

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
1095860H RQL	Soil Contaminated with Debris and Asbestos	20	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patterson

Date: 8/26/10

Transporter Signature: [Signature]

Date: 8-26-10

Disposal Facility Signature: Brett Fuller

Date: 8/26/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438169

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Test</u> Address: <u>508 West Elmora St</u> City: <u>Canton</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
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REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON CHANDON
Address: 10237 CUSH
City: CHANDON State: OHIO Zip Code: 45007
Telephone: () Fax: ()

[Signature] 8/26/10 Roy MYER
Signature Date Type or Print Name and Title

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Brett Fuller 8/26/10 Brett Fuller, Scates
Signature Date Type or Print Name and Title

NON-HAZARDOUS WASTE MANIFEST

NO. 438170

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44288

Carrier: Waste Management-Sines

Vehicle No.: PHD2756

SINES Trk# 33

DELIVER TO:

American Landfill 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition Plant

WMTK# 300592

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH ROL	Soil Contaminated with Debris and Asbestos	20	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patterson

Date: 8/27/10

Transporter Signature: Gary A. [Signature]

Date: 8/27/10

Disposal Facility Signature: [Signature]

Date: 8/27/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

4138170
Page 1 of 2

GENERATOR SECTION

I. Facility Name: RAVENNA ARMY AMMUNITION DEPOT
 Address: 8451 STATE ROUTE 5
 City: RAVENNA State: OH Zip Code: 44266
 Owner's Name: _____
 Telephone: (330) 358-7311 Fax: ()

II. Operator's Name: To/Host Inc
 Address: 508 West Elmara St.
 City: Codon State: IN Zip Code: 47562
 Telephone: (812) 636-8501 Fax: (812) 636-1572

III. Waste Disposal Site (WDS) Name: AMERICAN LANDFILL

"on-site" disposal ☒ Yes ☐ No

Physical Location:
 Address: 7916 CHAPEL STREET, SE
 City: WAYNESBURG State: OH Zip Code: 44688
 Telephone: (330) 866-3265 Fax: (330) 866-3709

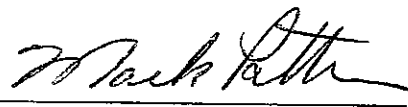
Mailing Address:
 City: _____ State: OH Zip Code: 44688
 Telephone: (330) 866-3265 Fax: (330) 866-3709

IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent)
 Name: NESHAP REGIONAL OFFICE
 Address: 77 WEST JACKSON BLVD
 City: CHICAGO State: IL Zip Code: 60604

V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	001	CM	20

VIII. Special Handling Instructions and Additional Information

IX. 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 government regulations.


 Date: 06/27/10
 Type or Print Name and Title: Mark Patterson Facility Mgr

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON

Address: _____

City: _____

State: _____

Zip Code: _____

Telephone: () _____

Fax: () _____

Signature *Gary Ross*

Date 8-27-10

Type or Print Name and Title GARY ROSS DRIVER

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Telephone: () _____

Fax: () _____

Signature _____

Date _____

Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature *R. Rugg*

Date 8-27-10

Type or Print Name and Title R. Rugg Site Op

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438171

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: Waste Management

Vehicle No.: PGK 2183

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH RAL	Soil Contaminated with Debris and Asbestos	20	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patterson gpm

Date: 08/27/10

Transporter Signature: Roy Myers

Date: 8-27-10

Disposal Facility Signature:

Date: 8-27-10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438171

REGULATED ASBESTOS MATERIAL WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION

I. Facility Name: RAVENNA ARMY AMMUNITION DEPOT
 Address: 8451 STATE ROUTE 5
 City: RAVENNA State: OH Zip Code: 44266
 Owner's Name: _____
 Telephone: (330) 358-7311 Fax: ()

II. Operator's Name: Toltest Inc
 Address: 508 West Elmore St.
 City: Codon State: IN Zip Code: 47562
 Telephone: (812) 636-8601 Fax: (812) 636-7572

III. Waste Disposal Site (WDS) Name: AMERICAN LANDFILL

"on-site" disposal ☒ Yes ☐ No

Physical Location:

Address: 7916 CHAPEL STREET, SE
 City: WAYNESBURG State: OH Zip Code: 44688
 Telephone: (330) 866-3265 Fax: (330) 866-3709

Mailing Address:

City: _____ State: OH Zip Code: 44688
 Telephone: (330) 866-3265 Fax: (330) 866-3709

IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent)
 Name: NESHAP REGIONAL OFFICE
 Address: 77 WEST JACKSON BLVD
 City: CHICAGO State: IL Zip Code: 60604

V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	001	CM	20

VIII. Special Handling Instructions and Additional Information

IX. 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 government regulations.

Mark Patterson 09/27/10 Mark Patterson Facility Mgr
 Signature Date Type or Print Name and Title

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON Chardon

Address: 16237 C.O.H.S. RD

City: Chardon

State: OH Zip Code: 44024

Telephone: ()

Fax: ()



Signature

08/27/10

Date

Roy W. Myers

Type or Print Name and Title

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Telephone: ()

Fax: ()

Signature _____

Date _____

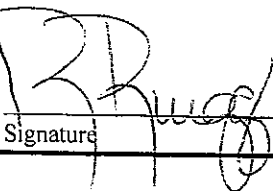
Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12



Signature

82710

Date

R. D. Rugg Seal Op

Type or Print Name and Title

NON-HAZARDOUS WASTE MANIFEST

NO. 438172

GENERATOR:

DELIVER TO:

Ravenna Army Ammunition Plant

American Landfill: 330-866-3265

8451 State Route 5

7916 Chapel St

Ravenna, OH 44288

Waynesburg, OH 44688

Carrier: JMW

Company Responsible for Disposal Charges:

Vehicle No.: PVH3188

Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH <i>RQL</i>	Soil Contaminated with Debris and Asbestos	DT 30	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patterson

Date: 08/30/10

Transporter Signature: [Signature]

Date: 8-30-10

Disposal Facility Signature: [Signature]

Date: 83010

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

REGULATED ASBESTOS MATERIAL WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION

I. Facility Name: RAVENNA ARMY AMMUNITION DEPOT
 Address: 8451 STATE ROUTE 5
 City: RAVENNA State: OH Zip Code: 44266
 Owner's Name: _____
 Telephone: (330) 358-7311 Fax: ()

II. Operator's Name: Taltest Inc
 Address: 503 West Elm St
 City: Oden State: IN Zip Code: 47562
 Telephone: (812) 636-8501 Fax: (812) 636-7572

III. Waste Disposal Site (WDS) Name: AMERICAN LANDFILL

"on-site" disposal ☒ Yes ☐ No

Physical Location:
 Address: 7916 CHAPEL STREET, SE
 City: WAYNESBURG State: OH Zip Code: 44688
 Telephone: (330) 866-3265 Fax: (330) 866-3709

Mailing Address:
 City: _____ State: OH Zip Code: 44688
 Telephone: (330) 866-3265 Fax: (330) 866-3709

IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent)
 Name: NESHAP REGIONAL OFFICE
 Address: 77 WEST JACKSON BLVD
 City: CHICAGO State: IL Zip Code: 60604

V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	<u>001</u>	<u>GM DT</u>	<u>8.30</u>

VIII. Special Handling Instructions and Additional Information

IX. 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 government regulations.

Mark Patterson 08/30/10 Mark Patterson Facility Mgr
 Signature Date Type or Print Name and Title

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)
Name: WM - NORTH JACKSON Trma PVH3188
Address: _____
City: Canton State: OH Zip Code: _____
Telephone: (614) 454-2428 Fax: ()
Signature: [Signature] Date: 8-30-10 Type or Print Name and Title: Randy

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)
Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 8-30-10 Type or Print Name and Title: Seale Q

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438173

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44288

Carrier: JMW

Vehicle No.: PVH 3202

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH	Soil Contaminated with Debris and Asbestos	30	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature:

Mark Patterson Jsm

Date:

08/30/10

Transporter Signature:

Mike Chaffee

Date:

8/30/10

Disposal Facility Signature:

QJ

Date:

8/30/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

438/73

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

GENERATOR SECTION			
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u>			
Address: <u>8451 STATE ROUTE 5</u>			
City: <u>RAVENNA</u>		State: <u>OH</u>	Zip Code: <u>44266</u>
Owner's Name:			
Telephone: <u>(330) 358-7311</u>		Fax: <u>()</u>	
II. Operator's Name: <u>ToHest Inc</u>			
Address: <u>508 West Elnora St.</u>			
City: <u>Olga</u>		State: <u>IN</u>	Zip Code: <u>47562</u>
Telephone: <u>(812) 636-8501</u>		Fax: <u>(812) 636-7572</u>	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u>			
"on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Physical Location:			
Address: <u>7916 CHAPEL STREET, SE</u>			
City: <u>WAYNESBURG</u>		State: <u>OH</u>	Zip Code: <u>44688</u>
Telephone: <u>(330) 866-3265</u>		Fax: <u>(330) 866-3709</u>	
Mailing Address:			
City: <u>Waynesburg</u>		State: <u>OH</u>	Zip Code: <u>44688</u>
Telephone: <u>(330) 866-3265</u>		Fax: <u>(330) 866-3709</u>	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent)			
Name: <u>NESHAP REGIONAL OFFICE</u>			
Address: <u>77 WEST JACKSON BLVD</u>			
City: <u>CHICAGO</u>		State: <u>IL</u>	Zip Code: <u>60604</u>
V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	<u>001</u>	<u>CMDT</u>	<u>30</u>
VIII. Special Handling Instructions and Additional Information			
IX. 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 government regulations.			
<u>Mark Patterson</u>		<u>Mark Patterson Facility Mgr</u>	
Signature		Type or Print Name and Title	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~Wm - North Jackson~~ JMW
Address: _____
City: Canton OH State: _____ Zip Code: _____
Telephone: () Fax: ()
Signature: Mike Wallace Date: 8/27/10 Type or Print Name and Title: Mike Wallace

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 8/30/10 Type or Print Name and Title: D. Myers Sales

NON-HAZARDOUS WASTE MANIFEST

NO. 438174

GENERATOR:

304164

DELIVER TO:

Ravenna Army Ammunition Plant

American Landfill 330-866-3265

8451 State Route 5

7916 Chapel St

Ravenna, OH 44288

Waynesburg, OH 44688

Carrier: Waste Management

Company Responsible for Disposal Charges:

Vehicle No.: RGK2183

Ravenna Army Ammunition Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH	Soil Contaminated with Debris and Asbestos	20	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature:

Mark Patterson Gen.

Date: 08/30/10

Transporter Signature:

[Signature]

Date: 8-30-10

Disposal Facility Signature:

Date: 8/30/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

438174

REGULATED ASBESTOS MATERIAL WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Toltest Inc</u> Address: <u>508 West Elnora Street</u> City: <u>Odon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-1572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 25%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 30%; padding: 5px; text-align: center;">Number</th> <th style="width: 40%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">CM</td> <td style="text-align: center; padding: 5px;">20</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	001	CM	20							
VI. Containers		VII. Total Quantity (cubic yards)															
Number	Type																
001	CM	20															
VIII. Special Handling Instructions and Additional Information <div style="height: 50px;"></div>																	
IX. 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 government regulations. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>08/30/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Mgr</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON CHARDON
Address: 10237 COTTIS RD
City: CHARDON OHIO State: OHIO Zip Code: 44024
Telephone: (440) 286-7116 Fax: ()
Signature: [Signature] Date: 8-30-10 Type or Print Name and Title: ROY W. WILFES

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 8-30-10 Type or Print Name and Title: K. R. Reg Scale Up

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST**NO. 438175****GENERATOR:**

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44288

Carrier: JMW TruckingVehicle No.: PHA1220**DELIVER TO:**

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH	Soil Contaminated with Debris and Asbestos	30	Gross Wt.
Exp Dt. 07/02/2011 ROL			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark PattenDate: 08/30/10Transporter Signature: Mark WatterpDate: 8-30-10Disposal Facility Signature: [Signature]Date: 8/31/10**ORIGINAL (TO BE MAILED BACK TO GENERATOR)**

438175

REGULATED ASBESTOS MATERIAL WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION

I. Facility Name: RAVENNA ARMY AMMUNITION DEPOT
 Address: 8451 STATE ROUTE 5
 City: RAVENNA State: OH Zip Code: 44268
 Owner's Name: _____
 Telephone: (330) 358-7311 Fax: ()

II. Operator's Name: Toltest Inc
 Address: 508 WESTFORD ST
 City: Don State: IN Zip Code: 47562
 Telephone: (812) 636-8541 Fax: (812) 636-7572

III. Waste Disposal Site (WDS) Name: AMERICAN LANDFILL

"on-site" disposal ☒ Yes ☐ No

Physical Location:
 Address: 7916 CHAPEL STREET, SE
 City: WAYNESBURG State: OH Zip Code: 44688
 Telephone: (330) 866-3265 Fax: (330) 866-3709

Mailing Address:
 City: _____ State: OH Zip Code: 44688
 Telephone: (330) 866-3265 Fax: (330) 866-3709

IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent)
 Name: NESHAP REGIONAL OFFICE
 Address: 77 WEST JACKSON BLVD
 City: CHICAGO State: IL Zip Code: 60604

V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	<u>001</u>	<u>CMST</u>	<u>30</u>

VIII. Special Handling Instructions and Additional Information

IX. 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 government regulations.

Mark Patterson 08/30/10 Mark Patterson Facility Mgr
 Signature Date Type or Print Name and Title

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 2 of 2

TRANSPORTER SECTION

X. **Transporter 1** (Acknowledgement of receipt of materials)
 Name: WJA - NORTH JACKSON^{ES} JMW Trucking
 Address: 519 45TH S.W.
 City: Canton State: OH Zip Code: 44706
 Telephone: (330) 484-2428 Fax: ()
 Signature: Mark Walters Date: 08/30/10 Type or Print Name and Title: MARK WALTERS

Rejected Materials (if any)	Destination

XI. **Transporter 2** (Acknowledgement of receipt of materials)
 Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 8/31/10 Type or Print Name and Title: R. Rugg Scale Op

NON-HAZARDOUS WASTE MANIFEST

NO. 438176

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: JMW TRUCKING

Vehicle No.: PVH3188

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH RQL	Soil Contaminated with Debris and Asbestos DT	30 yd	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature:

Mary Patten

Date: 08/30/10

Transporter Signature:

[Signature]

Date: 8-30-10

Disposal Facility Signature:

[Signature]

Date: 8-31-10


ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438176

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION

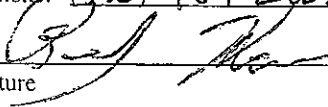
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u>			
Address: <u>8451 STATE ROUTE 5</u>			
City: <u>RAVENNA</u>		State: <u>OH</u>	Zip Code: <u>44288</u>
Owner's Name: _____			
Telephone: <u>(330) 358-7311</u>		Fax: <u>()</u>	
II. Operator's Name: <u>Taltest Inc</u>			
Address: <u>508 West Elmora St</u>			
City: <u>don</u>		State: <u>IN</u>	Zip Code: <u>47562</u>
Telephone: <u>(812) 636-8541</u>		Fax: <u>(812) 636-7572</u>	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u>			
"on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Physical Location:			
Address: <u>7916 CHAPEL STREET, SE</u>			
City: <u>WAYNESBURG</u>		State: <u>OH</u>	Zip Code: <u>44688</u>
Telephone: <u>(330) 866-3265</u>		Fax: <u>(330) 866-3709</u>	
Mailing Address:			
City: _____		State: <u>OH</u>	Zip Code: <u>44688</u>
Telephone: <u>(330) 866-3265</u>		Fax: <u>(330) 866-3709</u>	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent)			
Name: <u>NESHAP REGIONAL OFFICE</u>			
Address: <u>77 WEST JACKSON BLVD</u>			
City: <u>CHICAGO</u>		State: <u>IL</u>	Zip Code: <u>60604</u>
V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	<u>001</u>	<u>CMFBT</u>	<u>30</u>
VIII. Special Handling Instructions and Additional Information			
IX. 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 government regulations.			
 Signature		<u>08/30/10</u> Date	
_____ Type or Print Name and Title		<u>Mark Patterson</u> <u>Facility Mgr</u>	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~WMA NORTH JACKSON~~ JMW Trucking
Address: 519 45th St
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature:  Date: 08/30/10 Type or Print Name and Title: Randy

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

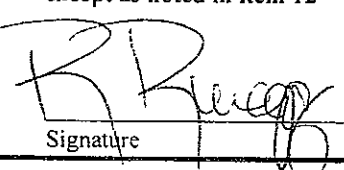
Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 8/31/10 Type or Print Name and Title: R. R. Reese, Seal Op

NON-HAZARDOUS WASTE MANIFEST

NO. 438177

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: BMW Trucking

Vehicle No.: PVH3202/67

DELIVER TO:

American Landfill 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
1095860H RQL	Soil Contaminated with Debris and Asbestos	30yd BT	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Porter

Date: 08/31/10

Transporter Signature: Mike Wallace

Date: 8/31/10

Disposal Facility Signature: [Signature]

Date: 8/31/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438177

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44286</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Toitest Inc</u> Address: <u>508 West Elnora St</u> City: <u>Ddon</u> State: <u>IN</u> Zip Code: <u>47522</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 25%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 30%; padding: 5px; text-align: center;">Number</th> <th style="width: 40%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">FRIABLE ASBESTOS</td> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">CM DT</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	CM DT							
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Number	Type																
FRIABLE ASBESTOS	001	CM DT															
VIII. Special Handling Instructions and Additional Information 																	
IX. 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 government regulations. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 30%;"> <u>Mark Patterson</u> Signature </div> <div style="width: 20%;"> <u>08/31/10</u> Date </div> <div style="width: 40%;"> <u>Mark Patterson Facility Mgr</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)
Name: WILLIAM J. JACKSON JMW Trucking #PVH3202
Address: 519 45th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax:
Signature: Mike Wallace Date: 08/31/10 Type or Print Name and Title: Mike Wallace

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)
Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: (____) _____ Fax: (____) _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: R. Rugg Date: 8/31/10 Type or Print Name and Title: R. Rugg Seal Co

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438178

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: JMW Trucking

Vehicle No.: PVH3161/14

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
1095860H <i>RQL</i>	Soil Contaminated with Debris and Asbestos	30 yd <i>BT</i>	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: *[Signature]*

Date: 08/31/10

Transporter Signature: *[Signature]*

Date: 8-31-10

Disposal Facility Signature: *[Signature]*

Date: 8/31/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438178

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Tallest Inc</u> Address: <u>508 West Elmora St</u> City: <u>Eden</u> State: <u>W</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-0541</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
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Number	Type																
001	CMPT	30															
VIII. Special Handling Instructions and Additional Information 																	
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REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials) #PVH3161
Name: ~~WILLIAM JACKSON~~ JMW Trucking
Address: 519 45th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484 2428 Fax: ()
Signature: Allen K. H. Date: 08/31/10 Type or Print Name and Title: Allen K. H. Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)
Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: R. Ruess Date: 8/31/10 Type or Print Name and Title: R. Ruess, Sale Q

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438179

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44286

Carrier: JMW Trucking

Vehicle No.: PVH 3188

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586 OH	Soil Contaminated with Debris and Asbestos <i>DT</i>	<i>30yd</i>	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage	<i>DT</i>		Net Wt.

