



**Department of  
Environmental  
Conservation**

**PART 360 Series Waste Tracking Document - Construction & Demolition Debris**

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

620

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): <u>Concrete</u>
<b>WASTE QUANTITY:</b>	_____ Tons <u>32</u> Cubic Yards   Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully</u> Address: <u>JFK Hangar # 7</u> City: <u>Queens</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u> Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: <u>Dana Contracting, Inc.</u> Receiving Facility Name: <u>Evergreen Recycling of Corona</u> <input type="checkbox"/> Chosen by Transporter Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>M. J. J.</u>	Date: <u>2/4/19</u>
<b>TRANSPORTER:</b> To be completed by Transporter Transporter Company Name: <u>Dana Contracting, Inc.</u>	DEC Permit/Registration No.: <u>Pending 2A-857</u>
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): <u>Robinson Morillo</u>	Phone: <u>917-501-6530</u> Plate No.: <u>54897PC</u>
Signature: <u>R. M.</u>	Date: <u>2/4/19</u>
<b>RECEIVING FACILITY:</b> To be completed by Receiving site   DEC Permit/Reg. No. (if applicable): _____	
Name: <u>Evergreen Recycling of Corona Inc.</u> Address: _____ City: <u>127-50 Northern Blvd.</u> State: <u>NY</u> Zip: <u>11368</u> Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
Describe all Discrepancies in type or quantity of waste: <u>Flushing, NY 11368</u> <u>718-205-8038</u>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: _____	Phone: _____
Signature: <u>SD</u>	Date: <u>2/4/19</u>
The completed tracking document for all waste types must be returned to the Generator within two weeks of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



**Department of  
Environmental  
Conservation**

DANA CONTRACTING TRUCK #101 JUN #16-267

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**  
This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

621

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): <u>Concrete</u>	
<b>WASTE QUANTITY:</b>	<u>      </u> Tons <u>32</u> Cubic Yards      Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>	
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully</u> Address: <u>JFK Hangar # 7</u> City: <u>Queens</u> State: <u>NY</u> Zip Code: _____	
<b>GENERATOR:</b> Name: <u>Tully</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>		
Authorized Representative of Generator: _____ Phone: _____		
Transporter Name: Dana Contracting, Inc.		
Receiving Facility Name: <u>Evergreen Recycling OF Co</u> <input type="checkbox"/> Chosen by Transporter Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>		
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.		
Signature: <u>M. J. M.</u>	Date: <u>2/04/19</u>	
<b>TRANSPORTER:</b> To be completed by Transporter Transporter Company Name: Dana Contracting, Inc.	DEC Permit/Registration No.: <u>Pending 2A-857</u>	
Describe all Discrepancies in type or quantity of waste: _____		
Driver Name (print): <u>Robinson Morillo</u>	Phone: <u>917-501-6530</u> Plate No.: <u>5489Z</u>	
Signature: <u>  </u>	Date: <u>2/04/19</u>	
<b>RECEIVING FACILITY:</b> To be completed by Receiving site      DEC Permit/Reg. No. (if applicable): _____		
Name: _____	Address: _____	
City: _____	State: _____ Zip: _____	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____		<u>Evergreen Recycling of Corona Inc</u> <u>127-50 Northern Blvd.</u> <u>Flushing N.Y. 11368</u> <u>718-205-8038</u>
Print Name: <u>Victor A. M.</u>	Phone: _____	
Signature: <u>Victor A. M.</u>	Date: <u>2/04/19</u>	
The completed tracking document for all waste types must be returned to the Generator within two weeks of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]		



**Department of  
Environmental  
Conservation**

DANA CONTRACTING TRUCK #101 Job #16-569

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2579

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): <u>Concrete</u>
<b>WASTE QUANTITY:</b>	<u>32</u> Tons <u>32</u> Cubic Yards Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully</u> Address: <u>JFK Hanger #7</u> City: <u>Queen</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u> Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: <b>Dana Contracting, Inc.</b> Receiving Facility Name: <u>Evergreen Recycling OF Corona</u> <input type="checkbox"/> Chosen by Transporter Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u> I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>J. Palma</u> Date: <u>2/4/19</u>	
<b>TRANSPORTER:</b> To be completed by Transporter Transporter Company Name: <u>Dana Contracting, Inc.</u>	DEC Permit/Registration No.: <u>2A-857</u>
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): <u>Robinson Marillo</u> Phone: <u>914-501-6530</u> Plate No.: <u>54897 PC</u> Signature: <u>J. Palma</u> Date: <u>2/4/19</u>	
<b>RECEIVING FACILITY:</b> To be completed by Receiving site DEC Permit/Reg. No. (if applicable): _____ Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
Describe all Discrepancies in type or quantity of waste: _____ Evergreen Recycling of Corona Inc. _____ I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law. _____ Print Name: <u>Victor Alba</u> Phone: <u>718-205-8038</u> Date: <u>2-4-19</u> Signature: <u>Victor Alba</u> Date: _____	
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



## DANA CONTRACTING

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2255

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
WASTE QUANTITY:	_____ Tons <u>32</u> Cubic Yards   Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully Construction</u> Address: <u>5 FL</u> City: <u>Cypress</u> State: <u>N.Y.</u> Zip Code: _____
GENERATOR: Name:	<u>Tully Construction</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-5 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>
Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: Dana Contracting, Inc.	
Receiving Facility Name:	<u>DEC</u> <input type="checkbox"/> Chosen by Transporter
Address:	<u>127-7 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11358</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	<u>J. Palusz</u> Date: <u>2/4/18</u>
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name:	Dana Contracting, Inc.
Describe all Discrepancies in type or quantity of waste: <u>Dirt &amp; Concrete</u>	
Driver Name (print):	<u>Willow Abren</u> Phone: _____ Plate No.: _____
Signature:	<u>W. Abren</u> Date: <u>2/4/19</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name:	<u>Evergreen Recycling of Corona Inc.</u> Address: _____
City:	<u>127-50 Northern Blvd.</u> State: <u>NY</u> Zip: <u>11368</u> Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: <u>718-205-8038</u>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name:	Phone: _____
Signature:	<u>J.P.</u> Date: <u>2/4/19</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	

Department of  
Environmental  
Conservation

DANA CONTRACTING

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of  
both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2256