Generator Signature: *Mark Patton*

Date: 08/31/10

Transporter Signature: *[Signature]*

Date: 8-31-10

Disposal Facility Signature: *[Signature]*

Date: 8/31/10

TSD FACILITY COPY

#438179

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION

I. Facility Name: RAVENNA ARMY AMMUNITION DEPOT
 Address: 8451 STATE ROUTE 5
 City: RAVENNA State: OH Zip Code: 44266
 Owner's Name: _____
 Telephone: (330) 358-7311 Fax: ()

II. Operator's Name: Toltest Inc
 Address: 508 West Elmora St
 City: Odin State: IN Zip Code: 47562
 Telephone: (812) 636-8501 Fax: (812) 636-7572

III. Waste Disposal Site (WDS) Name: AMERICAN LANDFILL

"on-site" disposal ☒ Yes ☐ No

Physical Location:

Address: 7916 CHAPEL STREET, SE
 City: WAYNESBURG State: OH Zip Code: 44688
 Telephone: (330) 866-3265 Fax: (330) 866-3709

Mailing Address:

City: _____ State: OH Zip Code: 44688
 Telephone: (330) 866-3265 Fax: (330) 866-3709

IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent)
 Name: NESHAP REGIONAL OFFICE
 Address: 77 WEST JACKSON BLVD
 City: CHICAGO State: IL Zip Code: 60604

V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	001	CM DT	30

VIII. Special Handling Instructions and Additional Information

IX. 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 government regulations.

Mark Patterson 08/31/10 Mark Patterson Facility Mgr
 Signature Date Type or Print Name and Title

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)
Name: ~~Wm. H. Jackson~~ SMW Trucking
Address: 519 45th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature: [Signature] Date: 8/31/10 Type or Print Name and Title: Randy Harmon

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)
Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____
Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 8/31/10 Type or Print Name and Title: John Scales

NON-HAZARDOUS WASTE MANIFEST

NO. 438180

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: JMW Trucking

Vehicle No.: PHA1220

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
1095860H ROL	Soil Contaminated with Debris and Asbestos DT	30yd	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patten Date: 08/31/10

Transporter Signature: Dennis Huggins Date: 8/31/10

Disposal Facility Signature: [Signature] Date: 8/31/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

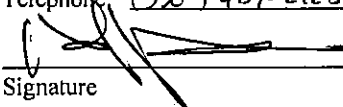
GENERATOR SECTION											
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>											
II. Operator's Name: <u>Toltest Inc</u> Address: <u>508 West Elmhurst St.</u> City: <u>Odon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>											
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>											
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Number	Type										
001	GADT										
FRIABLE ASBESTOS		330									
VIII. Special Handling Instructions and Additional Information <div style="height: 50px; border: 1px solid black;"></div>											
IX. 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 government regulations.											
 Signature	<u>08/31/10</u> Date	<u>Mark Patterson Facility Mgr</u> Type or Print Name and Title									

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~SEA NORTH JACKSON~~ TMW Trucking # PHA1220
 Address: 519 45th Street
 City: Canton State: OH Zip Code: 44706
 Telephone: (330) 434-2428 Fax: ()
 Signature:  Date: 08/31/10 Type or Print Name and Title: Dennis Huggins Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)


Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Telephone: () _____ Fax: () _____
 Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 8/31/10 Type or Print Name and Title: D. Ayers Scales

NON-HAZARDOUS WASTE MANIFEST

NO. 438181

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: TMW Trucking

Vehicle No.: PVH3161

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH <i>RQL</i>	Soil Contaminated with Debris and Asbestos <i>DT</i>	30yd	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature:

Mark Patten

Date: 08/31/10

Transporter Signature:

[Signature]

Date: 8-31-10

Disposal Facility Signature:

[Signature]

Date: 8/31/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION											
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44286</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>											
II. Operator's Name: <u>Taltest Inc</u> Address: <u>508 West Elmore Street</u> City: <u>Edon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>											
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>											
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>											
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Number	Type										
001	SDT										
FRIABLE ASBESTOS		34									
VIII. Special Handling Instructions and Additional Information <div style="height: 40px;"></div>											
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REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~WME NORTH BUCKS~~ Jmw Trucking # PVH3161
Address: 519 45th St.
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2478 Fax: ()
Signature: Allen Knish Date: 08/31/10 Type or Print Name and Title: Allen Knish Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)


Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 8/31/10 Type or Print Name and Title: James Scales

NON-HAZARDOUS WASTE MANIFEST

NO. 438182

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: IMW Trucking

Vehicle No.: PVH320Z

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
1095860H RQL	Soil Contaminated with Debris and Asbestos DT	30yd	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature:

Mark Patti

Date: 08/31/10

Transporter Signature:

Mike Walla

Date: 08/31/10

Disposal Facility Signature:

[Signature]

Date: 8/31/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438182

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

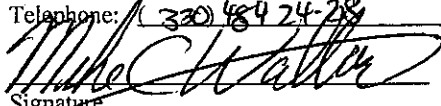
GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>To Hest Inc</u> Address: <u>568 West Elmora St.</u> City: <u>Odin</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
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IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 20%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 40%; padding: 5px; text-align: center;">Number</th> <th style="width: 20%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">FRIABLE ASBESTOS</td> <td style="padding: 5px; text-align: center;">001</td> <td style="padding: 5px; text-align: center;">30</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	30							
VI. Containers		VII. Total Quantity (cubic yards)															
Number	Type																
FRIABLE ASBESTOS	001	30															
VIII. Special Handling Instructions and Additional Information <div style="height: 50px; border: 1px solid black;"></div>																	
IX. 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 government regulations. <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>08/31/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Mgr</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~Wm. H. Jackson~~ JMW Trucking #PVH30DZ
Address: 519 45th St.
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature:  Date: 08/31/10 Type or Print Name and Title: Mike Wallace

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()

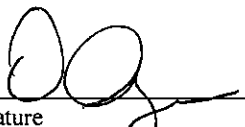
Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 8/31/10 Type or Print Name and Title: D. Ayers, Scale

NON-HAZARDOUS WASTE MANIFEST

NO. 438183

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: JMW Trucking

Vehicle No.: PVH3188

DELIVER TO:

American Landfill: 330-866-3265

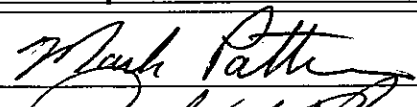
7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH RQL	Soil Contaminated with Debris and Asbestos DT	30 yd	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: 

Date: 08/31/10

Transporter Signature: 

Date: 8-31-10

Disposal Facility Signature: 

Date: 8/31/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

438/83

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

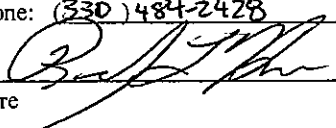
GENERATOR SECTION																
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																
II. Operator's Name: <u>To test Inc</u> Address: <u>508 West Elnora Street</u> City: <u>Don</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7172</u>																
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																
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<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u>Mark Patterson ydon</u> Signature </div> <div style="text-align: center;"> <u>08/31/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson, Facility Mgr.</u> Type or Print Name and Title </div> </div>																

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~W.M. NORTH JACKSON~~ JMW Trucking
Address: 519 45th St.
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature:  Date: 08/31/10 Type or Print Name and Title: Randy Harmon

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

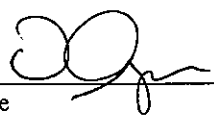
Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 8/31/10 Type or Print Name and Title: D. Ares Scales

NON-HAZARDOUS WASTE MANIFEST

NO. 438184

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: JMW Trucking

Vehicle No.: PHA1220

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
1095860H RQL	Soil Contaminated with Debris and Asbestos	30 yds	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature:

Mark Patten

Date: 08/31/10

Transporter Signature:

Dennis Huggins

Date: 8/31/10

Disposal Facility Signature:

[Signature]

Date: 8/31/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION

I. Facility Name: RAVENNA ARMY AMMUNITION DEPOT
 Address: 8451 STATE ROUTE 5
 City: RAVENNA State: OH Zip Code: 44266
 Owner's Name: _____
 Telephone: (330) 358-7311 Fax: ()

II. Operator's Name: Toltest Inc
 Address: 508 West Elnora Street
 City: Adon State: IN Zip Code: 47562
 Telephone: (812) 636-8501 Fax: (812) 636-7572

III. Waste Disposal Site (WDS) Name: AMERICAN LANDFILL

"on-site" disposal ☒ Yes ☐ No

Physical Location:

Address: 7916 CHAPEL STREET, SE
 City: WAYNESBURG State: OH Zip Code: 44688
 Telephone: (330) 866-3265 Fax: (330) 866-3709

Mailing Address:

City: _____ State: OH Zip Code: 44688
 Telephone: (330) 866-3265 Fax: (330) 866-3709

IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent)
 Name: NESHAP REGIONAL OFFICE
 Address: 77 WEST JACKSON BLVD
 City: CHICAGO State: IL Zip Code: 60604

V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	<u>001</u>	<u>DT</u>	<u>30</u>

VIII. Special Handling Instructions and Additional Information

IX. 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 government regulations.

Mark Patterson
 Signature

08/31/10
 Date

Mark Patterson Facility Mgr
 Type or Print Name and Title

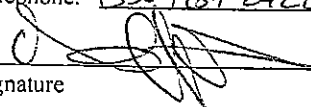
REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~John H. Huggins~~ JMW Trucking
Address: 519 45th St
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()

Signature:  Date: 08/31/10 Type or Print Name and Title: Dennis Huggins

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()

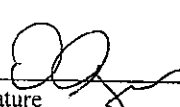
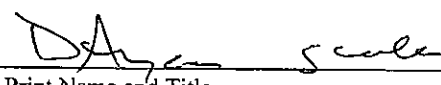
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 8/31/10 Type or Print Name and Title: 

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438185

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44366

Carrier: JM W Trucking

Vehicle No.: PVH3202

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH RoL	Soil Contaminated with Debris and Asbestos DI	30yd	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patten

Date: 09/01/10

Transporter Signature: Mike Wallace

Date: 8/1/10

Disposal Facility Signature: 12

Date: 9/1/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

438185

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Taltest</u> Address: <u>308 West Elmora St</u> City: <u>Odessa</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">VI. Containers</th> <th rowspan="2" style="text-align: center;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="text-align: center;">Number</th> <th style="text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">FRIABLE ASBESTOS</td> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">1 DT 30</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	1 DT 30							
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Number	Type																
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VIII. Special Handling Instructions and Additional Information <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>																	
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<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u>Mark Patterson Jim</u> Signature </div> <div style="text-align: center;"> <u>09/01/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Mgr.</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~152 #1~~ JMW Trucking
Address: 519 45th St.
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature: Mike Wallace Date: 09/01/10 Type or Print Name and Title: Mike Wallace

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()

Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: R. Ring Date: 9/1/10 Type or Print Name and Title: R. Ring Scale

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438186

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: JMW Trucking

Vehicle No.: PVH3170

DELIVER TO:

American Landfill: 330-866-3265

7946 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
10953860H	Soil Contaminated with Lead and Arsenic	30 yd	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: Mark Patten

Date: 09/01/10

Transporter Signature: [Signature]

Date: 9/1/10

Disposal Facility Signature: [Signature]

Date: 9/1/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438186

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2


GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>To/Rest</u> Address: <u>508 West Elmora St</u> City: <u>Odon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
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Number	Type																
FRIABLE ASBESTOS	001	DT DT															
VIII. Special Handling Instructions and Additional Information <div style="height: 40px; border: 1px solid black;"></div>																	
IX. 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 government regulations.																	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u>Mark Patterson JSM</u> Signature </div> <div style="text-align: center;"> <u>09/01/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson, Facility Mgr.</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~W.A. NORTH JACKSON~~ JMW Trucking
Address: 519 45th St
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature:  Date: 09/01/10 Type or Print Name and Title: GREG Johnson Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____ State: _____ Zip Code: _____
City: _____ Fax: ()
Telephone: ()

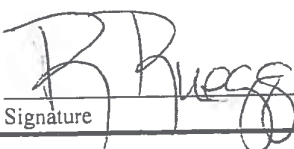
Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 9-1-10 Type or Print Name and Title: R. Ruess Sealer

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438187

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: IMW Trucking

Vehicle No.: PVH3168

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
109586OH	Soil Contaminated with Debris and Asbestos	DT 30yds	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature: 

Date: 09/01/10

Transporter Signature: 

Date: 9-1-10

Disposal Facility Signature: 

Date: 9/1/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438187

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

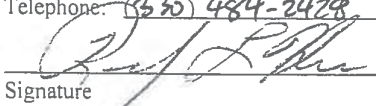
GENERATOR SECTION																
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: ()																
II. Operator's Name: <u>Toffest</u> Address: <u>508 West Elmwood</u> City: <u>Edon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																
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FRIABLE ASBESTOS	001	DT 30														
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REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~WILLIAM H. JAMES~~ JMW
Address: 519 45th St
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature:  Date: 9-1-10 Type or Print Name and Title: Randy Harmon

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

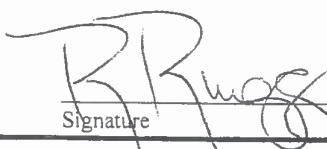
Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 9/1/10 Type or Print Name and Title: R. Ruess Seale
Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438188

GENERATOR:

300594

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

Carrier: Waste Management

Vehicle No.: PGK2183

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Company Responsible for Disposal Charges:

Ravenna Army Ammunition Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
RQL	Soil Contaminated with Debris and Asbestos	cm 20 yds	Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature:

Mark Patten

Date: 09/01/10

Transporter Signature:

Raj Mehta

Date: 9-1-10

Disposal Facility Signature:

Date: 9 1 10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438188

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>To Test Inc</u> Address: <u>508 West Elmora St.</u> City: <u>Ddon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-850A</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
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REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON CHADON
Address: 10239 Cott Rd
City: CHADON State: OHIO Zip Code: 431024
Telephone: (416) 286-7116 Fax: ()
Signature: [Signature] Date: 9-1-10 Type or Print Name and Title: Roy M. JED.

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name:
Address:
City: State: Zip Code:
Telephone: () Fax: ()
Signature: Date: Type or Print Name and Title:

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9-1-10 Type or Print Name and Title: R. Rugg Scale Op

Form Revised (11/12/97)

NON-HAZARDOUS WASTE MANIFEST

NO. 438189

GENERATOR:

Ravenna Army Ammunition Plant

8451 State Route 5

Ravenna, OH 44266

DELIVER TO:

American Landfill: 330-866-3265

7916 Chapel St

Waynesburg, OH 44688

Carrier: JMW Trucking

Vehicle No.: PVH3169

Company Responsible for Disposal Charges:
Ravenna Army Ammunition
Plant

Profile No.	Name of Waste Stream	Apx. Volume	Act. Weights
10000001	Soil Contaminated with Lead and Asbestos		Gross Wt.
Exp Dt. 07/02/2011			Tare Wt.
County: Portage			Net Wt.

Generator Signature:

Mark Patten

Date:

09/01/10

Transporter Signature:

Demetrius Huggins

Date:

9/1/10

Disposal Facility Signature:

[Signature]

Date:

9/1/10

ORIGINAL (TO BE MAILED BACK TO GENERATOR)

#438189

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

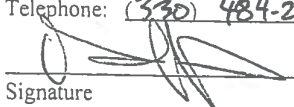
GENERATOR SECTION											
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44268</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>											
II. Operator's Name: <u>TO/TEST</u> Address: <u>508 WEST ELINGRA ST</u> City: <u>OHIO</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>											
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>											
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>											
V. Description of Materials	VI. Containers <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Number</th> <th style="width: 50%;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">001</td> <td style="text-align: center;">CA DT</td> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>		Number	Type	001	CA DT					VII. Total Quantity (cubic yards)
Number	Type										
001	CA DT										
FRIABLE ASBESTOS		30									
VIII. Special Handling Instructions and Additional Information <div style="border: 1px solid black; height: 40px; margin-top: 5px;"></div>											
IX. 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 government regulations.											
<u>Mark Patterson</u> Signature	<u>09/01/10</u> Date	<u>Mark Patterson, Facility Mgr.</u> Type or Print Name and Title									

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~WMA NORTH JARVIS~~ JMW Trucking
Address: 519 45th St
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature:  Date: 9/16/10 Type or Print Name and Title: Dennis Huggins Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()

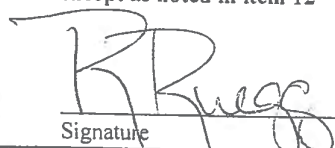
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 9/11/10 Type or Print Name and Title: R. Ruess Scale Op

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of		
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA		00196391		
4. Generator's Phone 330-358-7312				B. State Generator's ID				
5. Transporter 1 Company Name WM North Jackson Hauling JMW TRUCKING		6. US EPA ID Number		C. State Transporter's ID				
				D. Transporter's Phone 330-494-2428				
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID				
				F. Transporter's Phone				
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		G. State Facility ID				
				H. State Facility Phone 330-866-3265				
G E N E R A T O R	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments	
	a. Soil Contaminated with Debris and Asbestos		No.	Type	20	TONS		
	WM Profile # 1095860H		1	1				
	b.							
	WM Profile #							
c.								
WM Profile #								
d.								
WM Profile #								
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location						
		Cell		Level				
		Grid						
15. Special Handling Instructions and Additional Information								
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520				
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.								
Printed Name Mark Patterson		Signature "On behalf of" <i>Mark Patterson</i>			Month 09	Day 01	Year 10	
T R A N S P O R T E R	17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>Allen Knish</i>			Month 9	Day 1	Year 10
	Printed Name Allen Knish		Signature					
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature			Month	Day	Year	
F A C I L I T Y	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.							
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.							
Printed Name		Signature <i>[Signature]</i>			Month 9	Day 1	Year 10	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY
Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY
Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#001916391

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>To Host</u> Address: <u>508 West Elm St</u> City: <u>Colum</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
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REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~Waste Management~~ JMW Trucking
Address: 519 45th St
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature: *[Signature]* Date: 9-1-10 Type or Print Name and Title: Mike Knish Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: *[Signature]* Date: 9/1/10 Type or Print Name and Title: R. Ruess Scale Co

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266 PORTAGE COUNTY		A. Manifest Number WMNA		00196392			
4. Generator's Phone 330-358-7312				B. State Generator's ID					
5. Transporter 1 Company Name JMW TRUCKING WM North Jackson Hauling 3PVH3202		6. US EPA ID Number		C. State Transporter's ID					
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-481-2428					
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID					
				F. Transporter's Phone					
				G. State Facility ID					
				H. State Facility Phone 330-866-3265					
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
	a. Soil Contaminated with Debris and Asbestos		No.	Type					
	WM Profile # 109586OH		1	DT	20	TON			
	b.								
	WM Profile #								
c.									
WM Profile #									
d.									
WM Profile #									
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location							
		Cell		Level					
		Grid							
15. Special Handling Instructions and Additional Information									
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520					
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson		Signature "On behalf of" <i>Mark Patterson</i>				Month 09	Day 01	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name Mike Wallace		Signature <i>Mike Wallace</i>		Month 9	Day 1	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
Printed Name D. Ayers		Signature <i>D. Ayers</i>				Month 9	Day 1	Year 10	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#196392

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 1 of 2

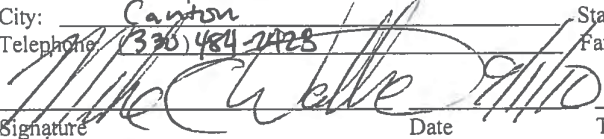
GENERATOR SECTION			
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u>			
Address: <u>8451 STATE ROUTE 5</u>			
City: <u>RAVENNA</u>		State: <u>OH</u>	Zip Code: <u>44266</u>
Owner's Name: _____			
Telephone: <u>(330) 358-7311</u>		Fax: <u>()</u>	
II. Operator's Name: <u>Teltest Inc</u>			
Address: <u>508 West Elmora Street</u>			
City: <u>Edon</u>		State: <u>IN</u>	Zip Code: <u>47562</u>
Telephone: <u>(812) 636-8501</u>		Fax: <u>(812) 636-7572</u>	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u>			
"on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Physical Location:			
Address: <u>7916 CHAPEL STREET, SE</u>			
City: <u>WAYNESBURG</u>		State: <u>OH</u>	Zip Code: <u>44688</u>
Telephone: <u>(330) 866-3265</u>		Fax: <u>(330) 866-3709</u>	
Mailing Address:			
City: _____		State: <u>OH</u>	Zip Code: <u>44688</u>
Telephone: <u>(330) 866-3265</u>		Fax: <u>(330) 866-3709</u>	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent)			
Name: <u>NESHAP REGIONAL OFFICE</u>			
Address: <u>77 WEST JACKSON BLVD</u>			
City: <u>CHICAGO</u>		State: <u>IL</u>	Zip Code: <u>60604</u>
V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	<u>001</u>	<u>DRUM</u>	<u>30</u>
VIII. Special Handling Instructions and Additional Information			
IX. 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 government regulations.			
<u>Mark Patterson</u>		<u>09/01/10</u>	<u>Mark Patterson Facility Mgr</u>
Signature		Date	Type or Print Name and Title

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~John H. Jackson~~ JMW Trucking
Address: 519 45th St.
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature:  Date: 9/1/10 Type or Print Name and Title

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()


Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 9-1-10 Type or Print Name and Title: D. Ayers S. Lee

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266		Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266 PORTAGE COUNTY		A. Manifest Number WMNA		00196393			
4. Generator's Phone 330-358-7312		5. Transporter 1 Company Name JMW Trucking WM North Jackson Hauling #PVA1388		6. US EPA ID Number		B. State Generator's ID			
7. Transporter 2 Company Name		8. US EPA ID Number		C. State Transporter's ID		D. Transporter's Phone 330 484-2423			
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone Transporter 2 Phone			
				G. State Facility ID		H. State Facility Phone 330-866-3265			
GENERATOR	11. Description of Waste Materials			12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments	
	a. Soil Contaminated with Debris and Asbestos WM Profile # 1095860H			No.	Type				
				1	DT	20	TON		
	b. WM Profile #								
	c. WM Profile #								
d. WM Profile #									
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.			K. Disposal Location						
			Cell		Level				
			Grid						
15. Special Handling Instructions and Additional Information									
Purchase Order #			EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520						
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson			Signature "On behalf of" Mark Patte				Month 09	Day 01	Year 10
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials								
	Printed Name Kandy Harmon		Signature Kandy Harmon		Month 9	Day 1	Year 10		
	18. Transporter 2 Acknowledgement of Receipt of Materials								
Printed Name			Signature		Month	Day	Year		
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
Printed Name D. Ayer			Signature D. Ayer				Month 3	Day 1	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#196393

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2


GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>T & Hest Inc</u> Address: <u>548 West Elmore St.</u> City: <u>Odon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="text-align: center; padding: 5px;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="text-align: center; padding: 5px;">Number</th> <th style="text-align: center; padding: 5px;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">FRIABLE ASBESTOS</td> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">30 DT</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	30 DT							
VI. Containers		VII. Total Quantity (cubic yards)															
Number	Type																
FRIABLE ASBESTOS	001	30 DT															
VIII. Special Handling Instructions and Additional Information 																	
IX. 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 government regulations.																	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>05/11/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Mgr</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~John H. HANSEN~~ JMW Trucking
Address: 519 45th St.
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature:  Date: Type or Print Name and Title: Randy Hanman

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____


Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 9-1-10 Type or Print Name and Title: Dayna S. [unclear]



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. 045210020736		Manifest Doc No.		2. Page 1 of			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266		Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266 PORTAGE COUNTY		A. Manifest Number WMNA		00196394			
4. Generator's Phone 330-358-7312				B. State Generator's ID					
5. Transporter 1 Company Name JMW Trucking WM North Jackson Hauling #PVH3169		6. US EPA ID Number		C. State Transporter's ID					
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-434-2428					
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID		State of Ohio			
				F. Transporter's Phone		Transporter's Phone			
				G. State Facility ID		State of Ohio			
				H. State Facility Phone		330-866-3265			
G E N E R A T O R	11. Description of Waste Materials			12. Containers		13. Total Quantity	14. Unit Wt./Vol.	1. Misc. Comments	
	a. Soil Contaminated with Debris and Asbestos WM Profile # 1095860H			No.	Type				
				1	DT	20	TBN		
	b. WM Profile #								
	c. WM Profile #								
d. WM Profile #									
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.			K. Disposal Location						
			Cell				Level		
			Grid						
15. Special Handling Instructions and Additional Information									
Purchase Order #			EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520						
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson			Signature On behalf of Mark Patterson				Month 09	Day 01	Year 10
T R A N S P O R T E R	17. Transporter 1 Acknowledgement of Receipt of Materials								
	Printed Name DENNIS HUGGINS		Signature [Signature]		Month 9		Day 1	Year 10	
	18. Transporter 2 Acknowledgement of Receipt of Materials								
Printed Name			Signature		Month		Day	Year	
F A C I L I T Y	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
	Printed Name [Signature]			Signature [Signature]		Month 9		Day 1	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#196394

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Toltest Inc.</u> Address: <u>508 West Elmora St</u> City: <u>Odin</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 20%; padding: 5px;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 30%; padding: 5px;">Number</th> <th style="width: 40%; padding: 5px;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">DT DT</td> <td style="text-align: center; padding: 5px;">30</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	001	DT DT	30							
VI. Containers		VII. Total Quantity (cubic yards)															
Number	Type																
001	DT DT	30															
VIII. Special Handling Instructions and Additional Information 																	
IX. 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 government regulations.																	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>09/01/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Mgr</u> Type or Print Name and Title </div> </div>																	

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~ISAAC H. JACKSON~~ JMW Trucking
 Address: 579 45th St.
 City: Canton State: OH Zip Code: 44706
 Telephone: (330) 484-2428 Fax: ()
 Signature: [Signature] Date: 9/1/10 Type or Print Name and Title: DEANISTUGGINS DRIVER

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9-1-10 Type or Print Name and Title: DAyer

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. 045210020736	Manifest Doc No.		2. Page 1 of				
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266 PORTAGE COUNTY		A. Manifest Number WMNA 00196395					
4. Generator's Phone 330-358-7312				B. State Generator's ID					
5. Transporter 1 Company Name JMW TRUCKING WM North Jackson Hauling PVH3161		6. US EPA ID Number		C. State Transporter's ID					
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-484-2428					
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID					
				F. Transporter's Phone					
				G. State Facility ID					
				H. State Facility Phone 330-866-3265					
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
	a. Soil Contaminated with Debris and Asbestos		No.	Type					
	WM Profile # 109586OH		1	DT	20	TON			
	b.								
	WM Profile #								
c.									
WM Profile #									
d.									
WM Profile #									
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location							
		Cell		Level					
		Grid							
15. Special Handling Instructions and Additional Information									
Purchase Order # _____ EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520									
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson		Signature "On behalf of" <i>Mark Patterson</i>			Month 09	Day 01	Year 10		
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name Allen Knish		Signature <i>Allen Knish</i>		Month 9	Day 1	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
	Printed Name D. Amner		Signature <i>D. Amner</i>			Month 9	Day 1	Year 10	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#196395

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

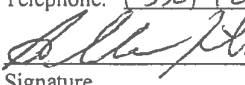
GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Tolltest Inc.</u> Address: <u>508 West Elnora St.</u> City: <u>Odon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
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V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">VI. Containers</th> <th rowspan="2" style="text-align: center;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="text-align: center;">Number</th> <th style="text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">FRIABLE ASBESTOS</td> <td style="text-align: center;">001</td> <td style="text-align: center;">30</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	30							
VI. Containers		VII. Total Quantity (cubic yards)															
Number	Type																
FRIABLE ASBESTOS	001	30															
VIII. Special Handling Instructions and Additional Information <div style="height: 80px; border: 1px solid black;"></div>																	
IX. 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 government regulations. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/1/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Mgr.</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~WMA NORTH JACKSON~~ JMW Trucking
Address: 519 45th St
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature:  Date: 9-1-10 Type or Print Name and Title: Allen Kaish Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)


Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 9-1-10 Type or Print Name and Title: D Ayers



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266 PORTAGE COUNTY		A. Manifest Number WMNA		00196396			
4. Generator's Phone 330-358-7312				B. State Generator's ID					
5. Transporter 1 Company Name JMW TRUCKING WM North Jackson Hauling		6. US EPA ID Number #PVH3170		C. State Transporter's ID					
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330 484 2428					
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID					
				F. Transporter's Phone					
				G. State Facility ID					
				H. State Facility Phone 330-866-3265					
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
	a. Soil Contaminated with Debris and Asbestos WM Profile # 1095860H		No.	Type					
			1	DT	20	BN			
	b.								
	WM Profile #								
	c.								
	WM Profile #								
	d.								
	WM Profile #								
	J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location						
15. Special Handling Instructions and Additional Information		Cell					Level		
		Grid							
Purchase Order #		EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520							
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson		Signature "On behalf of" Mark Patterson		Month 09	Day 01	Year 10			
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name Bill Johns		Signature [Signature]		Month 9	Day 1	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
Printed Name		Signature [Signature]		Month 9	Day 1	Year 10			

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Blue- GENERATOR #2 COPY

Yellow- GENERATOR #1 COPY


Pink- FACILITY USE ONLY

Gold- TRANSPORTER #1 COPY

#196396

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I.	Facility Name:	RAVENNA ARMY AMMUNITION DEPOT															
	Address:	8451 STATE ROUTE 5															
	City:	RAVENNA	State: OH Zip Code: 44266														
	Owner's Name:																
	Telephone:	(330) 358-7311	Fax: ()														
II.	Operator's Name:	Teltest Inc															
	Address:	504 West Elm St															
	City:	Olney	State: IL Zip Code: 47562														
	Telephone:	(812) 636-8501	Fax: (812) 636-7572														
III.	Waste Disposal Site (WDS) Name:	AMERICAN LANDFILL															
	"on-site" disposal	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No															
	Physical Location:																
	Address:	7916 CHAPEL STREET, SE															
	City:	WAYNESBURG	State: OH Zip Code: 44688														
	Telephone:	(330) 866-3265	Fax: (330) 866-3709														
	Mailing Address:																
	City:		State: OH Zip Code: 44688														
	Telephone:	(330) 866-3265	Fax: (330) 866-3709														
IV.	Responsible Agency (Local, District, State, or EPA Office where notification was sent)																
	Name:	NESHAP REGIONAL OFFICE															
	Address:	77 WEST JACKSON BLVD															
	City:	CHICAGO	State: IL Zip Code: 60604														
V.	Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">VI. Containers</th> <th rowspan="2" style="text-align: center;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="text-align: center;">Number</th> <th style="text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">FRIABLE ASBESTOS</td> <td style="text-align: center;">001</td> <td style="text-align: center;">DT DT</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	DT DT						
VI. Containers		VII. Total Quantity (cubic yards)															
Number	Type																
FRIABLE ASBESTOS	001	DT DT															
			30														
VIII. Special Handling Instructions and Additional Information																	
IX. 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 government regulations.																	
 Signature		09/01/10 Date	Mark Patterson, Facility Mgr. Type or Print Name and Title														


REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~519 45th St~~ JMW Trucking
Address: ~~519 45th St~~
City: Canton State: OH Zip Code: 44706
Telephone: (330) 494-2428 Fax: ()

Signature:  Date: 9/1/10 Type or Print Name and Title: GREG JONES DRIVER

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

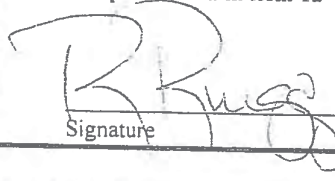
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 9/2/10 Type or Print Name and Title: R. Russ Seal of Office

Form Revised (11/12/97)



304621

Truck 409433

NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of					
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266		Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266 PORTAGE COUNTY		A. Manifest Number WMNA		00196397					
4. Generator's Phone 330-358-7312				B. State Generator's ID							
5. Transporter 1 Company Name WM North Jackson Hauling Chardon		6. US EPA ID Number		C. State Transporter's ID							
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 440-286-7116							
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID							
				F. Transporter's Phone							
				G. State Facility ID							
				H. State Facility Phone 330-866-3265							
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments				
	a. Soil Contaminated with Debris and Asbestos		No.	Type							
	WM Profile # 1095860H		1	CM	20	YD					
	b.										
	WM Profile #										
	c.										
TRANSPORTER	d.										
	WM Profile #										
	J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location								
			Cell		Level						
			Grid								
15. Special Handling Instructions and Additional Information											
Purchase Order # EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520											
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.											
Printed Name Mark Patterson		Signature "On behalf of" <i>Mark Patterson</i>				Month 9	Day 1	Year 10			
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name Ray Myers				Signature <i>Ray Myers</i>		Month 9	Day 1	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name				Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.										
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.										
	Printed Name				Signature <i>[Signature]</i>				Month 9	Day 2	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#196397

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Toltest Inc.</u> Address: <u>508 West Elmora St.</u> City: <u>Colum</u> State: <u>OH</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 20%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 30%; padding: 5px; text-align: center;">Number</th> <th style="width: 30%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">CM</td> <td style="text-align: center; padding: 5px;">20 yds</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	001	CM	20 yds							
VI. Containers		VII. Total Quantity (cubic yards)															
Number	Type																
001	CM	20 yds															
VIII. Special Handling Instructions and Additional Information 																	
IX. 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 government regulations.																	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/1/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson, Facility Mgr</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WIM - NORTH JACKSON C. Haddon
Address: 10237 CUTS R
City: CALIFORNIA State: OHIO Zip Code: 44024
Telephone: (440) 286-7116 Fax: ()
Signature: [Signature] Date: 9-1-10 Type or Print Name and Title: ROY M. JERS -

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9/2/10 Type or Print Name and Title: R. Rugg Seal

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. 045210020736		Manifest Doc No.		2. Page 1 of 1	
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266 PORTAGE COUNTY		A. Manifest Number WMNA		00196398	
4. Generator's Phone 330-358-7312				B. State Generator's ID			
5. Transporter 1 Company Name JMW Trucking WM North Jackson Hauling		6. US EPA ID Number		C. State Transporter's ID			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-484-2428			
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID			
				F. Transporter's Phone			
				G. State Facility ID			
				H. State Facility Phone 330-866-3265			
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments
	a. Soil Contaminated with Debris and Asbestos WM Profile # 109586OH		No.	Type			
			1	DT	20	TON	
	b.						
	WM Profile #						
TRANSPORTER	c.						
	WM Profile #						
	d.						
	WM Profile #						
	J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location				
FACILITY			Cell		Level		
			Grid				
	15. Special Handling Instructions and Additional Information						
	Purchase Order # EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520						
	16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.						
TRANSPORTER	Printed Name Mark Patterson		Signature "On behalf of"		Month	Day	Year
					9	1	10
	17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Month	Day	Year
	Printed Name Mike Wallace				9	1	10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month	Day	Year
FACILITY	Printed Name		Signature		Month	Day	Year
	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.						
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.						
	Printed Name		Signature		Month	Day	Year
				9	2	10	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#196398

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION			
I. Facility Name: RAVENNA ARMY AMMUNITION DEPOT Address: 8451 STATE ROUTE 5 City: RAVENNA State: OH Zip Code: 44288 Owner's Name: Telephone: (330) 358-7311 Fax: ()			
II. Operator's Name: TOLTEST INC Address: 508 WEST ELORA ST City: OREM State: IN Zip Code: 47562 Telephone: (812) 636-8501 Fax: (812) 636-7572			
III. Waste Disposal Site (WDS) Name: AMERICAN LANDFILL "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: 7916 CHAPEL STREET, SE City: WAYNESBURG State: OH Zip Code: 44688 Telephone: (330) 866-3265 Fax: (330) 866-3709 Mailing Address: City: OH Zip Code: 44688 Telephone: (330) 866-3265 Fax: (330) 866-3709			
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: NESHAP REGIONAL OFFICE Address: 77 WEST JACKSON BLVD City: CHICAGO State: IL Zip Code: 60604			
V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	001	DT	30
VIII. Special Handling Instructions and Additional Information			
IX. 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 government regulations. <div style="display: flex; justify-content: space-between;"><div>Signature <u>Mark Patterson</u></div><div>Date <u>09/01/10</u></div><div>Type or Print Name and Title <u>Mark Patterson Facility Mgr</u></div></div>			

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~WILLIAM J. JACKSON~~ JMW Trucking
Address: 519 45th St
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature: *Mike Wallace* Date: 9/1/10 Type or Print Name and Title: Mike Wallace

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()

Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: *RRuegg* Date: 9/2/10 Type or Print Name and Title: RRuegg Seal Op

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of 1				
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266 PORTAGE COUNTY		A. Manifest Number WMNA		00196399				
4. Generator's Phone 330-358-7312				B. State Generator's ID						
5. Transporter 1 Company Name JMW TRUCKING WM North Jackson Hauling		6. US EPA ID Number APVH3169		C. State Transporter's ID						
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-484-2428						
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID						
				F. Transporter's Phone						
				G. State Facility ID						
				H. State Facility Phone 330-866-3265						
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments			
	a. Soil Contaminated with Debris and Asbestos		No.	Type						
	WM Profile # 1095860H		1	DT	20	TON				
	b.									
	WM Profile #									
TRANSPORTER	c.									
	WM Profile #									
	d.									
	WM Profile #									
	J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location							
		Cell	Level							
		Grid								
15. Special Handling Instructions and Additional Information										
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520						
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.										
Printed Name Mark Patterson		Signature "On behalf of" <i>Mark Patterson</i>			Month 9	Day 2	Year 10			
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name Dennis Huggins			Signature <i>Dennis Huggins</i>		Month 9	Day 2	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name			Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.									
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.									
Printed Name D. Green		Signature <i>D. Green</i>			Month 9	Day 2	Year 10			

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#196399

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44268</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Tollett Inc.</u> Address: <u>508 WEST E 10th ST.</u> City: <u>Colum</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="text-align: center; padding: 5px;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="text-align: center; padding: 5px;">Number</th> <th style="text-align: center; padding: 5px;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">DT DT</td> <td style="text-align: center; padding: 5px;">30</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	001	DT DT	30							
VI. Containers		VII. Total Quantity (cubic yards)															
Number	Type																
001	DT DT	30															
VIII. Special Handling Instructions and Additional Information 																	
IX. 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 government regulations. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u>Mark Patterson</u> Signature </div> <div style="text-align: center;"> <u>09/02/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Mgr</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~John H. Jackson~~ JMW Trucking
Address: 519 45th St.
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()

Signature: [Signature] Date: 9/2/10 Type or Print Name and Title: Dennis Huggins Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9-2-10 Type or Print Name and Title: D Myers Scuba

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH 5210020736		Manifest Doc No.		2. Page 1 of 1		
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA 00196400				
				B. State Generator's ID				
4. Generator's Phone 330-358-7312		5. Transporter 1 Company Name JMW TRUCKING WM-North-Jackson Hauling PVH3161		6. US EPA ID Number		C. State Transporter's ID		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-404-2425		E. State Transporter's ID		
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		F. Transporter's Phone		G. State Facility ID		
				H. State Facility Phone 330-866-3265				
G E N E R A T O R	11. Description of Waste Materials			12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments
	a. Soil Contaminated with Debris and Asbestos			No.	Type			
	WM Profile # 1095860H			1	DT	20	TON	
	b.							
	WM Profile #							
c.								
WM Profile #								
d.								
WM Profile #								
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.				K. Disposal Location				
				Cell		Level		
				Grid				
15. Special Handling Instructions and Additional Information								
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520				
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.								
Printed Name Mark Patterson				Signature "On behalf of" <i>Mark Patterson</i>		Month 9	Day 2	Year 10
T R A N S P O R T E R	17. Transporter 1 Acknowledgement of Receipt of Materials							
	Printed Name Allen Knish		Signature <i>Allen Knish</i>		Month 9	Day 2	Year 10	
18. Transporter 2 Acknowledgement of Receipt of Materials								
Printed Name				Signature		Month	Day	Year
F A C I L I T Y	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.							
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.							
Printed Name				Signature <i>[Signature]</i>		Month 1	Day 2	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY
Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY
Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#196400

REGULATED ASBESTOS MATERIAL WASTE SHIPMENT RECORD

Page 1 of 2

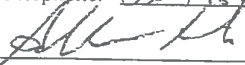
GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Tottest Inc</u> Address: <u>508 West Elmore St.</u> City: <u>Indian</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8541</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LAND FILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="text-align: center; padding: 5px;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="text-align: center; padding: 5px;">Number</th> <th style="text-align: center; padding: 5px;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">FRIABLE ASBESTOS</td> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">DT DT</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	DT DT							
VI. Containers		VII. Total Quantity (cubic yards)															
Number	Type																
FRIABLE ASBESTOS	001	DT DT															
VIII. Special Handling Instructions and Additional Information 																	
IX. 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 government regulations. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/2/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Mgr.</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~Wm North Jackson~~ JMW TRUCKING
Address: 519 1/2 Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature:  Date: 9-2-10 Type or Print Name and Title: Allen Knisk Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()

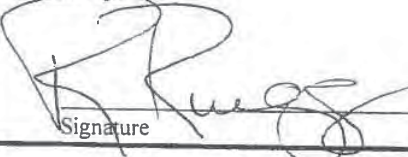
Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest
except as noted in item 12

Signature:  Date: 9-2-10 Type or Print Name and Title: R. Ruess Safety

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH521002A736		Manifest Doc No.		2. Page 1 of 1			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44286		Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44286 PORTAGE COUNTY		A. Manifest Number WMNA		00196401			
4. Generator's Phone 330-358-7312				B. State Generator's ID					
5. Transporter 1 Company Name WM-North-Jackson-Hauling		6. US EPA ID Number PAH388		C. State Transporter's ID					
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-484-2428					
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID					
				F. Transporter's Phone					
				G. State Facility ID					
				H. State Facility Phone 330-866-3265					
G E N E R A T O R	11. Description of Waste Materials			12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments	
	a. Soil Contaminated with Debris and Asbestos			No.	Type				
	WM Profile # 109586OH			1	DT	20	TON		
	b.								
	WM Profile #								
c.									
WM Profile #									
d.									
WM Profile #									
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.			K. Disposal Location						
			Cell		Level				
			Grid						
15. Special Handling Instructions and Additional Information									
Purchase Order # _____ EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520									
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson			Signature "On behalf of" <i>[Signature]</i>			Month 9	Day 2	Year 10	
T R A N S P O R T E R	17. Transporter 1 Acknowledgement of Receipt of Materials			Signature <i>[Signature]</i>			Month 9	Day 2	Year 10
	Printed Name Larry Anderson			Signature <i>[Signature]</i>			Month 9	Day 2	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials			Signature			Month	Day	Year
Printed Name			Signature			Month	Day	Year	
F A C I L I T Y	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
	Printed Name			Signature <i>[Signature]</i>			Month 9	Day 2	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY
Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY
Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#196401

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 1 of 2

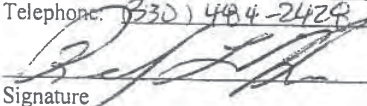
GENERATOR SECTION			
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44286</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>			
II. Operator's Name: <u>Toltest Inc</u> Address: <u>548 West Elmore St.</u> City: <u>Dan</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(922) 636-8541</u> Fax: <u>(922) 636-7572</u>			
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>			
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>			
V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	<u>001</u>	<u>DT</u>	<u>30</u>
VIII. Special Handling Instructions and Additional Information 			
IX. 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 government regulations. <div style="display: flex; justify-content: space-between;"><div><u>Mark Patten</u> Signature</div><div><u>9/2/10</u> Date</div><div><u>Mark Patten on Facility Mgr</u> Type or Print Name and Title</div></div>			

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~North Jackson TML Trucking~~
Address: 519 45th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 494-2428 Fax: ()
Signature:  Date: 9-20-10 Type or Print Name and Title: Randy Herman

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature

Date

Type or Print Name and Title

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. 045210020736		Manifest Doc No.		2. Page 1 of			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266		Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA		00196402			
4. Generator's Phone 330-358-7312				B. State Generator's ID					
5. Transporter 1 Company Name JMW Trucking WM North Jackson Hauling #FVH3170		6. US EPA ID Number		C. State Transporter's ID					
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 3304842428					
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID					
				F. Transporter's Phone					
				G. State Facility ID					
				H. State Facility Phone 330-866-3265					
G E N E R A T O R	11. Description of Waste Materials			12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments	
	a. Soil Contaminated with Debris and Asbestos			No.	Type				
	WM Profile # 1095860H			1	DT	20	T		
	b.								
	WM Profile #								
c.									
WM Profile #									
d.									
WM Profile #									
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.				K. Disposal Location					
				Cell		Level			
				Grid					
15. Special Handling Instructions and Additional Information									
Purchase Order # _____ EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520									
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson				Signature "On behalf of" <i>Mark Patterson</i>			Month 9	Day 2	Year 10
T R A N S P O R T E R	17. Transporter 1 Acknowledgement of Receipt of Materials								
	Printed Name GREG JOHNS		Signature <i>Greg Johns</i>		Month 9	Day 2	Year 10		
	18. Transporter 2 Acknowledgement of Receipt of Materials								
Printed Name		Signature		Month	Day	Year			
F A C I L I T Y	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
	Printed Name D. Jones		Signature <i>D. Jones</i>			Month 9	Day 2	Year 10	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#196402

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

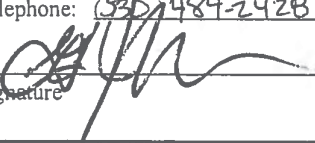
GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44268</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>ToHeg Inc</u> Address: <u>508 West Elmora</u> City: <u>Cedar</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(312) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 20%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 40%; text-align: center; padding: 5px;">Number</th> <th style="width: 20%; text-align: center; padding: 5px;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">FRIABLE ASBESTOS</td> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">001 DT 30</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	001 DT 30							
VI. Containers		VII. Total Quantity (cubic yards)															
Number	Type																
FRIABLE ASBESTOS	001	001 DT 30															
VIII. Special Handling Instructions and Additional Information 																	
IX. 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 government regulations.																	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/2/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Mgr</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~444 NORTH JACKSON~~ JMW TRUCKING
Address: 519 45th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature:  Date: 9/2/10 Type or Print Name and Title: GREG JONES DRIVER

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()


Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 9-2-10 Type or Print Name and Title: D. Ayers Sales

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

67

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of		
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266		Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266 PORTAGE COUNTY		A. Manifest Number WMNA		00196403		
4. Generator's Phone 330-358-7312		5. Transporter 1 Company Name JMW TRUCKING		6. US EPA ID Number		B. State Generator's ID		
WM North Jackson Hauling		# PVB202				C. State Transporter's ID		
7. Transporter 2 Company Name		8. US EPA ID Number				D. Transporter's Phone 330-484-2428		
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number				E. State Transporter's ID		
						F. Transporter's Phone		
						G. State Facility ID		
						H. State Facility Phone 330-866-3265		
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments	
	a. Soil Contaminated with Debris and Asbestos		No.	Type				
	WM Profile # 1095860H		1	DT	20	TON		
	b.							
	WM Profile #							
	c.							
TRANSPORTER	WM Profile #							
	d.							
	WM Profile #							
	J. Additional Descriptions for Materials Listed Above		K. Disposal Location					
	Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.							
15. Special Handling Instructions and Additional Information		Cell					Level	
		Grid						
Purchase Order #		EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520						
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.								
Printed Name Mark Patterson		Signature "On behalf of" <i>Mark Patterson</i>				Month 9	Day 2	Year 10
17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name Mike Wallace				Signature <i>Mike Wallace</i>		
						Month 9	Day 2	Year 10
18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name				Signature		
						Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.							
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.							
	Printed Name <i>[Signature]</i>		Signature <i>[Signature]</i>				Month 9	Day 2