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): <u>16569</u>
WASTE QUANTITY:	<u>32</u> Tons <u>Cubic Yards</u> Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>TULLY Construction</u> Address: <u>584</u> City: <u>Ridgewood</u> State: <u>NY</u> Zip Code: _____
GENERATOR: Name:	<u>TULLY Const</u> DEC Permit/Reg. No. (if applicable): _____
Address:	<u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>
Authorized Representative of Generator:	Phone: _____
Transporter Name:	Dana Contracting, Inc.
Receiving Facility Name:	<u>Evergreen</u> <input type="checkbox"/> Chosen by Transporter
Address:	<u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	<u>M.211</u> Date: <u>2/4/19</u>
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name:	Dana Contracting, Inc.
Describe all Discrepancies in type or quantity of waste: <u>Concrete &amp; DIRT</u>	
Driver Name (print): <u>Victor Alba</u>	Phone: _____   Plate No.: <u>69911P</u>
Signature:	Date: <u>2/4/19</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name:	Address: _____
City: _____	State: _____ Zip: _____ Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name:	<u>Victor Alba</u> Phone: _____   Date: <u>2/4/19</u>
Signature:	<u>Victor Alba</u> Date: <u>2/4/19</u>
The completed tracking document for all waste types must be returned to the Generator within two weeks of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



**Department of  
Environmental  
Conservation**

# DANA CONTRACTING

## Part 360 Series Waste Tracking Document - Construction & Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2706

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): <u>17</u>			
<b>WASTE QUANTITY:</b>	<u>  </u> Tons	<u>32</u> Cubic Yards	Check box to indicate quantity is estimated: <input type="checkbox"/>	
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully Construction</u> Address: <u>JFK #1</u> City: <u>Queens</u> State: <u>NY</u> Zip Code: <u>  </u>			
<b>GENERATOR:</b> Name: <u>Tully Const.</u> DEC Permit/Reg. No. (if applicable): <u>  </u> Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u> Authorized Representative of Generator: <u>  </u> Phone: <u>  </u> Transporter Name: <u>Dana Contracting, Inc.</u>				
Receiving Facility Name: <u>ENOC</u> <input type="checkbox"/> Chosen by Transporter Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>				
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Signature: <u>M. Murphy</u> Date: <u>  </u>				
<b>TRANSPORTER:</b> To be completed by Transporter Transporter Company Name: <u>Dana Contracting, Inc.</u>		DEC Permit/Registration No.: <u>2A-857</u>		
Describe all Discrepancies in type or quantity of waste: <u>Concrete</u>				
Driver Name (print): <u>Wilson ABLE</u> Signature: <u>W. Able</u>		Phone: <u>  </u> Plate No.: <u>69916PC</u> Date: <u>  </u>		
<b>RECEIVING FACILITY:</b> To be completed by Receiving site   DEC Permit/Reg. No. (if applicable): <u>  </u> Name: <u>  </u> Address: <u>  </u> City: <u>  </u> State: <u>  </u> Zip: <u>  </u> Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site				
Describe all Discrepancies in type or quantity of waste: <u>  </u>				
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Print Name: <u>Victor Albrecht</u> Phone: <u>718-205-8038</u> Signature: <u>Victor Albrecht</u> Date: <u>2/11/19</u>				
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]				



## DANA CONTRACTING

# W - 568

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2709

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input checked="" type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
WASTE QUANTITY:	_____ Tons <u>3.2</u> Cubic Yards   Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully Const</u> Address: <u>JFK Hanger - #17</u> City: <u>Jamaica</u> State: <u>NY</u> Zip Code: _____
GENERATOR: Name:	<u>Tully</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>N. Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: _____
Authorized Representative of Generator:	Phone: _____
Transporter Name:	Dana Contracting, Inc.
Receiving Facility Name:	<u>EROC</u> <input type="checkbox"/> Chosen by Transporter
Address:	City: <u>Corona</u> State: <u>NY</u> Zip: _____
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	Date: _____
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name:	Dana Contracting, Inc.
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print):	<u>Vincent Jackson</u> Phone: _____   Plate No.: <u>51458 PC</u>
Signature:	Date: <u>2-4-19</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name:	Address: _____
City:	State: _____ Zip: _____ Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name:	<u>Victor Alba</u> Phone: _____   Evergreen Recycling of Corona Inc <u>127-50 Northern Blvd.</u> <u>Flushing N.Y. 11368</u> <u>718-205-8038</u>
Signature:	Date: <u>2/4/19</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



## DANA CONTRACTING

70 10067

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2711

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input checked="" type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____			
<b>WASTE QUANTITY:</b>	_____ Tons	32	Cubic Yards	Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully</u> <u>const</u> Address: <u>JFK</u> <u>Hanger # 7</u> City: <u>Jamaica</u> State: <u>NY</u> Zip Code: _____			
<b>GENERATOR: Name:</b>	<u>Tully</u> DEC Permit/Reg. No. (if applicable): _____			
Address:	<u>11, Blvd</u>	City:	<u>Flushing</u>	State: <u>NY</u> Zip: _____
Authorized Representative of Generator:	Phone: _____			
Transporter Name:	Dana Contracting, Inc.			
Receiving Facility Name:	<input type="checkbox"/> Chosen by Transporter			
Address:	<u>EROC</u>	City:	<u>CORONA</u>	State: <u>NY</u> Zip: _____
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Signature:	Date: <u>2-4-19</u>			
<b>TRANSPORTER:</b> To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>			
Transporter Company Name:	Dana Contracting, Inc.			
Describe all Discrepancies in type or quantity of waste: _____				
Driver Name (print):	<u>Vincent Jackson</u>	Phone:	Plate No.: <u>51458 PC</u>	
Signature:	Date: <u>2-4-19</u>			
<b>RECEIVING FACILITY:</b> To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____			
Name:	Evergreen Recycling of Corona, Inc.			
City:	<u>127-50 Northern Blvd.</u>	State:	<u>NY</u>	Zip: _____ Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Flushing, NY 11360				
Describe all Discrepancies in type or quantity of waste: <u>718-205-8038</u>				
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Print Name:	Phone: _____			
Signature:	Date: <u>2/4/19</u>			
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]				