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

#0196403

GENERATOR SECTION																
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																
II. Operator's Name: <u>To/Hest Inc</u> Address: <u>508 West Elmora St.</u> City: <u>Odon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 20%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 30%; padding: 5px; text-align: center;">Number</th> <th style="width: 40%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">FRIABLE ASBESTOS</td> <td style="padding: 5px; text-align: center;">001</td> <td style="padding: 5px; text-align: center;">001 DT 30</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	001 DT 30						
VI. Containers		VII. Total Quantity (cubic yards)														
Number	Type															
FRIABLE ASBESTOS	001	001 DT 30														
VIII. Special Handling Instructions and Additional Information 																
IX. 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 government regulations.																
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/2/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Mgr</u> Type or Print Name and Title </div> </div>																

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~Wm. North Jackson~~ JMW Trucking
Address: 519 45th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature: Mike Wallace Date: 9/6/00 Type or Print Name and Title: Mike Wallace

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9-2-00 Type or Print Name and Title: D. Ayers Sec



302246

409433

NON-HAZARDOUS MANIFEST

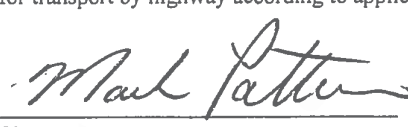
NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. 045210020736		Manifest Doc No.		2. Page 1 of			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44286		Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44286 PORTAGE COUNTY		A. Manifest Number WMNA 00196404		B. State Generator's ID			
4. Generator's Phone 330-358-7312		5. Transporter 1 Company Name CHARDON WM North Jackson Hauling		6. US EPA ID Number		C. State Transporter's ID			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone		E. State Transporter's ID			
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		F. Transporter's Phone		G. State Facility ID			
				H. State Facility Phone 330-866-3265					
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
	a. Soil Contaminated with Debris and Asbestos WM Profile # 1095860H		No.	Type	20	YD			
	b. WM Profile #								
	c. WM Profile #								
	d. WM Profile #								
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location							
		Cell		Level					
		Grid							
15. Special Handling Instructions and Additional Information									
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520					
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson		Signature "On behalf of" Mark Patterson				Month 9	Day 2	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name Ray WUFAS		Signature		Month 9	Day 2	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.		Printed Name D. Jones		Signature		Month 9	Day 2	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY
Pink- FACILITY USE ONLY
Blue- GENERATOR #2 COPY
Gold- TRANSPORTER #1 COPY
Yellow- GENERATOR #1 COPY

#196404

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION			
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u>			
Address: <u>8451 STATE ROUTE 5</u>			
City: <u>RAVENNA</u>		State: <u>OH</u>	Zip Code: <u>44266</u>
Owner's Name: _____			
Telephone: <u>(330) 358-7311</u>		Fax: <u>()</u>	
II. Operator's Name: <u>Test Inc</u>			
Address: <u>508 West Elnora Street</u>			
City: <u>Colum</u>		State: <u>IN</u>	Zip Code: <u>47562</u>
Telephone: <u>(812) 636-8501</u>		Fax: <u>(812) 636-7572</u>	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u>			
"on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Physical Location:			
Address: <u>7916 CHAPEL STREET, SE</u>			
City: <u>WAYNESBURG</u>		State: <u>OH</u>	Zip Code: <u>44688</u>
Telephone: <u>(330) 866-3265</u>		Fax: <u>(330) 866-3709</u>	
Mailing Address:			
City: _____		State: <u>OH</u>	Zip Code: <u>44688</u>
Telephone: <u>(330) 866-3265</u>		Fax: <u>(330) 866-3709</u>	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent)			
Name: <u>NESHAP REGIONAL OFFICE</u>			
Address: <u>77 WEST JACKSON BLVD</u>			
City: <u>CHICAGO</u>		State: <u>IL</u>	Zip Code: <u>60604</u>
V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	001	CM	20
VIII. Special Handling Instructions and Additional Information			
IX. 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 government regulations.			
		<u>Mark Patterson Facility Mgr</u>	
Signature		Type or Print Name and Title	
		Date	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON CHARDON
Address: 11234 CLEVELAND RD
City: CHARDON State: OH Zip Code: 44024
Telephone: (440) 286-7116 Fax: ()
Signature: [Signature] Date: 9-2-10 Type or Print Name and Title: Roy M. Felt

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9.2-10 Type or Print Name and Title: DAyer



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of 1			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266 PORTAGE COUNTY		A. Manifest Number WMNA		00196405			
4. Generator's Phone 330-358-7312				B. State Generator's ID					
5. Transporter 1 Company Name JMW TRUCKING WM North Jackson Hauling		6. US EPA ID Number		C. State Transporter's ID					
				D. Transporter's Phone		330 484 2428			
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		State Transporter's ID			
				F. Transporter's Phone		Transporter's Phone			
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		G. State Facility ID		State Facility ID			
				H. State Facility Phone		330-866-3265			
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
	a. Soil Contaminated with Debris and Asbestos WM Profile # 1095860H		No.	Type					
			1	DT	20	T			
	b. WM Profile #			Type	Total Qty	Wt./Vol.	Comments		
c. WM Profile #			Type	Total Qty	Wt./Vol.	Comments			
d. WM Profile #			Type	Total Qty	Wt./Vol.	Comments			
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location							
		Cell		Level					
		Grid							
15. Special Handling Instructions and Additional Information									
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520					
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson		Signature "On behalf of" <i>Mark Patterson</i>				Month 9	Day 2	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name Landy Hurmon		Signature <i>Landy Hurmon</i>		Month 9	Day 2	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
Printed Name Dana		Signature <i>Dana</i>				Month 9	Day 2	Year 10	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#196405

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 1 of 2

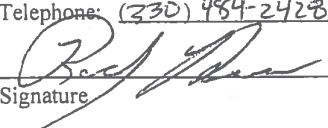
GENERATOR SECTION			
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u>			
Address: <u>8451 STATE ROUTE 5</u>			
City: <u>RAVENNA</u>		State: <u>OH</u>	Zip Code: <u>44266</u>
Owner's Name: _____			
Telephone: <u>(330) 358-7311</u>		Fax: <u>()</u>	
II. Operator's Name: <u>Toltest Inc</u>			
Address: <u>508 West Elm St</u>			
City: <u>Odon</u>		State: <u>IN</u>	Zip Code: <u>47562</u>
Telephone: <u>(812) 636-8541</u>		Fax: <u>(812) 636-7572</u>	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u>			
"on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Physical Location:			
Address: <u>7916 CHAPEL STREET, SE</u>			
City: <u>WAYNESBURG</u>		State: <u>OH</u>	Zip Code: <u>44688</u>
Telephone: <u>(330) 866-3265</u>		Fax: <u>(330) 866-3709</u>	
Mailing Address:			
City: _____		State: <u>OH</u>	Zip Code: <u>44688</u>
Telephone: <u>(330) 866-3265</u>		Fax: <u>(330) 866-3709</u>	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent)			
Name: <u>NESHAP REGIONAL OFFICE</u>			
Address: <u>77 WEST JACKSON BLVD</u>			
City: <u>CHICAGO</u>		State: <u>IL</u>	Zip Code: <u>60604</u>
V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
<u>FRIABLE ASBESTOS</u>	<u>001</u>	<u>DT</u>	<u>30</u>
VIII. Special Handling Instructions and Additional Information			
IX. 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 government regulations.			
<u>Mark Patterson</u>		<u>9/2/10</u>	<u>Mark Patterson, Facility Mgr</u>
Signature		Date	Type or Print Name and Title

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~WHA NORTH JACKSON~~ JMW TRUCKING
Address: 519 45th St.
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature:  Date: 9-2-10 Type or Print Name and Title: Randy Harrison

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)


Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 9-2-10 Type or Print Name and Title: D. Ayers Sales



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH52100796		Manifest Doc No.		2. Page 1 of 1			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44266 PORTAGE COUNTY		A. Manifest Number WMNA 00196406		B. State Generator's ID			
4. Generator's Phone 330-358-7312		5. Transporter 1 Company Name JMW TRUCKING WM North Jackson Hauling #PV13161		6. US EPA ID Number		C. State Transporter's ID			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-484-2428		E. State Transporter's ID			
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		F. Transporter's Phone		G. State Facility ID			
				H. State Facility Phone 330-866-3265					
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
	a. Soil Contaminated with Debris and Asbestos		No.	Type					
	WM Profile # 1095860H		1	DT	20	T			
	b.								
	WM Profile #								
	c.								
WM Profile #									
d.									
WM Profile #									
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location							
		Cell		Level					
		Grid							
15. Special Handling Instructions and Additional Information									
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520					
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson		Signature "On behalf of" Mark Patterson				Month 9	Day 2	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name Allen Knish		Signature Allen Knish		Month 9	Day 2	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
Printed Name Sharon		Signature Sharon				Month 9	Day 2	Year 10	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

#196406

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 1 of 2

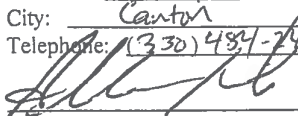
GENERATOR SECTION			
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u>			
Address: <u>8451 STATE ROUTE 5</u>			
City: <u>RAVENNA</u>		State: <u>OH</u>	Zip Code: <u>44266</u>
Owner's Name:			
Telephone: <u>(330) 358-7311</u>		Fax: <u>()</u>	
II. Operator's Name: <u>Taltest Inc</u>			
Address: <u>508 West Elm St.</u>			
City: <u>Orion</u>		State: <u>IN</u>	Zip Code: <u>47562</u>
Telephone: <u>(812) 636-8501</u>		Fax: <u>(812) 636-7572</u>	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u>			
"on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Physical Location:			
Address: <u>7916 CHAPEL STREET, SE</u>			
City: <u>WAYNESBURG</u>		State: <u>OH</u>	Zip Code: <u>44688</u>
Telephone: <u>(330) 866-3265</u>		Fax: <u>(330) 866-3709</u>	
Mailing Address:			
City: <u>Waynesburg</u>		State: <u>OH</u>	Zip Code: <u>44688</u>
Telephone: <u>(330) 866-3265</u>		Fax: <u>(330) 866-3709</u>	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent)			
Name: <u>NESHAP REGIONAL OFFICE</u>			
Address: <u>77 WEST JACKSON BLVD</u>			
City: <u>CHICAGO</u>		State: <u>IL</u>	Zip Code: <u>60604</u>
V. Description of Materials	VI. Containers		VII. Total Quantity (cubic yards)
	Number	Type	
FRIABLE ASBESTOS	<u>001</u>	<u>DT</u>	<u>30</u>
VIII. Special Handling Instructions and Additional Information			
IX. 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 government regulations.			
<u>Mark Patterson</u>		<u>9/2/10</u>	<u>Mark Patterson Facility Manager</u>
Signature		Date	Type or Print Name and Title

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: ~~JOHN JACKSON~~ JMW TRUCKING
Address: 519 45th St.
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-7428 Fax: ()
Signature:  Date: 9-2-10 Type or Print Name and Title: Allen Knight Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)


Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()
Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature:  Date: 9-2-10 Type or Print Name and Title: D. Ayers Sales







NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. DH5210020736		Manifest Doc No.		2. Page 1 of 1			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA 00196407					
				B. State Generator's ID					
4. Generator's Phone 330-358-7312		5. Transporter 1 Company Name JMW TRUCKING WM-North Jackson Hauling PAH3169		6. US EPA ID Number		C. State Transporter's ID			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-464-2428		E. State Transporter's ID			
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		F. Transporter's Phone		G. State Facility ID			
				H. State Facility Phone 330-866-3265					
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
	a. Soil Contaminated with Debris and Asbestos WM Profile # 1095860H		No.	Type					
	b. WM Profile #								
	c. WM Profile #								
TRANSPORTER	d. WM Profile #								
	J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location						
		Cell		Level					
		Grid							
15. Special Handling Instructions and Additional Information									
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520					
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson		Signature "On behalf of" <i>Mark Patterson</i>				Month 9	Day 2	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name DEAN S HOGGINS		Signature <i>Dean S Hoggins</i>		Month 9	Day 2	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
Printed Name		Signature <i>[Signature]</i>				Month 9	Day 3	Year 10	
White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY				Blue- GENERATOR #2 COPY		Yellow- GENERATOR #1 COPY			
Pink- FACILITY USE ONLY				Gold- TRANSPORTER #1 COPY					

MANIFEST #196407

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Toltest Inc</u> Address: <u>508 West Elnora Street</u> City: <u>Edon</u> State: <u>IN</u> Zip Code: <u>47522</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-1512</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 25%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 30%; padding: 5px; text-align: center;">Number</th> <th style="width: 40%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;"></td> <td style="text-align: center; padding: 5px;">30</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	001		30							
VI. Containers		VII. Total Quantity (cubic yards)															
Number	Type																
001		30															
VIII. Special Handling Instructions and Additional Information <div style="height: 80px;"></div>																	
IX. 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 government regulations.																	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  Signature </div> <div style="text-align: center;"> <u>9/2/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Manager</u> Type or Print Name and Title </div> </div>																	

Page 2 of 2

X. Transporter 1 (Acknowledgement of receipt of materials)
 Name: [REDACTED] JMW Trucking
 Address: 519 45th Street
 City: Canton State: OH Zip Code: 44706
 Telephone: (330) 484-2420 Fax: ()
 Signature: [Signature] Date: 9/2/10 Name or Print Name and Title: Dennis Huggins

Rejected Materials (if any)	Destination

XI. **Transporter 2 (Acknowledgement of receipt of materials)**

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (____) _____ Fax: (____) _____

Signature Date Type or Print Name and Title

Rejected Materials (if any)	Destination

XII. Discrepancy indication space

Signature RRuoss Date 9/3/10 Type or Print Name and Title RRuoss-Sabel

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of 1			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA		00196408			
4. Generator's Phone 330-358-7312				B. State Generator's ID					
5. Transporter 1 Company Name WM-North Jackson Hauling		6. US EPA ID Number		C. State Transporter's ID					
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-424-2428					
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St. Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID					
				F. Transporter's Phone					
				G. State Facility ID					
				H. State Facility Phone 330-866-3265					
GENERATOR	11. Description of Waste Materials			12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments	
	a. Soil Contaminated with Debris and Asbestos			No.	Type				
	WM Profile # 109586OH			1	DT	20	T		
	b.								
	WM Profile #								
TRANSPORTER	c.								
	WM Profile #								
	d.								
	WM Profile #								
	J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.			K. Disposal Location					
FACILITY				Cell		Level			
				Grid					
	15. Special Handling Instructions and Additional Information								
	Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520				
	16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.								
TRANSPORTER	Printed Name Mark Patterson			Signature "On behalf of" <i>Mark Patterson</i>			Month 9	Day 2	Year 10
	17. Transporter 1 Acknowledgement of Receipt of Materials								
	Printed Name Griff Jones			Signature <i>Griff Jones</i>			Month 7	Day 2	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials								
	Printed Name			Signature			Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
	Printed Name			Signature <i>[Signature]</i>			Month 7	Day 5	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY
Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY
Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION																
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																
II. Operator's Name: <u>Toltest Inc</u> Address: <u>508 West Elmore Street</u> City: <u>Indian</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																
V. Description of Materials	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 25%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 30%; padding: 5px; text-align: center;">Number</th> <th style="width: 40%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">FRIABLE ASBESTOS</td> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">50 DT 30</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	50 DT 30						
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FRIABLE ASBESTOS	001	50 DT 30														
VIII. Special Handling Instructions and Additional Information 																
IX. 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 government regulations.																
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/2/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Manager</u> Type or Print Name and Title </div> </div>																

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: JMW Trucking
Address: 519 145th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature: [Signature] Date: 9/2/10 Type or Print Name and Title: GRAB TOWERS DRIVER

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()
Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9/3/10 Type or Print Name and Title: R. Russ Seal Co

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of 1			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA 00196409		B. State Generator's ID			
4. Generator's Phone 330-358-7312		5. Transporter 1 Company Name WM North Jackson Hauling		6. US EPA ID Number		C. State Transporter's ID			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-487-2428		E. State Transporter's ID			
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		F. Transporter's Phone		G. State Facility ID			
				H. State Facility Phone 330-866-3265					
GENERATOR	11. Description of Waste Materials			12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments	
	a. Soil Contaminated with Debris and Asbestos			No.	Type				
	WM Profile # 1095860H			1	DT	20	T		
	b.								
	WM Profile #								
	c.								
	WM Profile #								
	d.								
	WM Profile #								
	J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.			K. Disposal Location					
			Cell			Level			
			Grid						
15. Special Handling Instructions and Additional Information									
Purchase Order # _____ EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520									
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson			Signature "On behalf of" Mark Patterson			Month 9	Day 2	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials								
	Printed Name Mike Wallace			Signature Mike Wallace			Month 9	Day 2	Year 10
FACILITY	18. Transporter 2 Acknowledgement of Receipt of Materials								
	Printed Name			Signature			Month	Day	Year
19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.									
20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.									
Printed Name			Signature [Signature]			Month 9	Day 2	Year 10	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY
Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY
Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION																
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																
II. Operator's Name: <u>Toltest Inc</u> Address: <u>500 West Elmora Street</u> City: <u>Edon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-1572</u>																
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																
V. Description of Materials	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 20%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 30%; padding: 5px; text-align: center;">Number</th> <th style="width: 40%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px; text-align: center;">FRIABLE ASBESTOS</td> <td style="padding: 5px; text-align: center;">001</td> <td style="padding: 5px; text-align: center;">30 CM 30</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	30 CM 30						
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IX. 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 government regulations.																
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/2/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Manager</u> Type or Print Name and Title </div> </div>																

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: [Redacted] JMW Trucking
Address: 519 W 5th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2400 Fax: ()
Signature: [Signature] Date: 9/2/10 Type or Print Name and Title: Mike Wallace

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9/3/10 Type or Print Name and Title: R. Reag Seal

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No.		Manifest Doc No.		2. Page 1 of			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288				Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA 00196410			
4. Generator's Phone 330-358-7312						B. State Generator's ID			
5. Transporter 1 Company Name Chardon WM North Jackson Hauling PGK2183				6. US EPA ID Number		C. State Transporter's ID			
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter's Phone 440-286-7116			
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688				10. US EPA ID Number		E. State Transporter's ID			
						F. Transporter's Phone			
						G. State Facility ID			
						H. State Facility Phone 330-866-3265			
GENERATOR	11. Description of Waste Materials			12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments	
	a. Soil Contaminated with Debris and Asbestos			No.	Type				
	WM Profile # 1095860H			1	CM	20	YD		
	b.								
	WM Profile #								
	c.								
TRANSPORTER	WM Profile #								
	d.								
	WM Profile #								
	J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.			K. Disposal Location					
				Cell		Level			
				Grid					
15. Special Handling Instructions and Additional Information									
Purchase Order # EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520									
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson				Signature "On behalf of" Mark Patterson			Month 9	Day 2	Year 10
FACILITY	17. Transporter 1 Acknowledgement of Receipt of Materials								
	Printed Name		Signature 10/11/10			Month 10	Day 2	Year 10	
	18. Transporter 2 Acknowledgement of Receipt of Materials								
Printed Name		Signature			Month	Day	Year		
19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.									
20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.									
Printed Name		Signature 10/11/10			Month 10	Day 2	Year 10		

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Blue- GENERATOR #2 COPY

Yellow- GENERATOR #1 COPY

Pink- FACILITY USE ONLY

Gold- TRANSPORTER #1 COPY

#196410

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44286</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>ToHost Inc</u> Address: <u>548 West Elm St.</u> City: <u>Eden</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">VI. Containers</th> <th rowspan="2" style="text-align: center;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="text-align: center;">Number</th> <th style="text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">FRIABLE ASBESTOS</td> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">3 CM 30</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	3 CM 30							
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Number	Type																
FRIABLE ASBESTOS	001	3 CM 30															
VIII. Special Handling Instructions and Additional Information 																	
IX. 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 government regulations.																	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>09/02/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Mgr</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH CLEVELAND CHARDON
Address: 10237 CUTH RD
City: CHARDON State: OH Zip Code: 44024
Telephone: 440 286-7116 Fax: ()
Signature: [Signature] Date: 9-2-10 Type or Print Name and Title: Roy Meyers

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9-3-10 Type or Print Name and Title: R. Rugg Sale

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of 1		
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA 00196411				
				B. State Generator's ID				
4. Generator's Phone 330-358-7312		5. Transporter 1 Company Name JMW TRUCKING WM-North Jackson-Hauling RVH3161		6. US EPA ID Number		C. State Transporter's ID		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-454-2428		E. State Transporter's ID		
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		F. Transporter's Phone		G. State Facility ID		
				H. State Facility Phone 330-866-3265				
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments	
			No.	Type				
	a. Soil Contaminated with Debris and Asbestos WM Profile # 109586OH		1	DT	20	T		
	b.							
	WM Profile #							
	c.							
	WM Profile #							
	d.							
	WM Profile #							
	J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location					
		Cell		Level				
		Grid						
15. Special Handling Instructions and Additional Information								
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520				
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.								
Printed Name Mark Patterson				Signature "On behalf of" <i>Mark Patterson</i>		Month 9	Day 3	Year 10
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials							
	Printed Name Allen Krish		Signature <i>Allen Krish</i>		Month 7	Day 2	Year 10	
	18. Transporter 2 Acknowledgement of Receipt of Materials							
Printed Name		Signature		Month	Day	Year		
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.							
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.							
Printed Name				Signature <i>[Signature]</i>		Month 9	Day 3	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION																
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																
II. Operator's Name: <u>Toltest Inc</u> Address: <u>508 West Elmore Street</u> City: <u>Edon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(512) 636-8501</u> Fax: <u>(512) 636-1572</u>																
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																
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Number	Type															
FRIABLE ASBESTOS	001	30 DT 30														
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REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: IMW Trucking
Address: 519 45th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature: Allen K Date: 9-3-10 Type or Print Name and Title: Allen Knisk Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name:
Address:
City: State: Zip Code:
Telephone: () Fax: ()
Signature: Date: Type or Print Name and Title:

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: RR Date: 9-3-10 Type or Print Name and Title: RR Rogers Scale Op