## DANA CONTRACTING

10/07

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2712

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input checked="" type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____		
WASTE QUANTITY:	Tons	32	Cubic Yards
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully</u> Address: <u>JFK Hangar #7</u> City: <u>Johnwick</u> State: <u>NY</u> Zip Code: _____		
GENERATOR: Name:	<u>Tully</u>		
Address:	<u>N. Blvd</u>	City: <u>Flushing</u>	State: <u>NY</u> Zip: _____
Authorized Representative of Generator:	Phone: _____		
Transporter Name: <u>Dana Contracting, Inc.</u>			
Receiving Facility Name:	<input type="checkbox"/> Chosen by Transporter		
Address:	<u>E ROC</u>	City: <u>CORONA</u>	State: <u>NY</u> Zip: _____
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.			
Signature:	Date: _____		
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>		
Transporter Company Name:	<u>Dana Contracting, Inc.</u>		
Describe all Discrepancies in type or quantity of waste: _____			
Driver Name (print):	<u>Vincent Jackson</u>	Phone: _____	Plate No.: <u>51458 PC</u>
Signature:	Date: <u>2-4-19</u>		
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____		
Name:	Address: _____		
City:	State:	Zip:	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____ <b>Evergreen Recycling of Corona Inc</b> <u>127-50 Northern Blvd.</u> <u>Flushing N.Y. 11368</u> <u>718-205-8038</u>			
Print Name:	Phone: _____		
Signature:	Date: <u>2/4/19</u>		
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]			



## DANA CONTRACTING

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2694

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input checked="" type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): <i>Mixed</i>
WASTE QUANTITY:	Tons <u>13</u> Cubic Yards <input type="checkbox"/> Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <i>Tully</i> Address: <i>White Plains Rd</i> City: <i>Bronx</i> State: <i>NY</i> Zip Code: _____
GENERATOR: Name:	<i>Tully</i> DEC Permit/Reg. No. (if applicable): _____ Address: _____ City: <i>Queens</i> State: <i>NY</i> Zip: _____ Authorized Representative of Generator: _____ Phone: _____
Transporter Name:	Dana Contracting, Inc.
Receiving Facility Name:	<input type="checkbox"/> Chosen by Transporter
Address:	City: _____ State: _____ Zip: _____
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	Date: <i>1-24-19</i>
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <i>2A-857</i>
Transporter Company Name:	Dana Contracting, Inc.
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): <i>Steve Felt</i>	Phone: <i>518-7694</i> Plate No: <i>24-19</i>
Signature:	Date: <i>24-19</i>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name: <i>Evergreen Recycling of Corona Inc.</i>	Address: _____
City: <i>127-50 Northern Blvd.</i>	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site <i>Flushing N.Y. 11368</i>
Describe all Discrepancies in type or quantity of waste: <i>70-205-8038</i>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: _____	Phone: _____
Signature: <i>TD</i>	Date: <i>2/4/19</i>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks of receipt of the waste</u> . Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



## DANA CONTRACTING

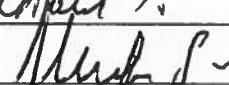
#16569

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2714

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input checked="" type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input checked="" type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____		
WASTE QUANTITY:	Tons	32	Cubic Yards
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully</u> Address: <u>JFK Hanger #7</u> City: <u>JAMAICA</u> State: <u>NY</u> Zip Code: _____		
GENERATOR: Name:	<u>Tully</u> DEC Permit/Reg. No. (if applicable): _____		
Address:	<u>N. Blvd</u>	City:	<u>Flushing</u> State: <u>NY</u> Zip: _____
Authorized Representative of Generator:	Phone: _____		
Transporter Name:	Dana Contracting, Inc.		
Receiving Facility Name:	<u>EROC</u> <input type="checkbox"/> Chosen by Transporter		
Address:	City: <u>CORONA</u> State: <u>NY</u> Zip: _____		
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.			
Signature:	 Date: <u>2-5-19</u>		
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>		
Transporter Company Name:	Dana Contracting, Inc.		
Describe all Discrepancies in type or quantity of waste: _____			
Driver Name (print):	<u>Vincent Jackson</u> Phone: _____ Plate No.: <u>51458 PC</u>		
Signature:	 Date: <u>2-5-19</u>		
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____		
Name:	<u>127-50 Northern Blvd.</u> Address: _____		
City:	<u>Flushing N.Y.</u>	Zip:	<u>11368</u> Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
<u>718-205-8038</u> Describe all Discrepancies in type or quantity of waste: _____			
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.			
Print Name:	<u>Michael J.</u> Phone: <u>718-201-8038</u>		
Signature:	 Date: <u>02/05/2019</u>		
<b>The completed tracking document for all waste types must be returned to the Generator within two weeks of receipt of the waste.</b> Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]			



## DANA CONTRACTING

# 16569

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2715

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input checked="" type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____		
WASTE QUANTITY:	Tons	32	Cubic Yards
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully</u> Address: <u>JFK</u> <u>Hanger #7</u> City: <u>Jamaica</u> State: <u>NY</u> Zip Code: _____		
GENERATOR: Name:	<u>Tully</u>		
Address:	<u>N. Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: _____		
Authorized Representative of Generator:	Phone: _____		
Transporter Name:	Dana Contracting, Inc.		
Receiving Facility Name:	<u>ERAC</u> <input type="checkbox"/> Chosen by Transporter		
Address:	<u>Corona</u> City: <u>Corona</u> State: <u>NY</u> Zip: _____		
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.			
Signature:	Date: <u>2-5-19</u>		
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>		
Transporter Company Name:	Dana Contracting, Inc.		
Describe all Discrepancies in type or quantity of waste: _____			
Driver Name (print):	<u>Vincent Jackson</u>	Phone:	Plate No.: <u>614581C</u>
Signature:	Date: <u>2-5-19</u>		
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____		
Name:	Address: _____		
City:	State:	Zip:	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____			
<u>Evergreen Recycling of Corona Inc</u> <u>127-50 Northern Blvd.</u> <u>Flushing N.Y. 11368</u> <u>718-205-8038</u>			
Print Name:	Phone: _____		
Signature:	Date: <u>2-5-19</u>		
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.			
The completed tracking document for all waste types must be returned to the Generator within two weeks of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]			



## DANA CONTRACTING

4416567

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2719

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input checked="" type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
WASTE QUANTITY:	Tons <u>32</u> Cubic Yards <u>Tully Job #16-569</u> <input type="checkbox"/> Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully</u> Address: <u>JFK Hanger #7</u> City: <u>Jamaica</u> , State: <u>NY</u> Zip Code: _____
GENERATOR: Name:	<u>Tully</u> DEC Permit/Reg. No. (if applicable): _____
Address:	Address: <u>St. Blk</u> City: <u>Flushing</u> State: <u>NY</u> Zip: _____
Authorized Representative of Generator:	Phone: _____
Transporter Name:	Dana Contracting, Inc.
Receiving Facility Name:	<u>ERUC</u> <input type="checkbox"/> Chosen by Transporter
Address:	Address: <u>N. Blvd</u> City: <u>Flushing Corona</u> State: <u>NY</u> Zip: _____
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	Date: <u>2-5-19</u>
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name:	Dana Contracting, Inc.
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print):	<u>Vincent Jenkins</u> Phone: _____ Plate No.: <u>51458 RC</u>
Signature:	Date: <u>2-5-19</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name:	Address: <u>Evergreen Recycling of Corona Inc.</u>
City:	State: <u>NY</u> Zip: <u>11368</u> Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: <u>Flushing NY 11368</u>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name:	Phone: <u>718-205-8038</u>
Signature:	Date: <u>02/05/2019</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