NON-HAZARDOUS MANIFEST

32

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA		00196412			
4. Generator's Phone 330-358-7312		5. Transporter 1 Company Name JMW TRUCKING		6. US EPA ID Number		B. State Generator's ID			
WM North Jackson Hauling #PVH3173		7. Transporter 2 Company Name		8. US EPA ID Number		C. State Transporter's ID			
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		D. Transporter's Phone 330 484 2428		E. State Transporter's ID			
				F. Transporter's Phone		G. State Facility ID			
						H. State Facility Phone 330-866-3265			
GENERATOR	11. Description of Waste Materials			12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments	
	a. Soil Contaminated with Debris and Asbestos			No.	Type				
	WM Profile # 1095860H			1	DT 20 T				
	b.				Type				
	WM Profile #								
c.									
WM Profile #									
d.									
WM Profile #									
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.			K. Disposal Location						
			Cell		Level				
			Grid						
15. Special Handling Instructions and Additional Information									
Purchase Order # EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520									
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson			Signature "On behalf of" <i>Mark Patterson</i>			Month 9	Day 3	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials			18. Transporter 2 Acknowledgement of Receipt of Materials					
	Printed Name OKEY HAWVER			Signature <i>Okey Hawver</i>			Month 9	Day 3	Year 10
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.			20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.					
	Printed Name <i>[Signature]</i>			Signature <i>[Signature]</i>			Month 9	Day 3	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Blue- GENERATOR #2 COPY

Yellow- GENERATOR #1 COPY

Pink- FACILITY USE ONLY

Gold- TRANSPORTER #1 COPY

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Toltest Inc</u> Address: <u>508 West Elmora Street</u> City: <u>Codon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
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V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">VI. Containers</th> <th rowspan="2" style="text-align: center;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="text-align: center;">Number</th> <th style="text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">001</td> <td style="text-align: center;">SDT</td> <td style="text-align: center;">30</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	001	SDT	30							
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<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/3/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Manager</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: JMW Trucking
Address: 519 W 5th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2425 Fax: ()
Signature: Okey Hammer Date: 9/3/10 Type or Print Name and Title: OKEY HAMMER

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: Okey Hammer Date: 9-3-10 Type or Print Name and Title: Steven Seiler



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of 1			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		4. Generator's Phone 330-358-7312		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA 00196413			
5. Transporter 1 Company Name JMW TRUCKING WM North Jackson Hauling		6. US EPA ID Number OH3188		C. State Transporter's ID		D. Transporter's Phone 330-464-2428			
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone			
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		G. State Facility ID		H. State Facility Phone 330-866-3265			
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
	a. Soil Contaminated with Debris and Asbestos		No.	Type					
	WM Profile # 109586OH		1	DT	20	T			
	b.								
	WM Profile #								
	c.								
WM Profile #									
d.									
WM Profile #									
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location							
		Cell				Level			
		Grid							
15. Special Handling Instructions and Additional Information									
Purchase Order # _____ EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520									
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson		Signature "On behalf of"				Month 9	Day 3	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials						Month 9	Day 3	Year 10
	Printed Name Randy Harmon		Signature						
	18. Transporter 2 Acknowledgement of Receipt of Materials								
Printed Name		Signature				Month	Day	Year	
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
	Printed Name [Signature]		Signature [Signature]				Month 9	Day 3	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 1 of 2

GENERATOR SECTION											
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>											
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Page 2 of 2

X. Transporter 1 (Acknowledgement of receipt of materials)
Name: _____ JMW Trucking
Address: _____
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Randy Harmon 9-3-10 Randy Harmon
Signature Date Type or Print Name and Title

Rejected Materials (if any)	Destination

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: (____) _____ Fax: (____) _____

Signature	Date	Type or Print Name and Title
-----------	------	------------------------------

Rejected Materials (if any)	Destination

XII. Discrepancy indication space

Signature [Signature] Date 9-3-10 Type or Print Name and Title Open School



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. 015210020136		Manifest Doc No.		2. Page 1 of 1			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA		00196414			
4. Generator's Phone 330-358-7312				B. State Generator's ID					
5. Transporter 1 Company Name JNW TRUCKING WM North Jackson Hauling		6. US EPA ID Number PVH3202		C. State Transporter's ID					
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330-484-2428					
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID					
				F. Transporter's Phone					
				G. State Facility ID					
				H. State Facility Phone 330-866-3265					
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
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	WM Profile # 1095860H		1	DT	20	T			
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WM Profile #									
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J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location							
		Cell				Level			
		Grid							
15. Special Handling Instructions and Additional Information									
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520					
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson		Signature (On behalf of) Mark Patterson				Month 9	Day 3	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Signature Mike Wallace				Month 9	Day 3	Year 10
	Printed Name Mike Wallace		Signature Mike Wallace				Month 9	Day 3	Year 10
FACILITY	18. Transporter 2 Acknowledgement of Receipt of Materials		Signature				Month	Day	Year
	Printed Name								
19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.									
20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.									
Printed Name D. Clark		Signature D. Clark				Month 9	Day 3	Year 10	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																
II. Operator's Name: <u>Toltest Inc</u> Address: <u>508 West Elnora Street</u> City: <u>Edon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-1512</u>																
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 20%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 30%; padding: 5px; text-align: center;">Number</th> <th style="width: 40%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px; text-align: center;">FRIABLE ASBESTOS</td> <td style="padding: 5px; text-align: center;">001</td> <td style="padding: 5px; text-align: center;">30 DT</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	30 DT						
VI. Containers		VII. Total Quantity (cubic yards)														
Number	Type															
FRIABLE ASBESTOS	001	30 DT														
VIII. Special Handling Instructions and Additional Information 																
IX. 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 government regulations.																
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/3/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Manager</u> Type or Print Name and Title </div> </div>																

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: [REDACTED] JMW Trucking
Address: 519 H 5th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2428 Fax: ()
Signature: Mike Wallace Date: 9/3/10 Type or Print Name and Title: Mike Wallace

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9-3-10 Type or Print Name and Title: Dayton Sule



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736		Manifest Doc No.		2. Page 1 of 1					
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA 00196415							
				B. State Generator's ID							
4. Generator's Phone 330-358-7312		5. Transporter 1 Company Name JMW TRUCKING #PVH31169		6. US EPA ID Number		C. State Transporter's ID					
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 330 484 2428		E. State Transporter's ID					
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		F. Transporter's Phone		G. State Facility ID					
				H. State Facility Phone 330-866-3265							
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments				
	a. Soil Contaminated with Debris and Asbestos		No.	Type							
	WM Profile # 1095860H		1	DT	20	T					
	b.										
	WM Profile #										
	c.										
WM Profile #											
d.											
WM Profile #											
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location									
		Cell		Level							
		Grid									
15. Special Handling Instructions and Additional Information											
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520							
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.											
Printed Name Mark Patterson		Signature "On behalf of" <i>Mark Patterson</i>				Month 9	Day 3	Year 10			
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name DERMISHUGGINS				Signature <i>Dermishuggins</i>		Month 9	Day 3	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name				Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.										
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.										
Printed Name		Signature <i>[Signature]</i>				Month 9	Day 3	Year 10			

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY
Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY
Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION											
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>											
II. Operator's Name: <u>Toltest Inc</u> Address: <u>508 West Elmora Street</u> City: <u>Chen</u> State: <u>IN</u> Zip Code: <u>47532</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>											
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>											
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>											
V. Description of Materials	VI. Containers <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Number</th> <th style="width: 50%;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">001</td> <td style="text-align: center;">DR DT</td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>		Number	Type	001	DR DT					VII. Total Quantity (cubic yards) <div style="text-align: center; font-size: 1.2em;">30</div>
Number	Type										
001	DR DT										
VIII. Special Handling Instructions and Additional Information											
IX. 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 government regulations.											
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/3/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Manager</u> Type or Print Name and Title </div> </div>											

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: JMW Trucking
Address: 519 W 5th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2425 Fax: ()

Signature: [Signature] Date: 9/3/10 Type or Print Name and Title: Deanis Hoggins Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9/3/10 Type or Print Name and Title: R. Rues, Sub Q

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH5210020736	Manifest Doc No.		2. Page 1 of				
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288			Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY			A. Manifest Number WMNA 00196416			
4. Generator's Phone 330-358-7312			B. State Generator's ID						
5. Transporter 1 Company Name WM North Jackson Hauling			6. US EPA ID Number						
7. Transporter 2 Company Name			8. US EPA ID Number						
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688			10. US EPA ID Number						
11. Description of Waste Materials a. Soil Contaminated with Debris and Asbestos WM Profile # 109586OH b. WM Profile # c. WM Profile # d. WM Profile # J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.			12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
			No.	Type					
			1	CM	20	YD			
			K. Disposal Location						
15. Special Handling Instructions and Additional Information			Cell		Level				
			Grid						
Purchase Order #			EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520						
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson			Signature Mark Patterson			Month 9	Day 3	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials			Signature			Month 9	Day 3	Year 10
	Printed Name Karl H. Huron								
FACILITY	18. Transporter 2 Acknowledgement of Receipt of Materials			Signature			Month	Day	Year
	Printed Name								
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.								
Printed Name			Signature			Month 9	Day 7	Year 10	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Blue- GENERATOR #2 COPY

Yellow- GENERATOR #1 COPY

Pink- FACILITY USE ONLY

Gold- TRANSPORTER #1 COPY

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44266</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Toltest Inc</u> Address: <u>508 West Elmora St</u> City: <u>Odon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: _____ State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 25%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 30%; padding: 5px; text-align: center;">Number</th> <th style="width: 40%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">001</td> <td style="text-align: center; padding: 5px;">CM</td> <td style="text-align: center; padding: 5px;">2.0</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	001	CM	2.0							
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IX. 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 government regulations.																	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/3/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Mgr.</u> Type or Print Name and Title </div> </div>																	

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WM - NORTH JACKSON CHARDON
 Address: 10297 CUFFIS RD
 City: CHARDON State: OH Zip Code: 44024
 Telephone: (440) 286-7116 Fax: ()
 Signature: [Signature] Date: 9-3-10 Type or Print Name and Title: Roy Myers

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Telephone: () _____ Fax: () _____
 Signature: _____ Date: _____ Type or Print Name and Title: _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature

Date

Type or Print Name and Title

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. 045210020736		Manifest Doc No.		2. Page 1 of	
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA		00196417	
4. Generator's Phone 330-358-7312				B. State Generator's ID			
5. Transporter 1 Company Name JM W TRUCKING		6. US EPA ID Number		C. State Transporter's ID			
WM-North Jackson-Hauling				D. Transporter's Phone 330-484-2428			
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID			
				F. Transporter's Phone			
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		G. State Facility ID			
				H. State Facility Phone 330-866-3265			
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments
	a. Soil Contaminated with Debris and Asbestos		No.	Type			
	WM Profile # 1095860H		1	DT	120	T	
	b.						
	WM Profile #						
	c.						
	WM Profile #						
	d.						
	WM Profile #						
	J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location				
		Cell		Level			
		Grid					
15. Special Handling Instructions and Additional Information							
Purchase Order # EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520							
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.							
Printed Name Mark Patterson		Signature "On behalf of" Mark Patterson			Month 9	Day 3	Year 10
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name Allen Knish		Signature Allen Knish		
					Month 9	Day 3	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature		
				Month	Day	Year	
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.						
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.						
	Printed Name Dyers		Signature Dyers			Month 9	Day 7

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																
II. Operator's Name: <u>Toltest Inc</u> Address: <u>508 West Elnora Street</u> City: <u>Codon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: _____ Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: _____ City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																
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IX. 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 government regulations.																
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u>Mark Patten</u> Signature </div> <div style="text-align: center;"> <u>9/3/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Manager</u> Type or Print Name and Title </div> </div>																

Page 2 of 2

X. Transporter 1 (Acknowledgement of receipt of materials)
Name: [Redacted] JMW Trucking
Address: 59 W 5th Street
City: Canton State: OH Zip Code: 44706
Telephone: (330) 484-2425 Fax: ()
Signature: [Handwritten Signature] Date: 9-3-00 Type or Print Name and Title: Allen Knost Driver

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (____) _____ Fax: (____) _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

XII. Discrepancy indication space

Signature OA Date 9-2-10 Type or Print Name and Title D. Ryan

Form Revised (11/12/97)



DUB 701

101755

NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No.		Manifest Doc No.		2. Page 1 of 1	
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		4. Generator's Phone 330-358-7312		Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA 00196418	
5. Transporter 1 Company Name CHARDON WM North Jackson Hauling #PGK2183		6. US EPA ID Number		C. State Transporter's ID		D. Transporter's Phone 440-286-7016	
7. Transporter 2 Company Name		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone	
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		G. State Facility ID		H. State Facility Phone 330-866-3265	
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments
	a. Soil Contaminated with Debris and Asbestos		No.	Type			
	WM Profile # 1095860H		1	CM	20	YD	
	b.						
	WM Profile #						
	c.						
WM Profile #							
d.							
WM Profile #							
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location					
		Cell		Level			
		Grid					
15. Special Handling Instructions and Additional Information							
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520			
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.							
Printed Name Mark Patterson		Signature "On behalf of" <i>Mark Patterson</i>		Month 9	Day 7	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>Roy MUEZL</i>		Month 9	Day 7	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.						
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.		Signature <i>D. Aron</i>		Month 9	Day 7	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Blue- GENERATOR #2 COPY

Yellow- GENERATOR #1 COPY

Pink- FACILITY USE ONLY

Gold- TRANSPORTER #1 COPY

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
II. Operator's Name: <u>Toltest Inc</u> Address: <u>500 West Elnora Street</u> City: <u>Codon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																	
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																	
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																	
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 20%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 40%; padding: 5px; text-align: center;">Number</th> <th style="width: 20%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">FRIABLE ASBESTOS</td> <td style="padding: 5px; text-align: center;">001</td> <td style="padding: 5px; text-align: center;">CM</td> </tr> <tr> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> </tr> <tr> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	CM							<div style="padding: 5px; text-align: center;">20</div>
VI. Containers		VII. Total Quantity (cubic yards)															
Number	Type																
FRIABLE ASBESTOS	001	CM															
VIII. Special Handling Instructions and Additional Information 																	
IX. 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 government regulations.																	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/7/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Manager</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)
Name: [Redacted] Waste Management
Address: [Redacted] 10237 Cutts Rd
City: [Redacted] Chardon State: OH Zip Code: [Redacted]
Telephone: [Redacted] 440-286-7116 Fax: ()
Signature: [Signature] Date: 9-7-10 Type or Print Name and Title: Roy Meyer

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)
Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9-7-10 Type or Print Name and Title: Dayton Scale

Form Revised (11/12/97)



5490
NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH 5210020736		Manifest Doc No.		2. Page 1 of 1					
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288				Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY							
4. Generator's Phone 330-358-7312				A. Manifest Number WMNA		00196419					
5. Transporter 1 Company Name Chardon WM North Jackson Hauling #PGKZRB3				6. US EPA ID Number		B. State Generator's ID					
7. Transporter 2 Company Name				8. US EPA ID Number		C. State Transporter's ID					
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688				10. US EPA ID Number		D. Transporter's Phone 440-286-7116					
						E. State Transporter's ID					
						F. Transporter's Phone					
						G. State Facility ID					
						H. State Facility Phone 330-866-3265					
GENERATOR	11. Description of Waste Materials			12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments			
	a. Soil Contaminated with Debris and Asbestos			No.	Type						
	WM Profile # 1095860H			1	CM	20	YD				
	b.										
	WM Profile #										
	c.										
	WM Profile #										
	d.										
	WM Profile #										
	J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.			K. Disposal Location							
			Cell		Level						
			Grid								
15. Special Handling Instructions and Additional Information											
Purchase Order # EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520											
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.											
Printed Name Mark Patterson			Signature "On behalf of" Mark Patterson			Month 9	Day 7	Year 10			
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials			Printed Name Bob Myers			Signature [Signature]		Month 9	Day 7	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials			Printed Name			Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.										
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.			Printed Name			Signature			Month 9	Day 7

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Blue- GENERATOR #2 COPY

Yellow- GENERATOR #1 COPY

Pink- FACILITY USE ONLY

Gold- TRANSPORTER #1 COPY

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																
II. Operator's Name: <u>Toltest Inc</u> Address: <u>508 West Elmora Street</u> City: <u>Edon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-7572</u>																
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> <div style="display: flex; justify-content: space-between;"> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>																
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>																
V. Description of Materials	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center; padding: 5px;">VI. Containers</th> <th rowspan="2" style="width: 25%; padding: 5px; vertical-align: top;">VII. Total Quantity (cubic yards)</th> </tr> <tr> <th style="width: 50%; padding: 5px; text-align: center;">Number</th> <th style="width: 50%; padding: 5px; text-align: center;">Type</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px; text-align: center;">FRIABLE ASBESTOS</td> <td style="padding: 5px; text-align: center;">001</td> <td style="padding: 5px; text-align: center;">CM</td> </tr> <tr> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> </tr> <tr> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> <td style="padding: 5px;"> </td> </tr> </tbody> </table>		VI. Containers		VII. Total Quantity (cubic yards)	Number	Type	FRIABLE ASBESTOS	001	CM						
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VIII. Special Handling Instructions and Additional Information 																
IX. 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 government regulations.																
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/7/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Manager</u> Type or Print Name and Title </div> </div>																

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of material)

Name: WASTE MANAGEMENT
Address: 10237 CUTTS ROAD
City: CHARLTON State: OH Zip Code: 44024
Telephone: 440-286-7110 Fax: ()

Signature

Date

Type or Print Name and Title

Rejected Materials (if any)

Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () Fax: ()

Signature

Date

Type or Print Name and Title

Rejected Materials (if any)

Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature

Date

Type or Print Name and Title

Form Revised (11/12/97)



NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH 5210020736		Manifest Doc No.		2. Page 1 of 1			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA		00196420			
4. Generator's Phone 330-358-7312				B. State Generator's ID					
5. Transporter 1 Company Name Chardon WM North Jackson Hauling #16K2183		6. US EPA ID Number		C. State Transporter's ID					
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 440 286-7116					
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID					
				F. Transporter's Phone					
				G. State Facility ID					
				H. State Facility Phone 330-866-3265					
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
	a. Soil Contaminated with Debris and Asbestos WM Profile # 1095860H		No.	Type					
			1	CM	20	YD			
	b.								
	WM Profile #								
c.									
WM Profile #									
d.									
WM Profile #									
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location							
		Cell		Level					
		Grid							
15. Special Handling Instructions and Additional Information									
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520					
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson		Signature "On behalf of" <i>Mark Patterson</i>				Month 9	Day 8	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name Roy MYERS		Signature <i>Roy Myers</i>		Month 9	Day 8	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.		Printed Name D. Arnes		Signature <i>D. Arnes</i>		Month 9	Day 8	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Pink- FACILITY USE ONLY

Blue- GENERATOR #2 COPY

Gold- TRANSPORTER #1 COPY

Yellow- GENERATOR #1 COPY

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																	
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																	
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VIII. Special Handling Instructions and Additional Information 																	
IX. 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 government regulations.																	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> Signature </div> <div style="text-align: center;"> <u>9/8/10</u> Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Manager</u> Type or Print Name and Title </div> </div>																	

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: WASTEMANAGEMENT
Address: 10237 CUTTS RD
City: CHARDON State: OH Zip Code: 44024
Telephone: 440 286-7116 Fax: ()
Signature: [Signature] Date: 9-8-10 Type or Print Name and Title: ROY M. JEFFERS

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9-8-10 Type or Print Name and Title: DAVID Scales

Form Revised (11/12/97)



308909 # 407455
NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. 0 H52100 ZD736		Manifest Doc No.		2. Page 1 of 1			
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (If different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA		00196421			
4. Generator's Phone 330-358-7312				B. State Generator's ID					
5. Transporter 1 Company Name Chardon WM North Jackson Hauling HPGK2183		6. US EPA ID Number		C. State Transporter's ID					
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 440-286-7110					
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID					
				F. Transporter's Phone					
				G. State Facility ID					
				H. State Facility Phone 330-866-3265					
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments		
	a. Soil Contaminated with Debris and Asbestos		No.	Type					
	WM Profile # 109586OH		1	CM	20	Yd			
	b.								
	WM Profile #								
	c.								
WM Profile #									
d.									
WM Profile #									
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations.		K. Disposal Location							
		Cell		Level					
		Grid							
15. Special Handling Instructions and Additional Information									
Purchase Order #		EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520							
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.									
Printed Name Mark Patterson		Signature "On behalf of" <i>Mark Patterson</i>				Month 9	Day 8	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Printed Name Ken [unclear]		Signature <i>[Signature]</i>		Month 9	Day 8	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Printed Name		Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.								
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.		Printed Name		Signature <i>[Signature]</i>		Month 9	Day 8	Year 10

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Blue- GENERATOR #2 COPY

Yellow- GENERATOR #1 COPY

Pink- FACILITY USE ONLY

Gold- TRANSPORTER #1 COPY

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION											
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: ()											
II. Operator's Name: <u>Toltest Inc</u> Address: <u>508 West Elnora Street</u> City: <u>Edon</u> State: <u>IN</u> Zip Code: <u>47562</u> Telephone: <u>(812) 636-8501</u> Fax: <u>(812) 636-1572</u>											
III. Waste Disposal Site (WDS) Name: <u>AMERICAN LANDFILL</u> "on-site" disposal <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Physical Location: Address: <u>7916 CHAPEL STREET, SE</u> City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u> Mailing Address: City: <u>WAYNESBURG</u> State: <u>OH</u> Zip Code: <u>44688</u> Telephone: <u>(330) 866-3265</u> Fax: <u>(330) 866-3709</u>											
IV. Responsible Agency (Local, District, State, or EPA Office where notification was sent) Name: <u>NESHAP REGIONAL OFFICE</u> Address: <u>77 WEST JACKSON BLVD</u> City: <u>CHICAGO</u> State: <u>IL</u> Zip Code: <u>60604</u>											
V. Description of Materials	VI. Containers <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Number</th> <th style="width: 50%;">Type</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;"><u>001</u></td> <td style="text-align: center; padding: 5px;"><u>CM</u></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> </tr> <tr> <td style="height: 20px;"></td> <td></td> </tr> </tbody> </table>		Number	Type	<u>001</u>	<u>CM</u>					VII. Total Quantity (cubic yards)
Number	Type										
<u>001</u>	<u>CM</u>										
FRIABLE ASBESTOS	<u>001</u>	<u>CM</u>	<u>20</u>								
VIII. Special Handling Instructions and Additional Information 											
IX. 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 government regulations.											
<u>Mark Patterson</u> Signature		<u>9/8/10</u> Date	<u>Mark Patterson, Facility Manager</u> Type or Print Name and Title								

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: Waste Management
Address: 10237 Cutts Road
City: Chardon State: OH Zip Code: 44024
Telephone: 440 286-7116 Fax: ()
Signature: [Signature] Date: 9-8-10 Type or Print Name and Title: Ron Myer