DANA CONTRACTING TRUCK #105 Job #16-569

## Department of Environmental Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2257

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): <u>MIX</u>		
WASTE QUANTITY:	<u>          </u> Tons	<u>32</u> Cubic Yards	Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully</u> Address: <u>JFK Hanger #7</u> City: <u>Queen</u> State: <u>NY</u> Zip Code: <u>          </u>		
GENERATOR: Name:	<u>Tully</u> DEC Permit/Reg. No. (if applicable): <u>          </u>		
Address:	<u>127-50 Northern Blvd</u>	City: <u>Flushing</u>	State: <u>NY</u> Zip: <u>11368</u>
Authorized Representative of Generator:	Phone: <u>          </u>		
Transporter Name:	Dana Contracting, Inc.		
Receiving Facility Name:	<u>Evergreen Recycling</u> <input type="checkbox"/> Chosen by Transporter		
Address:	<u>127-50 Northern Blvd</u>	City: <u>Flushing</u>	State: <u>NY</u> Zip: <u>11368</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.			
Signature:	<u>Alain</u> Date: <u>2/5/19</u>		
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>		
Transporter Company Name:	Dana Contracting, Inc.		
Describe all Discrepancies in type or quantity of waste: <u>          </u>			
Driver Name (print):	<u>Robinson Morillo</u>	Phone: <u>917-501-6530</u>	Plate No.: <u>51464PC</u>
Signature:	<u>          </u> Date: <u>2/5/19</u>		
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): <u>          </u>		
Name:	<u>Evergreen Recycling of Corona Inc.</u>	Address: <u>          </u>	
City:	<u>127-50 Northern Blvd.</u>	State: <u>          </u>	Zip: <u>          </u> Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Flushing N.Y. 11368			
Describe all Discrepancies <u>718-205-8038</u> of waste: <u>          </u>			
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.			
Print Name:	<u>Michael S. Murphy</u>	Phone:	<u>718-205-8038</u>
Signature:	<u>          </u> Date: <u>02/05/2019</u>		
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]			



Department of  
Environmental  
Conservation

Part 360 Series Waste Tracking Document - Construction & Demolition Debris  
This form may be used to satisfy the tracking document requirements of  
both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2258

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): <u>Mix</u>			
WASTE QUANTITY:	_____ Tons <u>32</u> Cubic Yards		Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>	
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully</u> Address: <u>JFK Hanger #7</u> City: <u>Queen</u> State: <u>NY</u> Zip Code: _____			
GENERATOR: Name:	<u>Tully</u> DEC Permit/Reg. No. (if applicable): _____			
Address:	<u>127-50 Northern Blvd</u>		City: <u>Flushing</u>	State: <u>NY</u> Zip: <u>11368</u>
Authorized Representative of Generator:	Phone: _____			
Transporter Name:	<u>Dana Contracting, Inc.</u>			
Receiving Facility Name:	<u>Evergreen Recycling of Corona</u>		<input type="checkbox"/> Chosen by Transporter	
Address:	<u>127-50 Northern</u>		City: <u>Flushing</u>	State: <u>NY</u> Zip: <u>11368</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Signature:	<u>M. J. D.</u>		Date: <u>2/5/19</u>	
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>			
Transporter Company Name:	<u>Dana Contracting, Inc.</u>			
Describe all Discrepancies in type or quantity of waste: _____				
Driver Name (print):	<u>Robinson Morillo</u>		Phone: <u>917-501-6530</u> Plate No.: <u>51464PC</u>	
Signature:	<u>P. J. D.</u>		Date: <u>2/5/19</u>	
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____			
Name:	<u>Evergreen Recycling of Corona Inc.</u> Address: _____			
City:	<u>127-50 Northern Blvd.</u>	State:	Zip:	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site <u>Flushing N.Y. 11368</u>
Describe all Discrepancies in type or quantity of waste: <u>718-203-8038</u>				
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Print Name:	<u>Michael J. D.</u>		Phone: <u>718-201-8038</u>	
Signature:	<u>M. J. D.</u>		Date: <u>02/05/2019</u>	
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]				



DANA CONTRACTING TRUCK#105 JOB#16-569

## Department of Environmental Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2267

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): <u>32 Concrete</u>
<b>WASTE QUANTITY:</b>	Tons <u>32</u> Cubic Yards   Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully</u> Address: <u>JFK Hanger #7</u> City: <u>Queens</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>	
Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: Dana Contracting, Inc.	
Receiving Facility Name: <u>Evergreen Recycling of Corona</u> <input type="checkbox"/> Chosen by Transporter Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>Y. Tully</u>	Date: <u>2/5/19</u>
<b>TRANSPORTER:</b> To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name: Dana Contracting, Inc.	
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): <u>Robinson Morillo</u>	Phone: <u>917-501-6530</u> Plate No.: <u>51464PC</u>
Signature: <u>Robinson Morillo</u>	Date: <u>2/5/19</u>
<b>RECEIVING FACILITY:</b> To be completed by Receiving site DEC Permit/Reg. No. (if applicable): _____	
Name: _____	Address: _____
City: _____	State: _____ Zip: _____ Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: <u>Vicki Alba</u>	Phone: <u>718-205-8038</u>
Signature: <u>Vicki Alba</u>	Date: <u>2-5-19</u>
The completed tracking document for all waste types must be returned to the Generator within two weeks of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