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

Signature _____ Date _____ Type or Print Name and Title _____

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

Signature: [Signature] Date: 9-9-10 Type or Print Name and Title: R. Ruggs Seal Op

Form Revised (11/12/97)



311644

409435

NON-HAZARDOUS MANIFEST

NON-HAZARDOUS MANIFEST		1. Generator's US EPA ID No. OH 521 0020736		Manifest Doc No.		2. Page 1 of 1	
3. Generator's Mailing Address: RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288		Generator's Site Address (if different than mailing): RAVENNA ARMY AMMUNITION PLANT 8451 STATE ROUTE 5 RAVENNA, OH 44288 PORTAGE COUNTY		A. Manifest Number WMNA		00196422	
4. Generator's Phone 330-358-7312				B. State Generator's ID			
5. Transporter 1 Company Name WM North Jackson Hauling		6. US EPA ID Number CHARDON #P6K2183		C. State Transporter's ID			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 440-286-7116			
9. Designated Facility Name and Site Address American Landfill 7916 Chapel St Waynesburg, OH 44688		10. US EPA ID Number		E. State Transporter's ID			
				F. Transporter's Phone			
				G. State Facility ID			
				H. State Facility Phone 330-866-3265			
GENERATOR	11. Description of Waste Materials		12. Containers		13. Total Quantity	14. Unit Wt./Vol.	I. Misc. Comments
	a. Soil Contaminated with Debris and Asbestos		No.	Type			
	WM Profile # 109586OH		1	CM	24	YD	
	b.						
	WM Profile #						
c.							
WM Profile #							
d.							
WM Profile #							
J. Additional Descriptions for Materials Listed Above Contaminated soil and asbestos containing debris from within ramsdell Quarry Landfill. The areas from which the soil and debris are being removed were used to burn waste explosives and dumping of liquid residues from annealing operations. 30 yd R/O #319/70245		K. Disposal Location					
		Cell		Level			
		Grid					
15. Special Handling Instructions and Additional Information							
Purchase Order #				EMERGENCY CONTACT / PHONE NO.: Claudine Clark/404-494-3520			
16. GENERATOR'S CERTIFICATE: I hereby certify that the above-described materials are not hazardous wastes as defined by CFR Part 261 or any applicable state law, have been fully and accurately described, classified and packaged and are in proper condition for transportation according to applicable regulations.							
Printed Name Mark Patterson		Signature "On behalf of" Mark Pat		Month 9	Day 9	Year 10	
TRANSPORTER	17. Transporter 1 Acknowledgement of Receipt of Materials		Signature Roy McFar		Month 9	Day 9	Year 10
	18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month	Day	Year
FACILITY	19. Certificate of Final Treatment/Disposal I certify, on behalf of the above listed treatment facility, that to the best of my knowledge, the above-described waste was managed in compliance with all applicable laws, regulations, permits and licenses on the dates listed above.						
	20. Facility Owner or Operator: Certification of receipt of non-hazardous materials covered by this manifest.						
Printed Name Day		Signature Day		Month 9	Day 9	Year 10	

White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY

Blue- GENERATOR #2 COPY

Yellow- GENERATOR #1 COPY

Pink- FACILITY USE ONLY

Gold- TRANSPORTER #1 COPY

**REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD**

Page 1 of 2

GENERATOR SECTION																		
I. Facility Name: <u>RAVENNA ARMY AMMUNITION DEPOT</u> Address: <u>8451 STATE ROUTE 5</u> City: <u>RAVENNA</u> State: <u>OH</u> Zip Code: <u>44288</u> Owner's Name: _____ Telephone: <u>(330) 358-7311</u> Fax: <u>()</u>																		
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Number	Type																	
FRIABLE ASBESTOS	001	CM																
VIII. Special Handling Instructions and Additional Information 																		
IX. 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 government regulations. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> _____ Signature </div> <div style="text-align: center;"> <u>9/9/10</u> _____ Date </div> <div style="text-align: center;"> <u>Mark Patterson Facility Manager</u> _____ Type or Print Name and Title </div> </div>																		

REGULATED ASBESTOS MATERIAL
WASTE SHIPMENT RECORD

Page 2 of 2

TRANSPORTER SECTION

X. Transporter 1 (Acknowledgement of receipt of materials)

Name: Waste Management
Address: 10237 Cutts Road
City: Chardon State: OH Zip Code: 44024
Telephone: (440) 286-7116 Fax: ()

[Signature] 9-9-10 Roy McPHERS
Signature Date Type or Print Name and Title

Rejected Materials (if any)	Destination

XI. Transporter 2 (Acknowledgement of receipt of materials)

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: () _____ Fax: () _____

Signature Date Type or Print Name and Title

Rejected Materials (if any)	Destination

DISPOSAL SITE SECTION

XII. Discrepancy indication space

XIII. Waste disposal site owner or operator: Certification of receipt of asbestos materials covered by this manifest except as noted in item 12

[Signature] 9-9-10 Daniel Sealey
Signature Date Type or Print Name and Title

Form Revised (11/12/97)

Appendix A-12. Visual Inspection Form

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Diamond Environmental

3624 State Route 303 • Ravenna, Ohio 44266
Phone: (330) 422-0799 • Fax: (330) 422-0798

DAILY REPORT

Technician Kerth Bickel
Client Toll Test
Project Ramsdell Quarry Landfill
Location RVAAP
Workorder _____

Date 8-31-10

Category Asbestos

Hours Worked: _____ - Lunch _____ + Travel _____ = Total _____
Time on Job Site: _____ Time off Job Site _____

Description of Events: _____

Visual Inspection

A visual inspection of the Ramsdell Quarry landfill excavation pit revealed no visible discernible transite, roofing or other suspect asbestos containing material.

Signature: Kerth Bickel

Certified Asbestos Hazard Evaluation Specialist # 31476

Signature: _____

9-4-10

Visual Inspection

A visual inspection of the Ramsdell Quarry landfill staging area revealed no visible discernible transite, roofing, or other suspect asbestos containing material

Signature: Kent R. Bickel

Certified Asbestos Hazard Evaluation Specialist

3476

**Appendix A-13. Technical Memorandum, Sampling Scheme,
and Confirmation Sampling Results**

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SAIC Engineering of Ohio, Inc.
A subsidiary of Science Applications International Corporation

September 3, 2010

Mr. Thomas Chanda
U.S. Army Corps of Engineers, Louisville District
ATTN: CELRL-PM-P-E
600 Martin Luther King, Jr. Place
P.O. Box 59
Louisville, Kentucky 40202-0059

Reference: Contract No. GS-10F-0076J, Delivery Order W912QR-05-F-0033, Performance-Based Contract (PBC) for Six Environmental Areas of Concern (AOCs) at the Ravenna Army Ammunition Plant (RVAAP), Ravenna, Ohio

Subject: Addendum to the Remedial Design for the RVAAP-01 Ramsdell Quarry Landfill ~ REVISION 3

Dear Mr. Chanda:

(Please note that this is a revision to the memorandum issued on August 12, 2010. The purpose of this revision is to document the Confirmatory Sampling of Asbestos in the Excavation Footprint sampling scheme discussed during a August 31, 2010 teleconference. Many of the other activities discussed in this memorandum are either complete or ongoing.)

In June 2010, soil excavation of the quarry bottom at Ramsdell Quarry Landfill (RQL) commenced as required in the *Record of Decision for Soil and Dry Sediment at RVAAP-01 Ramsdell Quarry Landfill* and the *Revised Final Remedial Design for the RVAAP-01 Ramsdell Quarry Landfill* for the soil chemicals of concern (COCs) [benz(a)anthracene, benzo(a)pyrene, benzo(b)fluoranthene, dibenz(a,h)anthracene, and indeno(1,2,3-cd)pyrene]. The remedial subcontractor (Toltest, Inc.) encountered suspected asbestos-containing waste material (ACWM) in multi-increment (MI) area RQL-043M and demobilized from RQL until the waste is re-characterized for offsite disposal.

Ohio EPA determined that soil containing ACWM must be handled and disposed as friable ACWM. The remedial design (RD) provided notifications, specifications, procedures, and requirements for the nonhazardous soil removal activities at RQL. This technical memorandum provides 1) appropriate changes that will take place with respect soil removal activities at RQL and 2) the confirmatory soil sampling scheme that must take place after excavation. Adjustments to the Site Safety and Health Plan and monitoring requirements will be presented in an Accident Prevention Plan and Asbestos Soil Abatement Plan developed by Toltest, Inc.

Asbestos Demolition and Renovation Notification

SAIC/Toltest will submit a Notification of Asbestos Demolition and Renovation in accordance with OAC 3745-20-03 and 40 CFR 61.145(b). This notification will be submitted a minimum of 10 working days before the removal action begins.

Mark Regulated Area

Exterior work areas will be segregated with caution tape at an adequate distance from the regulated areas to deter unauthorized personnel from approaching the regulated areas. Asbestos warning tape and appropriate signage will be used to demarcate the exterior regulated areas and prevent accidental intrusion into regulated areas by non-authorized personnel.

Loading and Labeling

The excavated material that is considered friable ACWM will be loaded into roll-off containers or haul trucks. The roll-off containers or haul trucks will be lined with two 6-mil polyethylene liners (12-mil total per Ohio EPA regulations). Once filled, the liner will be sealed. The container will either be immediately transported to a disposal facility approved for accepting friable ACWM or will be staged in the Equipment Storage Area (shown on Drawing C-4) awaiting transport to a disposal facility. A label will be applied to the roll-off container stating:

<p style="text-align: center;">DANGER CONTAINS ASBESTOS FIBERS AVOID CREATING DUST CANCER AND LUNG DISEASE HAZARD</p>

Confirmatory Sampling of Asbestos in Excavation Footprint

Figure 1 presents the footprint of soil and ACWM removed at RQL. This footprint is approximately 0.23 acres in size.

At the completion of the soil removal, an inspection is required to visually determine if ACWM is present on the excavation walls or floor. If ACWM is present, removal activities continue. Once the excavation floor and sidewalls have no observed ACWM, the following sampling scheme is implemented as discussed during a teleconference with Tom Buchan and Todd Fisher of Ohio EPA:

- 1) One sample is collected from each of the six areas depicted in Figure 1. The sample areas are demarcated by the following:
 - a. "Soil and ACWM Excavated Material" polygon, and
 - b. blue lines separating the different sampling areas within the polygon.
- 2) Within each of these sample areas, soil aliquots are collected from four randomly selected locations within the sample area. These four aliquots are combined into one sample.
- 3) The samples will be submitted to an NVLAP-accredited laboratory for PLM asbestos analysis.

If any of the samples exceed 1% asbestos, that sample location will undergo further excavation until confirmed to be less than 1% asbestos. If the samples are below 1% asbestos, the area is confirmed to meet remedial goals and can be backfilled.

Technical Memorandum

At the completion of the activities focusing on removal of ACWM, SAIC will issue a memorandum documenting the field activities, findings, disposal quantities, and sample results. This memorandum will be submitted to all RVAAP Stakeholders.

Please review this memorandum and provide comments or concurrence to the proposed changes to the RD and the sampling scheme for asbestos in soil. If you have any questions or comments, please feel free to contact me at (330) 405-5802.

Sincerely,

SCIENCE APPLICATIONS INTERNATIONAL CORPORATION



Jed Thomas, P.E.
Project Manager

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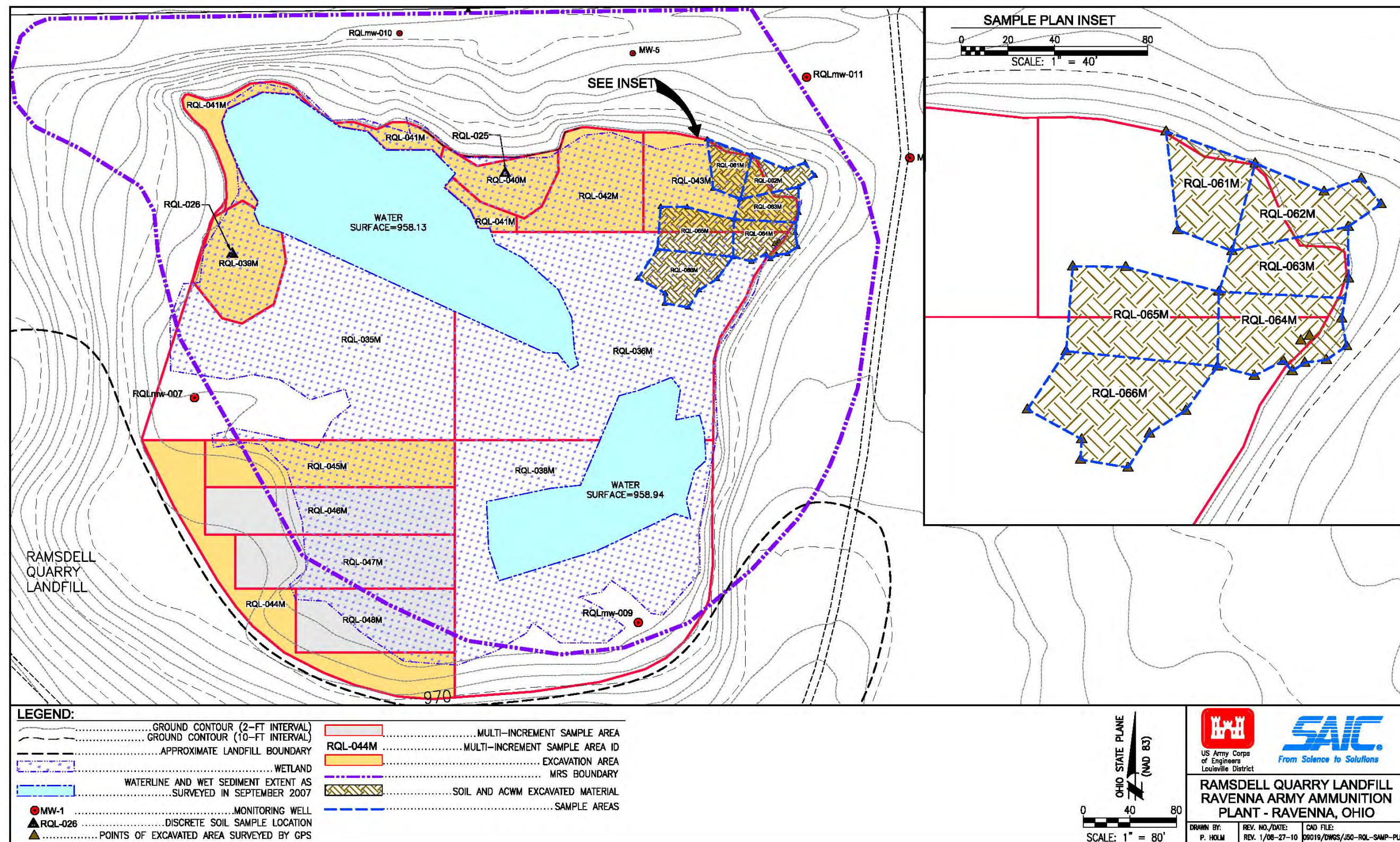


Figure 1. Excavation Footprint Sampling Scheme for Asbestos in Soil

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EMLab P&K

Report for:

Mr. Mark Loeb
TestAmerica: North Canton
4101 Shuffel Dr. NW
North Canton, OH 44720

Regarding: Project: 6 Bulk Samples
EML ID: 698436

Approved by:

Lab Manager
Baluswamy Krishnan

Dates of Analysis:

Asbestos-EPA Method 600/R-93/116: 09-02-2010

Service SOPs: Asbestos-EPA Method 600/R-93/116 (EPA-600/M4-82-020 (SOP 01264))

For clarity, we report the number of significant digits as calculated; but, due to the nature of this type of biological data, the number of significant digits that is used for interpretation should generally be one or two. All samples were received in acceptable condition unless noted in the Report Comments portion in the body of the report. Due to the nature of the analyses performed, field blank corrections of results is not a standard practice. The results relate only to the items tested.

EMLab P&K ("the Company") shall have no liability to the client or the client's customer with respect to decisions or recommendations made, actions taken or courses of conduct implemented by either the client or the client's customer as a result of or based upon the Test Results. In no event shall the Company be liable to the client with respect to the Test Results except for the Company's own willful misconduct or gross negligence nor shall the Company be liable for incidental or consequential damages or lost profits or revenues to the fullest extent such liability may be disclaimed by law, even if the Company has been advised of the possibility of such damages, lost profits or lost revenues. In no event shall the Company's liability with respect to the Test Results exceed the amount paid to the Company by the client therefor.

Document Number: 200091 - Revision Number: 5

Client: TestAmerica: North Canton
 C/O: Mr. Mark Loeb
 Re: 6 Bulk Samples

Date of Sampling: 08-31-2010
 Date of Receipt: 09-02-2010
 Date of Report: 09-02-2010

ASBESTOS PLM REPORT: EPA-600/M4-82-020 & EPA METHOD 600/R-93-116**Total Samples Submitted:** 6**Total Samples Analysed:** 6**Total Samples with Layer Asbestos Content > 1%:** 0**Location: RQL-061-1108-SO**

Lab ID-Version‡: 3095766-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	2% Cellulose < 1% Mineral wool
Sample Composite Homogeneity:	Good

Location: RQL-062-1109-SO

Lab ID-Version‡: 3095767-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	2% Cellulose < 1% Mineral wool
Sample Composite Homogeneity:	Good

Location: RQL-063-1110-SO

Lab ID-Version‡: 3095768-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	2% Cellulose
Sample Composite Homogeneity:	Good

Location: RQL-064-1111-SO

Lab ID-Version‡: 3095769-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	2% Cellulose < 1% Mineral wool
Sample Composite Homogeneity:	Good

The results relate only to the items tested. Interpretation is left to the company and/or persons who conducted the field work. The test report shall not be reproduced except in full, without written approval of the laboratory. The report must not be used by the client to claim product certification, approval, or endorsement by NVLAP, NIST, or any agency of the federal government.

All samples were received in acceptable condition unless otherwise noted. EMLab P&K reserves the right to dispose of all samples after a period of thirty (30) days, according to all state and federal guidelines, unless otherwise specified.

Inhomogeneous samples are separated into homogeneous subsamples and analyzed individually. ND means no fibers were detected. When detected, the minimum detection and reporting limit is less than 1% unless point counting is performed.

‡ A "Version" indicated by "-x" after the Lab ID# with a value greater than 1 indicates a sample with amended data. The revision number is reflected by the value of "x".

Client: TestAmerica: North Canton
C/O: Mr. Mark Loeb
Re: 6 Bulk Samples

Date of Sampling: 08-31-2010
Date of Receipt: 09-02-2010
Date of Report: 09-02-2010

ASBESTOS PLM REPORT: EPA-600/M4-82-020 & EPA METHOD 600/R-93-116**Location: RQL-065-1112-SO**

Lab ID-Version‡: 3095770-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	2% Cellulose
Sample Composite Homogeneity:	Good

Location: RQL-066-1113-SO

Lab ID-Version‡: 3095771-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	5% Cellulose < 1% Mineral wool
Sample Composite Homogeneity:	Good

The results relate only to the items tested. Interpretation is left to the company and/or persons who conducted the field work. The test report shall not be reproduced except in full, without written approval of the laboratory. The report must not be used by the client to claim product certification, approval, or endorsement by NVLAP, NIST, or any agency of the federal government.

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EMLab P&K

Report for:

Mr. Mark Loeb
TestAmerica: North Canton
4101 Shuffel Dr. NW
North Canton, OH 44720

Regarding: Project: SR120977
EML ID: 699548

Approved by:

Lab Manager
Baluswamy Krishnan

Dates of Analysis:
Asbestos-EPA Method 600/R-93/116: 09-08-2010

Service SOPs: Asbestos-EPA Method 600/R-93/116 (EPA-600/M4-82-020 (SOP 01264))

For clarity, we report the number of significant digits as calculated; but, due to the nature of this type of biological data, the number of significant digits that is used for interpretation should generally be one or two. All samples were received in acceptable condition unless noted in the Report Comments portion in the body of the report. Due to the nature of the analyses performed, field blank corrections of results is not a standard practice. The results relate only to the items tested.

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Document Number: 200091 - Revision Number: 5

Client: TestAmerica: North Canton
C/O: Mr. Mark Loeb
Re: SR120977Date of Sampling: 09-03-2010
Date of Receipt: 09-07-2010
Date of Report: 09-08-2010**ASBESTOS PLM REPORT: EPA-600/M4-82-020 & EPA METHOD 600/R-93-116****Total Samples Submitted:** 6**Total Samples Analysed:** 6**Total Samples with Layer Asbestos Content > 1%:** 0**Location: RQL-067-1114-SO**

Lab ID-Version‡: 3101004-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	< 1% Cellulose
Sample Composite Homogeneity:	Good

Location: RQL-068-1115-SO

Lab ID-Version‡: 3101005-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	2% Cellulose
Sample Composite Homogeneity:	Good

Location: RQL-069-1116-SO

Lab ID-Version‡: 3101006-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	< 1% Cellulose
Sample Composite Homogeneity:	Good

Location: RQL-070-1117-SO

Lab ID-Version‡: 3101007-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	1% Cellulose
Sample Composite Homogeneity:	Good

Location: RQL-071-1118-SO

Lab ID-Version‡: 3101008-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	1% Cellulose
Sample Composite Homogeneity:	Good

The results relate only to the items tested. Interpretation is left to the company and/or persons who conducted the field work. The test report shall not be reproduced except in full, without written approval of the laboratory. The report must not be used by the client to claim product certification, approval, or endorsement by NVLAP, NIST, or any agency of the federal government.

All samples were received in acceptable condition unless otherwise noted. EMLab P&K reserves the right to dispose of all samples after a period of thirty (30) days, according to all state and federal guidelines, unless otherwise specified.

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Client: TestAmerica: North Canton
C/O: Mr. Mark Loeb
Re: SR120977Date of Sampling: 09-03-2010
Date of Receipt: 09-07-2010
Date of Report: 09-08-2010**ASBESTOS PLM REPORT: EPA-600/M4-82-020 & EPA METHOD 600/R-93-116****Location: RQL-072-1119-SO**

Lab ID-Version‡: 3101009-1

Sample Layers	Asbestos Content
Brown Soil	ND
Composite Non-Asbestos Fibrous Content:	1% Cellulose
Sample Composite Homogeneity:	Good

The results relate only to the items tested. Interpretation is left to the company and/or persons who conducted the field work. The test report shall not be reproduced except in full, without written approval of the laboratory. The report must not be used by the client to claim product certification, approval, or endorsement by NVLAP, NIST, or any agency of the federal government.