## DANA CONTRACTING

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2266

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
WASTE QUANTITY:	_____ Tons <u>31</u> Cubic Yards Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully Construction</u> Address: <u>JFK Airport</u> City: <u>Queens</u> State: <u>Ny</u> Zip Code: _____
GENERATOR: Name: <u>Tully Construction</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>Ny</u> Zip: <u>11368</u>	
Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: <u>Dana Contracting, Inc.</u>	
Receiving Facility Name: <u>EROC</u>	<input type="checkbox"/> Chosen by Transporter
Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>Ny</u> Zip: <u>11368</u>	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>J. Palm</u>	Date: _____
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name: <u>Dana Contracting, Inc.</u>	
Describe all Discrepancies in type or quantity of waste: <u>Concrete : Dirt</u>	
Driver Name (print): <u>DAVID AIRES</u>	Phone: _____ Plate No.: <u>69919-Pc</u>
Signature: <u>[Signature]</u>	Date: <u>2/5/19</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name: _____	Address: _____
City: _____	State: _____ Zip: _____ Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____	
<u>Evergreen Recycling of Corona Inc.</u> <u>127-50 Northern Blvd.</u> <u>Flushing N.Y. 11368</u>	
Print Name: <u>Vickie Alba</u>	Phone: <u>718-205-8038</u>
Signature: <u>Vickie Alba</u>	Date: <u>2.5.19</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



**Department of  
Environmental  
Conservation**

**DANA CONTRACTING**

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2268

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
<b>WASTE QUANTITY:</b>	_____ Tons <u>31</u> Cubic Yards <i>Tully Job #16569</i> Check box to indicate quantity is estimated: <input type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully Construction</u> Address: <u>JFK Airport</u> City: <u>Queens</u> State: <u>Ny</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully Construction</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>Ny</u> Zip: <u>11368</u>	
Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: <u>Dana Contracting, Inc.</u>	
Receiving Facility Name: <u>EROC</u>	<input type="checkbox"/> Chosen by Transporter
Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>Ny</u> Zip: <u>11368</u>	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>J Palissi</u>	Date: <u>02.05.2019</u>
<b>TRANSPORTER:</b> To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name: <u>Dana Contracting, Inc.</u>	
Describe all Discrepancies in type or quantity of waste: <u>Concrete : Dirt</u>	
Driver Name (print): <u>DAVID AIRES</u>	Phone: _____
Signature: <u>[Signature]</u>	Date: <u>2/5/19</u>
Plate No.: <u>69919-Pc</u>	
<b>RECEIVING FACILITY:</b> To be completed by Receiving site   DEC Permit/Reg. No. (if applicable): _____	
Name: <u>Evergreen Recycling of Corona Inc.</u>	Address: _____
City: <u>127-50 Northern Blvd</u>	Zip: _____ Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Flushing N.Y. 11368	
Describe all Discrepancies in type or quantity of waste: <u>718-205-8038</u>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: <u>Michael J. Palissi</u>	Phone: <u>718.205.8038</u>
Signature: <u>[Signature]</u>	Date: <u>02/05/2019</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks of receipt of the waste</u> . Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



## DANA CONTRACTING

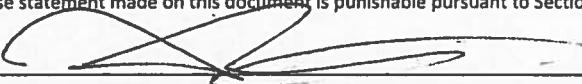
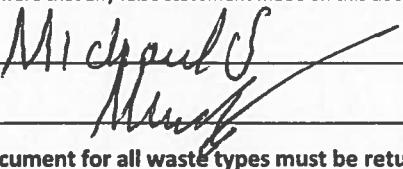
JULY 11 2019

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2269

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____			
WASTE QUANTITY:	_____ Tons	31	Cubic Yards	Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully Construction</u> Address: <u>JFK Airport</u> City: <u>Queens</u> State: <u>Ny</u> Zip Code: _____			
GENERATOR: Name:	<u>Tully Construction</u> DEC Permit/Reg. No. (if applicable): _____			
Address:	<u>127-50 Northern Blvd</u>	City:	<u>Flushing</u>	State: <u>Ny</u> Zip: <u>11368</u>
Authorized Representative of Generator:	Phone: _____			
Transporter Name:	<u>Dana Contracting, Inc.</u>			
Receiving Facility Name:	<u>EROC</u> <input type="checkbox"/> Chosen by Transporter			
Address:	<u>127-50 Northern Blvd</u>	City:	<u>Flushing</u>	State: <u>Ny</u> Zip: <u>11368</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Signature:			Date:	<u>2/5/19</u>
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>			
Transporter Company Name:	<u>Dana Contracting, Inc.</u>			
Describe all Discrepancies in type or quantity of waste: <u>R Concrete - Dirt</u>				
Driver Name (print):	<u>DAVID AIRES</u>		Phone:	Plate No.: <u>699197P</u>
Signature:			Date:	<u>2/5/19</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____			
Name:	<u>Evergreen Recycling of Corona Inc.</u> <u>127-50 Northern Blvd.</u>			
City:	<u>Flushing N.Y. 11368</u>	State:	Zip:	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____				
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Print Name:	<u>Michael S</u>		Phone:	<u>718-205-8038</u>
Signature:			Date:	<u>02/05/2019</u>
The completed tracking document for all waste types must be returned to the Generator within two weeks of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]				



## DANA CONTRACTING

10-701

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2259

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
WASTE QUANTITY:	_____ Tons <u>32</u> Cubic Yards <input type="checkbox"/> Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>TULLY CONST</u> Address: <u>JFK</u> . City: <u>Queens</u> State: <u>NY</u> .   Zip Code: _____
GENERATOR: Name:	<u>TULLY CONST</u> DEC Permit/Reg. No. (if applicable): _____
Address:	<u>127-50 Northern Blvd</u> City: <u>Queens</u> State: <u>NY</u> Zip: <u>11368</u>
Authorized Representative of Generator:	<input checked="" type="checkbox"/> Phone: _____
Transporter Name:	Dana Contracting, Inc.
Receiving Facility Name:	<u>ENIC</u> <input type="checkbox"/> Chosen by Transporter
Address:	<u>127-50 Northern Blvd</u> City: <u>Queens</u> State: <u>NY</u> Zip: <u>11368</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	<u>M. Tully</u> Date: _____
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name:	Dana Contracting, Inc.
Describe all Discrepancies in type or quantity of waste: <u>MIX DIRT, CONCRETE, ASPHALT.</u>	
Driver Name (print):	<u>WILSON ABELU</u> Phone: _____
Signature:	<u>Wm Abel</u> Date: <u>2-6-19</u>
Plate No.: <u>69919PL</u>	
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name:	Address: _____
City: _____	State: _____ Zip: _____
Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
Describe all Discrepancies in type or quantity of waste: _____	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name:	<u>VICKY ALB</u> Phone: <u>718-205-8038</u>
Signature:	<u>VICKY ALB</u> Date: <u>2-6-19</u>
Evergreen Recycling of Corona LLC 127-50 Northern Blvd. Flushing N.Y. 11368	
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2264