All samples were received in acceptable condition unless otherwise noted. EMLab P&K reserves the right to dispose of all samples after a period of thirty (30) days, according to all state and federal guidelines, unless otherwise specified.

Inhomogeneous samples are separated into homogeneous subsamples and analyzed individually. ND means no fibers were detected. When detected, the minimum detection and reporting limit is less than 1% unless point counting is performed.

‡ A "Version" indicated by -"x" after the Lab ID# with a value greater than 1 indicates a sample with amended data. The revision number is reflected by the value of "x".

Appendix A-14. Field Change Request Form

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FIELD CHANGE REQUEST (FCR)

FCR NO. FCR-RVAAPLL12-003

DATE INITIATED 06/04/10

PROJECT Load Line 12 Remedial Action and Ramsdell Quarry Remedial Action

CONTRACT NO. GSA Contract No. GS-10F-0076J Delivery Order No. W912QR-05-F-0033

REQUESTOR IDENTIFICATION

NAME Jed Thomas

ORGANIZATION SAIC

PHONE 330-405-5802

TITLE Project Manager SIGNATURE 

BASELINE IDENTIFICATION

BASELINE(S) AFFECTED ☐ Cost ☐ Scope ☐ Milestone ☒ Method of Accomplishment

AFFECTED DOCUMENT (TITLE, NUMBER AND SECTION)

Remedial Design for the RVAAP-12 Load Line 12

Remedial Design for the RVAAP-01 Ramsdell Quarry Landfill

DESCRIPTION OF CHANGE:

The use of sawdust as a mixing agent to dry soil or sediment was approved in field change request FCR-RVAAPLL12-002. In addition to (or in place of) sawdust, SAIC and Toltest would also like to use Calciment® as a drying agent during the Load Line 12 and Ramsdell Quarry Landfill remedial actions. Calciment® will be mixed with excavated soil or sediment to ensure the material does not have free liquids when it is loaded to the haul trucks and ultimately disposed at the landfill.

Attached to this FCR are lab sheets presenting typical chemical analysis and TCLP analysis of Calciment®.

JUSTIFICATION:

Justification for use of the Calciment® is to ensure haul trucks do not contain any free liquids during transport and the excavated material is dry enough to be accepted at the receiving landfill.

IMPACT OF NOT IMPLEMENTING REQUEST:

The use of the drying agent will ensure the truck loads will not leak during transportation to the landfill and will ensure the landfill will accept the disposed material. The use of the Calciment® will minimize disposal volumes, relative to volumes created from mixing sawdust. It is estimated that the amount of Calciment® used as each site would be ½ the amount of sawdust. Therefore, the amount of material being transported off RVAAP and placed into a landfill will be reduced.

PARTICIPANTS AFFECTED BY IMPLEMENTING REQUEST:

SAIC and Remedial Subcontractor

COST ESTIMATE (\$) 0

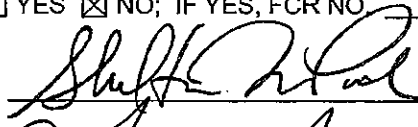
ESTIMATOR SIGNATURE No cost impact to USACE

PHONE NA

DATE NA

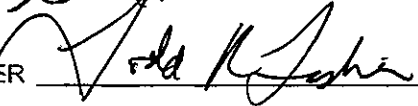
PREVIOUS FCR AFFECTED ☐ YES ☒ NO; IF YES, FCR NO

USACE COTR



DATE 6-9-10

OHIO EPA PROJECT MANAGER



DATE 06/16/10

SAIC H&S MANGER SIGNATURE (IF APPLICABLE)

NA

DATE NA

FIELD CHANGE REQUEST (FCR)



CALCIMENT®

TCLP

Grand River, OH

ELEMENT	FORMULA	RESULT mg/L	LIMIT
ARSENIC	As	< 2.500	5.00
BARIUM	Ba	0.300	100.00
CADMIUM	Cd	< 0.010	1.00
CHROMIUM	Cr	< 0.050	0.05
LEAD	Pb	< 0.10	5.00
MERCURY	Hg	< 0.005	0.20
SELENIUM	Se	< 0.50	1.00
SILVER	Ag	<0.01	5.00

FIELD CHANGE REQUEST (FCR)



CALCIMENT®

Typical Chemical Analysis Grand River

<u>Element</u>	<u>Formula</u>	<u>Percent</u>
Total Calcium Oxide	CaO	64.89
Magnesium Oxide	MgO	2.86
Silicon Dioxide	SiO ₂	7.86
Aluminum Oxide	Al ₂ O ₃	3.56
Iron Oxide	Fe ₂ O ₃	0.89
Potassium Oxide	K ₂ O ₃	0.46
Sulfur Trioxide	SO ₃	4.34
Sodium Oxide	Na ₂ O	.38
Titanium Dioxide	TiO ₂	0.13
Manganese Dioxide	MnO ₂	0.04
Phosphorus Pentoxide	P ₂ O ₅	0.20
Strontium Oxide	SrO	0.07
Barium Oxide	BaO	0.07
Carbon	C	14.25
Available/Free Calcium Oxide		40 - 45

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APPENDIX B

2014 FENCE INSTALLATION AND ACM CLEANUP DOCUMENTATION

Appendix B-1. Ohio EPA Notification

Appendix B-2. Utility Clearance

Appendix B-3. Field Change Request Form-

Appendix B-4. Certification of Visual Inspection

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Appendix B-1. Ohio EPA Notification

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NATIONAL GUARD BUREAU

111 SOUTH GEORGE MASON DRIVE
ARLINGTON VA 22204-1373

July 23, 2014

Ohio Environmental Protection Agency
DERR-NEDO
Attn: Mr. Andrew Kocher, Project Manager
2110 East Aurora Road
Twinsburg, OH 44087-1924

Subject: Ravenna Army Ammunition Plant (RVAAP) Restoration Program, Portage/Trumbull
Counties, RVAAP-01 Ramsdell Quarry Landfill (Work Activity No. 267-000-859-130)

Dear Mr. Kocher:

As requested in your 5 June 2014 letter approving the *Final Remedial Design for Soil and Dry Sediment at the RVAAP-01 Ramsdell Quarry Landfill, Ravenna Army Ammunition Plant, Ravenna, Ohio*, the Army is providing notification of the field activities associated with the Remedial Design. The Army is scheduled to begin implementation of the remedial action the week of 4 August 2014, beginning with fence installation.

Please contact the undersigned at (703) 601-7785 or brett.a.merkel.civ@mail.mil if there are issues or concerns with this submission.

Sincerely,

Brett A. Merkel
RVAAP Restoration Program Manager
Army National Guard Directorate

cc: Rod Beals, Ohio EPA, DERR-NEDO
Nancy Zikmanis, Ohio EPA, DERR-NEDO
Justin Burke, Ohio EPA, CO
Kevin Sedlak, ARNG, Camp Ravenna
Katie Tait, OHARNG, Camp Ravenna
Greg Moore, USACE Louisville
Thomas Chanda, USACE Louisville
Kevin Jago, Leidos
Jed Thomas, Leidos

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Appendix B-2. Utility Clearance

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Thomas, Jed H.

From: Sedlak, Kevin M CTR (US) <kevin.m.sedlak.ctr@mail.mil>
Sent: Wednesday, July 30, 2014 7:07 AM
To: Thomas, Jed H.
Subject: RE: RQL RA - Utility Clearance (UNCLASSIFIED)

Classification: UNCLASSIFIED

Caveats: NONE

There are no known subsurface hazards that have been identified.

Kevin Sedlak
Restoration Project Manager
Camp Ravenna
1438 State Route 534 SW
Newton Falls, OH 44444
ARNG-ILE Clean Up
Office Phone 614-336-6000 Ex 2053
<mailto:kevin.m.sedlak.ctr@mail.mil>

-----Original Message-----

From: Thomas, Jed H. [<mailto:JED.H.THOMAS@leidos.com>]
Sent: Monday, July 28, 2014 3:20 PM
To: Sedlak, Kevin M CTR (US)
Subject: RQL RA - Utility Clearance

Kevin -

Per the RD and Leidos' requirements, can you confirm to the best of your knowledge that there are no known subsurface assets or hazards at or near where the RQL fence line is going.

As we discussed and in accordance with the RD, we will have a UXO technician on site during the fence installation and ACM cleanup activities to clear areas prior to subsurface intrusion.

Please let me know if you have any questions.

Thank you,

Jed

Jed Thomas | Leidos

Project Manager | Environmental Restoration Division

phone: 330.405.5802

fax: 330.405.9811

jed.h.thomas@leidos.com <<mailto:john.t.doe@leidos.com>> |
[leidos.com/engineering](http://www.leidos.com/engineering) <<http://www.leidos.com/engineering>>

This email and any attachments to it are intended only for the identified recipients. It may contain proprietary or otherwise legally protected information of Leidos. Any unauthorized use or disclosure of this communication is strictly prohibited. If you have received this communication in error, please notify the sender and delete or otherwise destroy the email and all attachments immediately.

Classification: UNCLASSIFIED

Caveats: NONE

Appendix B-3. Field Change Request Form

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FCR NO. FCR-RVAAP RQLRA-001

DATE INITIATED 8/8/14

PROJECT Ramsdell Quarry Site Closure

CONTRACT NO. GSA Contract No. GS-10F-0076J, Delivery Order No. W912QR-12-F-0020

REQUESTOR IDENTIFICATION

NAME Jed Thomas

ORGANIZATION Leidos

PHONE 330-405-5802

TITLE Leidos Project Manager

SIGNATURE



BASELINE IDENTIFICATION

BASELINE(S) AFFECTED ☐ Cost ☐ Scope ☐ Milestone ☒ Method of Accomplishment

AFFECTED DOCUMENT (TITLE, NUMBER AND SECTION)

Remedial Design for Soil and Dry Sediment at RVAAP-01 Ramsdell Quarry Landfill

DESCRIPTION OF CHANGE:

Where needed, Tubular Post Anchors will be used to ensure the posts are stable after installation in the event that rock is encountered that prevents the high tensile posts from being driven to the specified depth. This does not affect the terminal posts or posts used for the chain link fence, as those have been installed per specifications.

Reference the attachments which also can be reviewed at:
<http://www.hooverfence.com/catalog/cpage41.htm>

JUSTIFICATION:

Rock has been encountered at some post locations during the installation of the high tensile wire fence that makes it impractical to drive the posts to the specified depth. The Tubular Post Anchors are designed to anchor posts to the ground. According to the fencing contractor, given the density of the high-tensile wire posts, the integrity of the fence line would be adequate without the anchors. However, use of the anchors will further ensure the long-term stability of the fence line and provide adequate compromise for the inability to drive the posts to the specified depth.

IMPACT OF NOT IMPLEMENTING REQUEST:

As noted above, given the density of the high-tensile wire posts, the integrity of the fence line would be adequate without the anchors; however, use of the anchors will further ensure the long-term stability of the fence line.

PARTICIPANTS AFFECTED BY IMPLEMENTING REQUEST:

Leidos and R&T Fence.

COST ESTIMATE (\$) 0

ESTIMATOR SIGNATURE

No cost impact to USACE

PHONE NA

DATE NA

PREVIOUS FCR AFFECTED ☐ YES ☒ NO; IF YES, FCR NO.

USACE COTR

POOLE.SHELTON.M.12305
63604

Digitally signed by POOLE.SHELTON.M.1230563604
DN: c=US, o=U.S. Government, ou=DoD, ou=PKI,
ou=USA, cn=POOLE.SHELTON.M.1230563604
Date: 2014.08.08 14:06:48 -0400

DATE:

OHIO EPA PROJECT MANAGER

Andrew Kocher
AKK

DATE: 8/13/14

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Appendix B-4. Certification of Visual Inspection Letter

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EDEN
ENVIRONMENTAL
INCORPORATED

2853 Fairmount Blvd.
Cleveland Heights, Ohio 44118

Phone 216.371.4737
Fax 216.371.4738

September 30, 2014

Jed Thomas, P.E.
Leidos Engineering of Ohio, Inc
8866 Commons Boulevard, Suite 201
Twinsburg, OH 44087

Re: Certification of Visual Inspection for ACM Cleanup at
Ramsdell Quarry Landfill within Camp Ravenna, Ravenna, Ohio

Dear Mr. Thomas:

Eden Environmental, Inc. is pleased to present this Certification of Visual Inspection for ACM Cleanup at Ramsdell Quarry Landfill within Camp Ravenna, Ravenna, Ohio. Work was performed in accordance with Subcontract #p010162866 between Leidos and Eden Environmental, Inc. (Eden) dated August 16, 2014, and applicable AHERA, OSHA, & NESHAPS regulations.

Eden completed the identification & cleanup of surficial, suspected asbestos-containing material (ACM) at the Ramsdell Quarry Landfill located within Camp Ravenna, Ravenna, Ohio on September 15 & 16, 2014. The landfill was inspected for ACM by walking five-foot transects and marking with flagging tape the locations where ACM was observed. This work was performed by Mr. Eric Brown (Asbestos Hazard Evaluation Specialist #ES34113). The surficial ACM clean-up was conducted through nonintrusive measures by Mr. Randy Crawford (Asbestos Hazard Abatement Specialist #AS30652). After cleanup activities were performed in the designated work area, a visual inspection was performed in accordance with 40 CFR, Part 763.90(i) by Mr. Eric Brown.

This letter is intended to verify that the regulated area is free of surficial ACM after the asbestos cleanup activities were completed.

Thank you for the opportunity to provide environmental consulting services for this project. If you have any questions regarding this verification letter, please contact us at 216-371-4737.

Sincerely,

EDEN ENVIRONMENTAL, INC.

Eric Brown
President

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APPENDIX C

LAND USE CONTROL DOCUMENTS

Appendix C-1. Land Use Control Remedial Design

Appendix C-2. Metes and Bounds Survey

Appendix C-3. Land Use Control Inspection Form for RVAAP-01 Ramsdell Quarry Landfill Area of Concern

Appendix C-4. RVAAP-01 Ramsdell Quarry Landfill – Land Use Control Brief for Contractors Personnel

Appendix C-5. Sign In-Out Sheet for Ramsdell Quarry Landfill

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Appendix C-1. Land Use Control Remedial Design

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LIST OF EACH AOC/MRS (WITH LUCS) IN APPENDIX A, SPECIFIC LUCS, AND REVISION DATES

AOC/MRS	Appendix Section	Land Use Controls	Date Section added to the PMP	Revision or Update
RVAAP-01 Ramsdell Quarry Landfill	A-2	<p>The LUCs for the RQL AOC are as follows:</p> <ul style="list-style-type: none"> • Maintenance of the 6 ft high chain-link security fence at the northern perimeter of RQL and a five-strand, high tensile wire fence at the eastern, southern, and western perimeters. Maintenance of the closed sanitary landfill. • All activities must be in compliance with established digging restrictions and established exposure limits. <ul style="list-style-type: none"> ○ All digging or excavation within the quarry bottom is prohibited due to the residual asbestos and contamination. ○ Digging and excavation on the landfill cap is regulated by the post-closure care plan and the Ohio solid waste regulations. • Permanent warning signs will be installed and maintained around RQL on the gates and on the chain-link and high tensile wire fence at 300 ft centers to warn of the ACM hazard in the quarry bottom. The signs will meet the requirements of OAC 3745-20-07(B)(1)(b). • As no soil disturbing activities are allowed within the quarry bottom, OSHA asbestos awareness training set forth at 29 CFR 1926.1101(k)(9)(vii) is not required. Any personnel entering the quarry bottom will be briefed of the asbestos hazards. 		

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APPENDIX A-2: RAMSDELL QUARRY LANDFILL – (RVAAP-01)

A-2.1. BACKGROUND

Ramsdell Quarry Landfill (RQL) was initially a stone quarry that operated until 1941. During operations, the quarry was excavated 30 to 40 ft below existing grade. The excavated sandstone and quartzite pebble conglomerate was used for road and construction ballast. From 1946 to the 1950s, the bottom of the quarry was used to burn waste explosives from Load Line 1. Reportedly, 18,000 500-lb (225-kg) incendiary or napalm bombs were burned and liquid residues from annealing operations were disposed of in the quarry.

Between 1941 and 1989, the western and southern sections of the abandoned quarry were used for landfill operations. No information is available regarding landfill disposal activities from 1941 to 1976, and no information is available on other activities at the quarry from the 1950s to 1976. Only nonhazardous solid waste was deposited in RQL from 1976 until it was closed in 1989. In 1978, a portion of the abandoned quarry was permitted as a sanitary landfill by the State of Ohio. The sanitary landfill was closed in 1990 under State of Ohio solid waste regulations. A clay cap was placed on the former permitted landfill area covering approximately 4 acres of the AOC.

A-2.2. PUBLICATIONS

The following publications can be located on www.rvaap.org or in established information repositories:

- Final Record of Decision Amendment for the RVAAP-01 Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. 24 May 2012.
- Revised Final Modified Proposed Plan for Soil and Dry Sediment at RVAAP-01 Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC 2012. 6 June 2012.
- Final Engineering Evaluation for Soil and Dry Sediment at RVAAP-01 Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. 2 September 2011.
- Revised Final Remedial Design for RVAAP-01 Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. 17 June 2010.
- Final Record of Decision for the RVAAP-01 Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. 24 March 2009.
- Wetlands and Other Waters Delineation Report Remedial Action Areas at Ramsdell Quarry Landfill, Load Line 12, and Fuze and Booster Quarry Landfill/Ponds at the Ravenna Army

Ammunition Plant and Ravenna Training and Logistics Site, Ravenna, Ohio. EnviroScience. 29 December 2008.

- Final Proposed Plan for Soil and Dry Sediment at Ramsdell Quarry Landfill (RVAAP-01) at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. March 2007
- Revised Final Feasibility Study for Ramsdell Quarry Landfill (RVAAP-01) at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. October 2006.
- Final Sampling and Analysis Plan Addendum No. 2 for the Phase I Remedial Investigation of Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. June 2006
- Final Phase I Remedial Investigation Report for Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. September 2005
- Final Project Management Plan Performance-Based Contract for Six Environmental Areas of Concern at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. 14 July 2005
- Final Phase I Remedial Investigation December 2004 Follow-On Groundwater Sampling at RVAAP-01 Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. June 2005.
- Final Site Safety and Health Plan Addendum No. 1 for the Phase I Remedial Investigation of Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. October 2003.
- Final Sampling and Analysis Plan Addendum No. 1 for the Phase I Remedial Investigation of Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. October 2003.
- Final Report on the Groundwater Investigation of the Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. August 2000.
- April 1999 Quarterly Monitoring Report, Ramsdell Quarry Groundwater Investigation at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. 4 June 1999.
- Final February 1999 Quarterly Monitoring Report, Ramsdell Quarry Groundwater Investigation at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. 15 April 1999.
- Final Initial Phase Report, Groundwater Investigation, Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. January 1999.

- Final October 1998 Quarterly Monitoring Report, Ramsdell Quarry Groundwater Investigation at the Ravenna Army Ammunition Plant, Ravenna, Ohio. 30 December 1998.
- Final Sampling and Analysis Plan Addendum for the Groundwater Investigation of the Former Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. SAIC. June 1998.
- Final Closure Inspection of RVAAP-01 Ramsdell Quarry Landfill at the Ravenna Army Ammunition Plant, Ravenna, Ohio. Ohio EPA. September 1990.

A-2.3. SITE LOCATION AND DESCRIPTION

RQL encompasses approximately 14 acres in the northeastern portion of Camp Ravenna. RQL includes old-field communities with patches of forests and grasslands. The land surface in a large portion of the AOC slopes into a former quarry, which occupies most of the AOC. The quarry bottom is about 40 ft below the surrounding area. Former quarry operations resulted in the removal of much of the original soil.

Surface water runoff collects in an isolated wetland in the bottom of the former quarry. There is no surface water drainage outlet from the quarry. When water is present in the wetland, the water depth is usually less than 4 ft. The drainage ways and ditch lines outside of the quarry, located along access roads and the former rail line in the southern part of the AOC, only contain water during rain events.

A-2.4. LAND USE

RQL will be managed as restricted access due to residual asbestos and contamination and the closed landfill at the AOC.

A-2.5. REMEDY OBJECTIVES

Where applicable, the previously applied remedies at RQL consisted of excavation of contaminated soil and installation of the fence to preclude likely exposure through human contact. Following these remedies, hazardous substances, pollutants, or contaminants remained at levels greater than those that allow unlimited use and unrestricted exposure. Therefore a component of the remedial action includes Land Use Controls (LUCs) (see item A-2.6 below). Because LUCs will be used as part of the remedy, any property owner subsequent to the federal government will be required to enter into an environmental covenant meeting the requirements of ORC Section 5301.82.

A-2.6. LAND USE CONTROLS

The RQL AOC-specific LUCs were designed considering specific parameters developed for Restricted Access. The LUCs for RQL are as follows:

- All activities must be in compliance with established digging restrictions and established exposure limits.
 - All digging or excavation within the quarry bottom is prohibited due to the residual asbestos and contamination.
 - Digging and excavation on the landfill cap will be regulated by the post-closure care plan and the Ohio solid waste regulations.
- Permanent warning signs will be installed and maintained around RQL on the gates and on the chain-link and high tensile wire fence at 300 ft centers to warn of the ACM hazard in the quarry bottom. The signs will meet the requirements of OAC 3745-20-07(B)(1)(b).
- As no soil disturbing activities are allowed within the quarry bottom, OSHA asbestos awareness training set forth at 29 CFR 1926.1101(k)(9)(vii) is not required. Any personnel entering the quarry bottom will be briefed of the asbestos hazards.

A-2.7. MONITORING AND REPORTING

Periodic monitoring of LUCs, in the form of site inspections, will be conducted by the Army to confirm that the LUCs remain effective and still meet LUC objectives for continued remedy protectiveness. Site inspections will be conducted on an annual basis. Inspections of the solid waste landfill will be conducted in accordance with State of Ohio solid waste regulations and the Ohio Environmental Protection Agency (Ohio EPA) *Director's Final Findings and Orders* (Ohio EPA 2004).

The Annual RQL-LUC Inspection Reports will be submitted to the Ohio EPA for review and approval as they are completed. The RQL-LUC Inspection Forms for RQL and other AOCs/MRSs will be summarized in an Annual LUC Report for each year. The Annual LUC Report will be submitted to the Ohio EPA for review and approval.

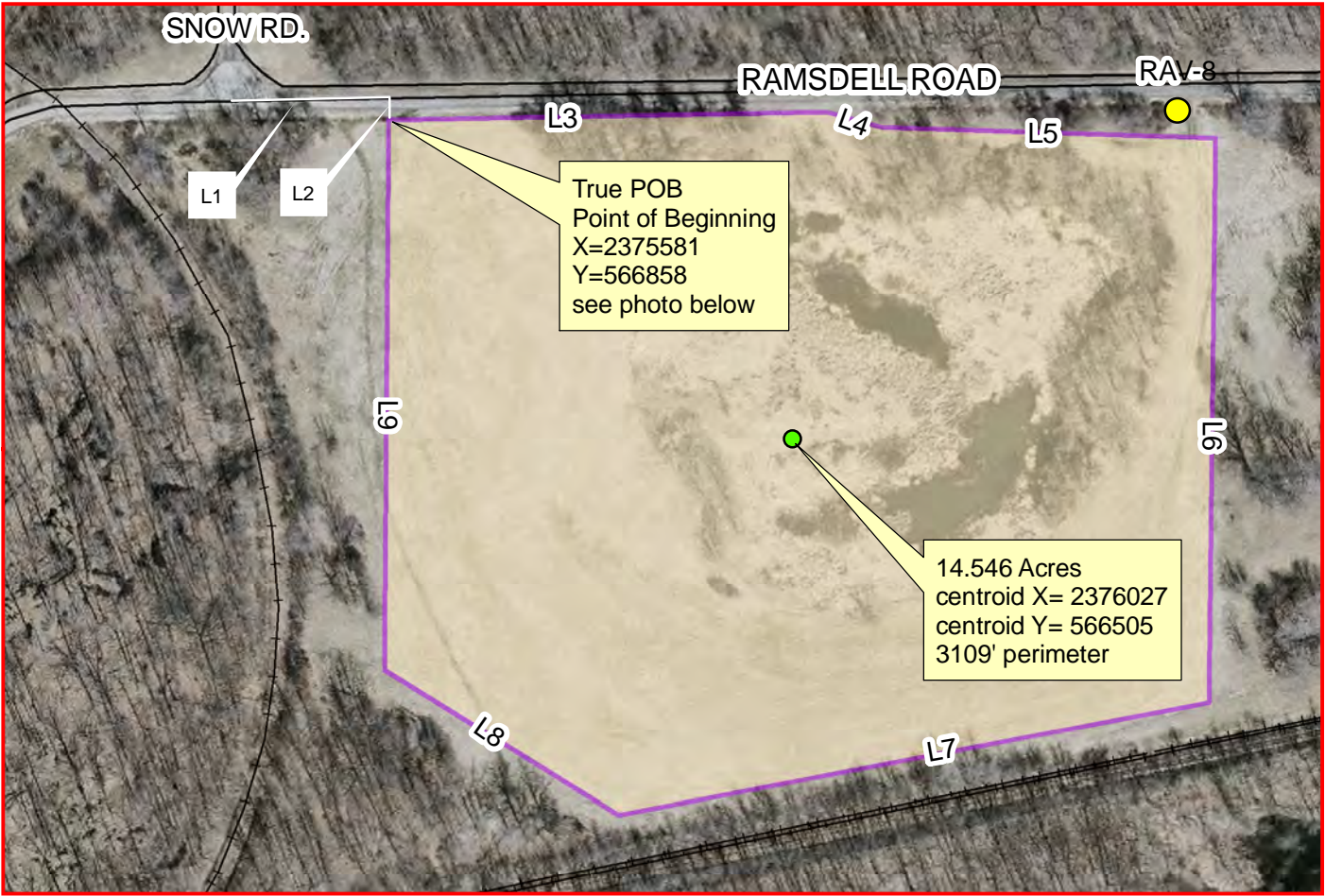
The Annual LUC Report will evaluate the status and effectiveness of LUCs with a description of how any LUC deficiencies or inconsistent uses were addressed. The Annual LUC Reports will be used in part for the preparation of the CERCLA 121(c) Five-Year Review. As part of the Annual LUC Report, a written certification will be submitted stating whether or not the LUCs remain in place and are effective.

Appendix C-2. Metes and Bounds Survey

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Grid coordinates are originating from a brass tablet found set in concrete stamped "RAV-8 US CORPS OF ENGINEERS with published coordinates of X=2376450.821 Y=566867.007 NAD83 Ohio, North Zone 3401

- Line L1 N89deg 07' 09" E 172.85'
- Line L2 S00deg 29' 46"W 21.11' to true POB
- Line L3 N88deg 59' 18"E 482.95'
- Line L4 S74deg 38' 20"E 61.75'
- Line L5 S88deg 06' 25"E 368.70'
- Line L6 S00deg 42' 08"W 622.69'
- Line L7 S79deg 10' 38"W 662.10'
- Line L8 N58deg 13' 29"W 303.74'
- Line L9 N00deg 29' 46"E 607.05' back to true POB

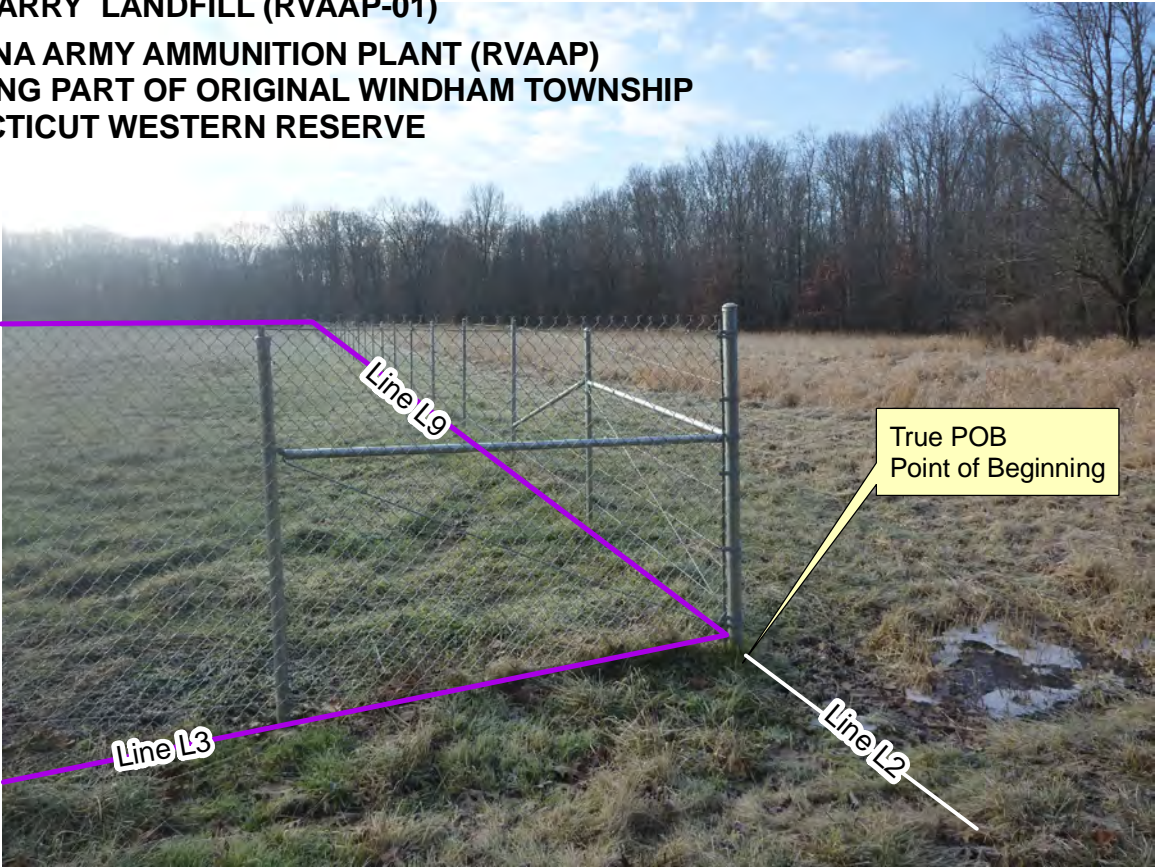


BOUNDARY SURVEY OF THE FORMER RAMSDELL QUARRY LANDFILL (RVAAP-01)

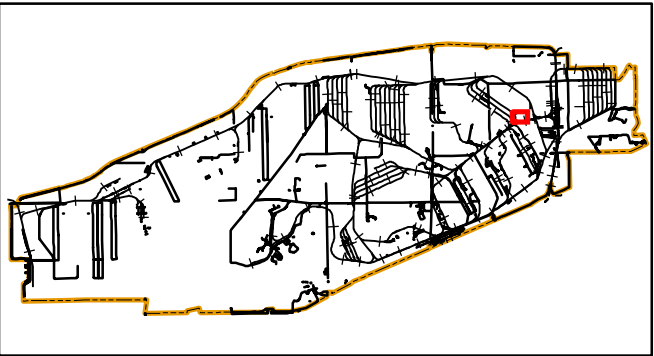
CAMP RAVENNA JOINT MILITARY TRAINING CENTER FKA RAVENNA ARMY AMMUNITION PLANT (RVAAP)
SITUATED IN THE COUNTY OF PORTAGE AND STATE OF OHIO AND BEING PART OF ORIGINAL WINDHAM TOWNSHIP
TOWNSHIP 4 NORTH, RANGE 6 WEST IN THE CONNECTICUT WESTERN RESERVE

Legend

- = Existing "As-Constructed" Fence
- = Ramsdell Quarry Landfill



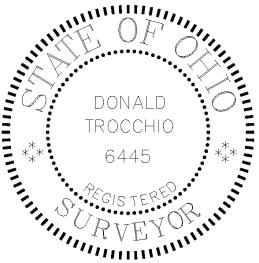
Camp Ravenna
Joint Military Training Center



Portage & Trumbull County
LOCATOR MAP



Ohio Army National Guard



Produced in December 2014 for:



US Army Corps of Engineers

600 Dr. Martin Luther King Jr. Place
Louisville, KY 40202

Louisville District



Projection Datum is NAD83, Ohio State
Plane Rectangular Grid, North Zone
Bearings are Grid North

0 100 200 400 600

Bar Scale in Feet



Camp Ravenna JMTC
1438 State Route 534 SW
Newton Falls, OH 44444
Don Trocchio, PS
don.trocchio@us.army.mil

MGRS 17T NF01946150 (NAD83)

Metes and Bounds Legal Description of the Former Ramsdell Quarry Landfill (RVAAP-01)

Camp Ravenna Joint Military Training Center FKA Ravenna Army Ammunition Plant

Situated in the County of Portage and State of Ohio and known as being part of original Windham Township, Township 4 North, Range 6 West in the Connecticut Western Reserve;

Beginning at the approximate pavement centerline intersection of Snow Road and Ramsdell Road;

Line L1 Thence along the approximate Ramsdell Road centerline of pavement N89deg 07' 09"E a distance of 172.85 feet;

Line L2 Thence S00deg 29' 46"W a distance of 21.11 feet but to an existing corner fence post assembly and the true place of beginning for the following described parcel of land; said true place of beginning has observed NAD83 grid coordinates of X=2375581 Y=566858;

Thence the following seven (7) courses and distances intending to follow the as-constructed fence enclosing said parcel of land;

Line L3 Thence N88deg 59' 18"E a distance of 482.95 feet but to a fence post assembly at an angle in said fence line;

Line L4 Thence S74deg 38' 20"E a distance of 61.75 feet but to a fence post assembly at an angle in said fence line;

Line L5 Thence S88deg 06' 25"E a distance of 368.70' feet but to a corner fence post assembly at the northeast corner of the site;

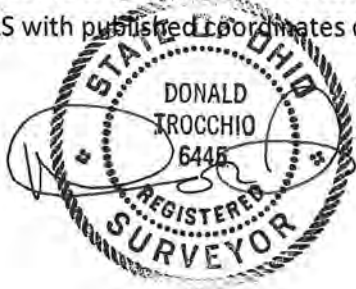
Line L6 Thence S00deg 42' 08"W a distance of 622.69 feet but to a corner fence post assembly at the southeast corner of the site;

Line L7 Thence S79deg 10' 38"W a distance of 662.10' feet but to a fence post assembly at an angle in said fence line;

Line L8 Thence N58deg 13' 29"W a distance of 303.74' feet but to a fence post assembly at an angle in said fence line;

Line L9 Thence N00deg 29' 46"E a distance of 607.05' feet but to the true place of beginning and containing a total of 14.546 acres of land all be the same more or less as surveyed and described in December 2014 by Don Trocchio Registered Professional Ohio Surveyor No.6445 of Vista Sciences, Inc;

Note: Bearings used are Grid North; Grid coordinates are originating from a brass tablet found set in concrete stamped "RAV-8 US CORPS OF ENGINEERS with published coordinates of X=2376450.821 Y=566867.007 NAD83, Ohio North Zone 3401;



24 Dec. 2014

**Appendix C-3. Land Use Control Inspection Form for RVAAP-01
Ramsdell Quarry Landfill Area of Concern**

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**Camp Ravenna Joint Military Training Center (Camp Ravenna)/ Former Ravenna Army
Ammunition Plant (RVAAP) Land Use Control (LUC) Inspection Form for
RVAAP-01 Ramsdell Quarry Landfill Area of Concern (AOC)**

In accordance with the Camp Ravenna/former RVAAP Property Management Plan (PMP) dated August 2012 and Appendix A-2 and the Final Remedial Design for Soil and Dry Sediment at RVAAP-01 Ramsdell Quarry Landfill (RQL), a LUC inspection of RQL was conducted by _____ on _____.

According to LUCs set forth in the *Final Remedial Design for Soil and Dry Sediment at the RVAAP-01 Ramsdell Quarry Landfill*, dated 9 April 2014, and memorialized in the PMP, periodic monitoring of LUCs, in the form of site inspections, is required to be conducted by the Army to confirm that the LUCs remain effective and still meet LUC objectives for continued remedy protectiveness. Site inspections are required to be conducted on an annual basis and inspections of the solid waste landfill are conducted in accordance with State of Ohio solid waste regulations and the Ohio Environmental Protection Agency (Ohio EPA) Director's Final Findings and Orders (Ohio EPA 2004). Additional LUC inspections may be conducted when landfill inspections are conducted as needed. The required Annual LUC Report is to be submitted to the Ohio EPA for review and approval.

The inspections shall include the following:

- Review of LUC training/inbriefs/maintenance and access logs and other documentation as applicable to RQL.
- Evaluation of activities at RQL to ensure that all activities executed within RQL are in compliance with the established digging restrictions and established exposure limits (Security Guard/Maintenance Worker - one (1) hour/day for 250 days/year for 25 years).
 - All digging or excavation within the quarry bottom is prohibited due to residual asbestos and contamination.
 - Digging and excavation on the landfill cap will be regulated by the post closure care plan and the Ohio solid waste regulations.
 - Due to not meeting the industrial/commercial standard, exposure monitoring for the full-time facility employee must be conducted to ensure and document that exposure at the AOC is not above the established exposure limit set for the Security Guard/Maintenance worker of one (1) hour/day for 250 days/year for 25 years.
- Inspection of warning signs on gates and fencing.
- Inspection of RQL fencing and gates.

LUC deficiencies or inconsistent land uses that are identified must be reported and identified on the inspection form/report and must also be reported to the Army National Guard (ARNG)/Ohio Army National Guard (OHARNG).

Review of LUCs – Management/Effectiveness/Corrective Action

Activities and Land Use:

- a.) This AOC is to be managed as Restricted Access and is restricted from residential land use. Has residential use occurred? Have other land uses or land use changes occurred?
- b.) What activities have occurred at RQL since the last inspection? Has any maintenance been performed at the AOC?
- c.) Are activities at RQL being conducted in compliance with established digging restrictions and established exposure limits (exposure for full-time employees who access RQL must be tracked)?
- d.) Are the warning signs in place and functional? Please note condition and any deficiencies.
- e.) Is the RQL fencing and gates intact and in good condition? Please note condition and any deficiencies.

Inspections and Reporting:

Inspections are required on an annual basis. Periodic monitoring inspections may be conducted as needed. Are annual inspections being conducted as required? Have any additional inspections been completed?

An Annual Report is required. Has the annual report been completed and submitted to the Ohio EPA?

Training/Inbriefs (as applicable to RQL):

Are RQL LUC training and/or inbriefs (for those who need to access RQL) being conducted as applicable? Describe the training (content/who attended/who provided/documentation of training).

If training was not provided, explain why and what corrective actions were initiated.

Is access to RQL for full-time employees of the facility being logged in order to track exposure? Please review access logs to ensure exposure is within the established exposure limits.

LUC Violations (if any):

Description of any observed/noted LUC violation(s) as identified:

Date of Notification of LUC violations (if applicable) to ARNG/OHARNG:

Description of any corrective actions taken to remedy observed LUC violations or recommended corrective actions:

Additional Notes/Comments:

Original Inspection Completed by:

Signature:

Printed Name:

Title:

Organization:

Date:

**Appendix C-4. RVAAP-01 Ramsdell Quarry Landfill –
Land Use Control Brief for Contractors Personnel**

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RVAAP-01 Ramsdell Quarry Landfill (RQL) – Land Use Control (LUC) Brief for Contractors/Personnel

The Army National Guard (ARNG)/Ohio Army National Guard (OHARNG) are required to conduct Long Term Monitoring (LTM)/LUC monitoring at RVAAP-01 RQL at Camp Ravenna/former Ravenna Army Ammunition Plant (RVAAP). LUCs include any type of physical, legal, or administrative mechanisms that restrict use of or limit access to real property to prevent or reduce risks to human health and the environment. Established LUCs are set forth in the *Final Remedial Design for Soil and Dry Sediment at the RVAAP-01 Ramsdell Quarry Landfill*, dated 9 April 2014, and formalized in Appendix A-2 of the Property Management Plan (PMP).

The RQL Area of Concern (AOC) consists of approximately 14 acres and was initially a stone quarry that operated until 1941. During operations, the quarry was excavated 30 to 40 feet below existing grade. The excavated sandstone and quartzite pebble conglomerate was used for road and construction ballast. From 1946 to the 1950s, the bottom of the quarry was used to burn explosives from Load Line 1. Between 1941 and 1989, the western and southern sections of the abandoned quarry were used for landfill operations. No information is available regarding landfill disposal activities from 1941 to 1976, and no information is available on other activities at the quarry from the 1950s to 1976. Only nonhazardous solid waste was deposited in RQL from 1976 until it was closed in 1989. In 1978, a portion of the abandoned quarry was permitted as a sanitary landfill by the State of Ohio. The sanitary landfill was closed in 1990 under State of Ohio solid waste regulations. A clay cap was placed on the former permitted landfill area covering approximately four (4) acres of the AOC. RQL is to be managed as Restricted Access due to residual asbestos and contamination and the closed landfill at the AOC.

The following LUCs have been developed for RQL considering specific parameters established for Restricted Access and must be adhered to:

- All activities must be in compliance with established digging restrictions and established exposure limits (Security Guard/Maintenance Worker - one (1) hour/day for 250 days/year for 25 years).
 - All digging or excavation within the quarry bottom is prohibited due to residual asbestos and contamination.
 - Digging and excavation on the landfill cap will be regulated by the post closure care plan and the State of Ohio solid waste regulations.
 - Due to not meeting the industrial/commercial standard, exposure monitoring for the full-time facility employee must be conducted to ensure and document that exposure at the AOC is not above the established exposure limit set for the Security Guard/Maintenance worker of one (1) hour/day for 250 days/year for 25 years.
- Permanent warning signs will be installed and maintained around RQL on the gates and on the chain link and high tensile wire fence at 300 feet centers to warn of the asbestos hazard in the quarry bottom. The signs will meet the requirements of OAC 3745-20-07 (B)(1)(b).
- As no soil disturbing activities are allowed within the quarry bottom, OSHA asbestos awareness training set forth in 29 CFR 1926.1101(k)(9)(vii) is not required. Any personnel entering the quarry bottom will be briefed of the asbestos hazards.
- Periodic monitoring of LUCs, in the form of site inspections, is required to be conducted by the ARNG/OHARNG to confirm that the LUCs remain effective and still meet LUC objectives for continued remedy protectiveness. Site inspections are required to be conducted on an annual basis and inspections of the solid waste landfill are conducted in accordance with State of Ohio solid waste regulations and the Ohio Environmental Protection Agency (Ohio EPA) Director's Final Findings and Orders (Ohio EPA 2004). The required annual inspection is to be submitted to the Ohio EPA for review and approval.

If a LUC violation is identified, please contact Range Control at (614)336-6041 to report.

I have been briefed and understand the requirements and LUCs/restrictions at Ramsdell Quarry Landfill. I will comply with all requirements. I will complete the access log for RQL when obtaining the key and accessing the AOC.

Name	Company	Date

Appendix C-5. Sign In-Out Sheet for Ramsdell Quarry Landfill

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Sign In/Out Sheet for Ramsdell Quarry Landfill – Please sign in and out when entering and exiting the Ramsdell Quarry Landfill.
Please also note what activities were performed and what areas of the AOC were accessed.

Name/Company	Date	Time In	Time Out	Description of Activities Performed (i.e., mowing, gw sampling, etc)	Areas Accessed (please choose and check)
					<input type="checkbox"/> Quarry bottom <input type="checkbox"/> Groundwater monitoring wells <input type="checkbox"/> Landfill cap
					<input type="checkbox"/> Quarry bottom <input type="checkbox"/> Groundwater monitoring wells <input type="checkbox"/> Landfill cap
					<input type="checkbox"/> Quarry bottom <input type="checkbox"/> Groundwater monitoring wells <input type="checkbox"/> Landfill cap
					<input type="checkbox"/> Quarry bottom <input type="checkbox"/> Groundwater monitoring wells <input type="checkbox"/> Landfill cap
					<input type="checkbox"/> Quarry bottom <input type="checkbox"/> Groundwater monitoring wells <input type="checkbox"/> Landfill cap
					<input type="checkbox"/> Quarry bottom <input type="checkbox"/> Groundwater monitoring wells <input type="checkbox"/> Landfill cap
					<input type="checkbox"/> Quarry bottom <input type="checkbox"/> Groundwater monitoring wells <input type="checkbox"/> Landfill cap
					<input type="checkbox"/> Quarry bottom <input type="checkbox"/> Groundwater monitoring wells <input type="checkbox"/> Landfill cap
					<input type="checkbox"/> Quarry bottom <input type="checkbox"/> Groundwater monitoring wells <input type="checkbox"/> Landfill cap
					<input type="checkbox"/> Quarry bottom <input type="checkbox"/> Groundwater monitoring wells <input type="checkbox"/> Landfill cap