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
<b>WASTE QUANTITY:</b>	_____ Tons <u>32</u> Cubic Yards   Check box to indicate quantity is estimated: <input type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully Constr</u> Address: <u>JFK</u> City: <u>Queens</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully Construc</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 Northern Blvd.</u> City: <u>Queens</u> State: <u>NY</u> Zip: <u>11368</u>	
Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: Dana Contracting, Inc.	
Receiving Facility Name: <u>ENAC</u>	<input type="checkbox"/> Chosen by Transporter
Address: <u>127-50 Northern Blvd</u> City: <u>Queens</u> State: <u>NY</u> Zip: <u>11368</u>	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>J. Palau</u>	Date: _____
<b>TRANSPORTER:</b> To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name: Dana Contracting, Inc.	
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): <u>Wilson Abalos</u>	Phone: _____ Plate No.: <u>69819P</u>
Signature: <u>W. Abalos</u>	Date: <u>2-6-19</u>
RECEIVING FACILITY: <u>Evergreen Recycling of Corona Inc</u> DEC Permit/Reg. No. (if applicable): _____	
Name: <u>127-50 Northern Blvd.</u>	Address: _____
City: <u>Flushing N.Y. 11368</u>	State: <u>Zip: 11368</u> Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site <u>718-205-8038</u>
Describe all Discrepancies in type or quantity of waste: _____	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: _____	Phone: _____
Signature: <u>J. Palau</u>	Date: <u>2/6/19</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



DANA CONTRACTING

1056

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2265

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
WASTE QUANTITY:	Tons <u>32</u> Cubic Yards <input type="checkbox"/> Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully Const.</u> Address: <u>5FLK.</u> City: <u>Queens</u> State: <u>NY</u> Zip Code: _____
GENERATOR: Name:	<u>TULLY CONST.</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 Northern Blvd</u> City: <u>Queens</u> State: <u>NY</u> Zip: <u>11368</u>
Authorized Representative of Generator:	<u>X</u> Phone: _____
Transporter Name:	Dana Contracting, Inc.
Receiving Facility Name:	<u>ENOC</u> <input type="checkbox"/> Chosen by Transporter
Address:	<u>127-50 Northern Blvd</u> City: <u>Queens</u> State: <u>NY</u> Zip: <u>11368</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	<u>MJW</u> Date: <u>2/6/19</u>
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name:	Dana Contracting, Inc.
Describe all Discrepancies in type or quantity of waste: <u>MIX DIRT, CONCRETE, ASHES!!.</u>	
Driver Name (print): <u>Wilson Abreu</u>	Phone: _____ Plate No.: <u>69919PC</u>
Signature: <u>W-A</u>	Date: <u>2-6-19</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name:	Address: _____
City: _____ State: _____ Zip: _____	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____	
Evergreen Recycling of Corona Inc. 127-50 Northern Blvd. Flushing N.Y. 11368	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: <u>Vicki Abra</u>	Phone: <u>718-205-8038</u>
Signature: <u>Vicki Abra</u>	Date: <u>2-6-19</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



**Department of  
Environmental  
Conservation**

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

608

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): <i>H.D.</i>	<i>76.509</i>
<b>WASTE QUANTITY:</b>	Tons <i>32</i> Cubic Yards	Check box to indicate quantity is estimated: <input type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <i>Tully Const</i> Address: <i>Kennedy Air port</i> City: _____ State: _____ Zip Code: _____	
<b>GENERATOR:</b> Name: <i>Tully Const,</i> DEC Permit/Reg. No. (if applicable): _____ Address: <i>127-50 Northern Blvd</i> City: <i>Flushing</i> State: <i>NY</i> Zip: <i>11368</i>		
Authorized Representative of Generator: _____	Phone: _____	
Transporter Name: <b>Dana Contracting, Inc.</b>		
Receiving Facility Name: <i>Eric</i>	<input type="checkbox"/> Chosen by Transporter	
Address: <i>127-50 Northern Blvd</i> City: <i>Flushing</i> State: _____ Zip: _____		
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.		
Signature: <i>H. W. Tully</i>	Date: <i>2/10/19</i>	
<b>TRANSPORTER:</b> To be completed by Transporter	DEC Permit/Registration No.: <i>Pending 2A-857</i>	
Transporter Company Name: <b>Dana Contracting, Inc.</b>		
Describe all Discrepancies in type or quantity of waste: _____		
Driver Name (print): <i>Paul Abu</i>	Phone: _____	Plate No.: <i>54897PC</i>
Signature: <i>R</i>	Date: <i>2/10/19</i>	
<b>RECEIVING FACILITY:</b> To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____	
Name: <i>EverGreen Recycling of Corona</i>	Address: <i>127-50 Northern Blvd</i>	
City: <i>Flushing</i> State: <i>NY</i> Zip: <i>11368</i>	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
Describe all Discrepancies in type or quantity of waste: _____		
<i>Evergreen Recycling of Corona Inc.</i>		
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.		
Print Name: <i>Vicki A. Albog</i>	Phone: _____	<i>127-50 Northern Blvd. Flushing N.Y. 11368 718-205-8038</i>
Signature: <i>Vicki A. Albog</i>	Date: <i>2/10/19</i>	
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]		



**Department of  
Environmental  
Conservation**

DANA CONTRACTING

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

FT / 01

609

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): <u>Mix</u> <span style="float: right;">16569</span>
<b>WASTE QUANTITY:</b>	Tons <u>32</u> Cubic Yards <input type="checkbox"/> Check box to indicate quantity is estimated: <input type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully Const</u> Address: <u>Kennedy Airport</u> City: _____ State: _____ Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully Const</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u> Authorized Representative of Generator: <u>X Mark Tully</u> Phone: _____ Transporter Name: Dana Contracting, Inc.	
Receiving Facility Name: <u>Ever Green Recycling Of Corona</u> <input type="checkbox"/> Chosen by Transporter Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>H.C.W.</u>	Date: <u>2/6/19</u>
<b>TRANSPORTER:</b> To be completed by transporter   DEC Permit/Registration No.: <u>Pending 2A-857</u> Transporter Company Name: Dana Contracting, Inc.	
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): <u>Mark Tully</u>	Phone: _____ Plate No.: <u>54897 XC</u>
Signature: <u>R.D.</u>	Date: <u>2/6/19</u>
<b>RECEIVING FACILITY:</b> To be completed by Receiving site   DEC Permit/Reg. No. (if applicable): _____ Name: <u>EverGreen Recycling Of Corona</u> Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u> Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
Describe all Discrepancies in type or quantity of waste: _____	
<u>Evergreen Recycling of Corona Inc.</u> <u>127-50 Northern Blvd.</u> <u>Flushing, N.Y. 11368</u>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: <u>Vicely of Inc.</u>	Phone: <u>718-205-8038</u>
Signature: <u>Vicely of Inc.</u>	Date: <u>2/6/19</u>
The completed tracking document for all waste types must be returned to the Generator within two weeks of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

610

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): <u>Mix</u>			
WASTE QUANTITY:	Tons <u>32</u>		Cubic Yards	Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully Const</u> Address: <u>Kennedy Airport</u> City: <u>Queens</u> State: <u>NY</u> Zip Code: _____			
GENERATOR: Name:	<u>Tully Const</u> DEC Permit/Reg. No. (if applicable): _____			
Address:	<u>127-50 Northern Blvd</u>		City: <u>Flushing</u>	State: <u>NY</u> Zip: <u>11368</u>
Authorized Representative of Generator:	<u>Mark Tully</u> Phone: _____			
Transporter Name:	Dana Contracting, Inc.			
Receiving Facility Name:	<u>Ever Green Recycling Of Coors</u> <input type="checkbox"/> Chosen by Transporter			
Address:	<u>127-50 Northern Blvd</u>		City: <u>Flushing</u>	State: <u>NY</u> Zip: <u>11368</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Signature:	<u>J. Calise</u>		Date: <u>2/6/19</u>	
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>Pending 2A-857</u>			
Transporter Company Name:	Dana Contracting, Inc.			
Describe all Discrepancies in type or quantity of waste: _____				
Driver Name (print): <u>Randy</u>	Phone: _____		Plate No.: <u>54897 RC</u>	
Signature: <u>Randy</u>			Date: <u>2/6/19</u>	
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____			
Name: <u>Ever Green Recycling Of Coors</u>	Address: <u>127-50 Northern Blvd</u>			
City: <u>Flushing</u>	State: <u>NY</u>	Zip: <u>11368</u>	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
Describe all Discrepancies in type or quantity of waste: _____				
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Print Name: _____	Phone: _____			
Signature: <u>J. Calise</u>	Date: <u>2/6/19</u>			
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]				



**Department of  
Environmental  
Conservation**

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**  
 This form may be used to satisfy the tracking document requirements of  
 both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

615

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): <u>MIX</u>
<b>WASTE QUANTITY:</b>	_____ Tons <u>32</u> Cubic Yards   Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully</u> Address: <u>JFK Hanger #7</u> City: <u>Queen</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u> Authorized Representative of Generator: _____ Phone: _____ Transporter Name: <u>Dana Contracting, Inc.</u> Receiving Facility Name: <u>Evergreen Recycling of Corona</u> , <input type="checkbox"/> Chosen by Transporter Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>MWY</u>	Date: <u>2/6/19</u>
<b>TRANSPORTER:</b> To be completed by Transporter Transporter Company Name: <u>Dana Contracting, Inc.</u>	DEC Permit/Registration No.: <u>Pending 2A-857</u>
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): <u>Robinson Morillo</u> Phone: <u>917-501-6530</u> Plate No.: <u>51464 PC</u> Signature: <u>R. Morillo</u> Date: <u>2/6/19</u>	
<b>RECEIVING FACILITY:</b> To be completed by Receiving site DEC Permit/Reg. No. (if applicable): _____	
Name: _____ Address: _____	
City: _____ State: _____ Zip: _____ Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
Describe all Discrepancies in type or quantity of waste: _____	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: <u>Vince A/LB</u> Phone: <u>7718-205-8038</u> Signature: <u>Vince A/LB</u> Date: <u>2/6/19</u>	
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	

Department of  
Environmental  
Conservation

DANA CONTRACTING TRUCK#105 JOB#16-564

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

619

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input checked="" type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): <u>MIX</u>			
WASTE QUANTITY:	_____ Tons	<u>32</u> Cubic Yards	Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>	
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully</u> Address: <u>JFK Hanger #7</u> City: <u>Queen</u> State: <u>NY</u> Zip Code: _____			
GENERATOR: Name:	<u>Tully</u> DEC Permit/Reg. No. (if applicable): _____			
Address:	<u>127-50 Northern Blvd</u>	City:	<u>Flushing</u>	State: <u>NY</u> Zip: <u>11368</u>
Authorized Representative of Generator:	Phone: _____			
Transporter Name:	<u>Dana Contracting, Inc.</u>			
Receiving Facility Name:	<u>Evergreen Recycling of Corona</u>			<input type="checkbox"/> Chosen by Transporter
Address:	<u>127-50 Northern Blvd.</u>	City:	<u>Flushing</u>	State: <u>NY</u> Zip: <u>11368</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Signature:	<u>M. J. Wiley</u>		Date: <u>2/6/19</u>	
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>Pending 2A-857</u>			
Transporter Company Name:	<u>Dana Contracting, Inc.</u>			
Describe all Discrepancies in type or quantity of waste: _____				
Driver Name (print):	<u>Robinson Morillo</u>	Phone:	<u>917-501-6530</u>	Plate No.: <u>51464PC</u>
Signature:	<u>R. Morillo</u>		Date: <u>2/6/19</u>	
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____			
Name:	<u>127-50 Northern Blvd.</u>	Address:	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
City:	<u>Flushing N.Y. 11368</u>	Zip:		
Describe all Discrepancies in type or quantity of waste: _____				
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Print Name:	<u>Michael J. Wiley</u>		Phone:	<u>718-205-8038</u>
Signature:	<u>M. J. Wiley</u>		Date:	<u>02/06/2019</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]				

**Department of Environmental Conservation**

DANA CONTRACTING TRUCK #105 JUN 10 201

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**  
This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2572

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): <u>Mix</u>
<b>WASTE QUANTITY:</b>	_____ Tons <u>32</u> Cubic Yards Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully</u> Address: <u>JFK Hanger #7</u> City: <u>Queen</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>	
Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: Dana Contracting, Inc.	
Receiving Facility Name: <u>Evergreen Recycling of Corona</u> Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>	<input type="checkbox"/> Chosen by Transporter
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>J. Palma</u>	Date: <u>2/6/19</u>
<b>TRANSPORTER:</b> To be completed by Transporter Transporter Company Name: Dana Contracting, Inc.	DEC Permit/Registration No.: <u>2A-857</u>
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): <u>Robinson Morillo</u> Signature: <u>J. Palma</u>	Phone: <u>917-501-6530</u> Plate No.: <u>51464PC</u>
RECEIVING FACILITY: To be completed by Receiving site Name: <u>Evergreen Recycling of Corona, Inc.</u> Address: <u>127-50 Northern Blvd.</u> City: <u>Flushing N.Y. 11368</u> State: <u>NY</u>	
Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
Describe all Discrepancies in type or quantity of waste: <u>718-205-0038</u>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: _____ Signature: <u>J. Palma</u>	Phone: _____ Date: <u>2/6/19</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



**Department of  
Environmental  
Conservation**

**DANA CONTRACTING**

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2260

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
<b>WASTE QUANTITY:</b>	_____ Tons <u>32</u> Cubic Yards <input type="checkbox"/> Check box to indicate quantity is estimated: <input type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>TULY CONSTRUCTION</u> Address: <u>JFK HENAGER 7</u> City: <u>QUEENS</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>TULY</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 NORTH 10th BLW</u> City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>11043</u> Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: Dana Contracting, Inc. Receiving Facility Name: <u>EMC</u> <input type="checkbox"/> Chosen by Transporter Address: <u>127-50 NORTH 10th BLW</u> City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>11043</u>	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>X</u>	Date: <u>2-6-19</u>
<b>TRANSPORTER:</b> To be completed by Transporter Transporter Company Name: Dana Contracting, Inc.	DEC Permit/Registration No.: <u>2A-857</u>
Describe all Discrepancies in type or quantity of waste: <u>MIX GROUT</u>	
Driver Name (print): <u>ANTUOS</u>	Phone: _____ Plate No.: _____
Signature: <u>wave</u>	Date: <u>2-6-19</u>
<b>RECEIVING FACILITY:</b> To be completed by Receiving site   DEC Permit/Reg. No. (if applicable): _____	
Name: <u>EMC</u>	Address: _____
City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>11043</u>	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: _____	Phone: _____
Signature: <u>SD</u>	Date: <u>2/6/19</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



## DANA CONTRACTING

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2669

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
WASTE QUANTITY:	Tons <u>32</u> Cubic Yards   Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>TULLY CONSTRUCTION</u> Address: <u>JFK HANGER 7</u> City: <u>QUEENS</u> State: <u>NY</u> Zip Code: _____
GENERATOR: Name:	<u>TULLY</u> DEC Permit/Reg. No. (if applicable): Address: <u>127-50 NORTHERN BLU</u> City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>110431</u>
Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: <u>Dana Contracting, Inc.</u>	
Receiving Facility Name:	<u>EMOC</u> <input type="checkbox"/> Chosen by Transporter
Address:	<u>127-50 NORTHERN BLU</u> City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>110431</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	<u>A.R.</u> Date: <u>2-6-14</u>
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name:	<u>Dana Contracting, Inc.</u>
Describe all Discrepancies in type or quantity of waste: <u>MIX LOAD</u>	
Driver Name (print):	<u>ARTURO</u> Phone: _____ Plate No.: _____
Signature:	<u> </u> Date: <u>2-6-14</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name:	<u>EMOC</u> Address: _____
City:	<u>FLUSHING</u> State: <u>NY</u> Zip: <u>110431</u> Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____	
Evergreen Recycling of Corona Inc. <u>127-50 Northern Blvd</u> <u>Flushing, N.Y. 11368</u> <u>718-205-8038</u>	
Print Name:	<u>Vicki Alba</u> Phone: _____
Signature:	<u>Vicki Alba</u> Date: <u>2-6-14</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



## DANA CONTRACTING

JULY 10 2019

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2670

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____			
WASTE QUANTITY:	_____ Tons	32	Cubic Yards	Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: JULY CONSTRUCTION Address: JFK HANGER 7 City: QUEENS      State: NY      Zip Code: _____			
GENERATOR: Name:	DEC Permit/Reg. No. (if applicable): Address: 127-50 MORTON BLW      City: FLUSHING      State: NY      Zip: 11045 Authorized Representative of Generator: _____ Phone: _____			
Transporter Name:	Dana Contracting, Inc. Receiving Facility Name: EMC Address: 127-50 MORTON BLW      City: FLUSHING      State: NY      Zip: 11045 <input type="checkbox"/> Chosen by Transporter I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.			
Signature:	Date: 2-6-19			
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: 2A-857 Transporter Company Name: Dana Contracting, Inc.			
Describe all Discrepancies in type or quantity of waste: MIX LOAD				
Driver Name (print):	ARUBHO	Phone:	Plate No.: _____	
Signature:	Date: 2-6-19			
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): Name: EMC Address: City: FLUSHING      State: NY      Zip: 11045 Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site			
Describe all Discrepancies in type or quantity of waste: _____				
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Print Name:	RD	Phone:	_____	
Signature:	Date: 2/6/19			
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks of receipt of the waste</u> . Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]				



## DANA CONTRACTING

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

TH 564

2710

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input checked="" type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____			
<b>WASTE QUANTITY:</b>	Tons	32	Cubic Yards	Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: July Address: JFK Hanger #7 City: Jamaica   State: NY   Zip Code: _____			
<b>GENERATOR:</b> Name: July	DEC Permit/Reg. No. (if applicable): _____			
Address: N. Blvd	City: Flushing	State: NY	Zip: _____	
Authorized Representative of Generator: _____		Phone: _____		
Transporter Name: Dana Contracting, Inc.				
Receiving Facility Name: EPC	<input type="checkbox"/> Chosen by Transporter			
Address: _____	City: Corona	State: NY	Zip: _____	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Signature:	Date: 2-6-19			
<b>TRANSPORTER:</b> To be completed by Transporter	DEC Permit/Registration No.: 2A-857			
Transporter Company Name: Dana Contracting, Inc.				
Describe all Discrepancies in type or quantity of waste: _____				
Driver Name (print): Vincen T. Aerts	Phone: _____	Plate No.: S7468 PC		
Signature:	Date: 2-6-19			
<b>RECEIVING FACILITY:</b> To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____			
Name: Evergreen Recycling of Corona Inc.	Address: _____			
City: 127-50 Northern Blvd.	State: NY	Zip: _____	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
Flushing, NY 11368				
Describe all Discrepancies in type or quantity of waste: 718-205-8038				
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Print Name: Michael J. T. Aerts	Phone: 718-205-8038			
Signature:	Date: 02/06/2019			
<b>The completed tracking document for all waste types must be returned to the Generator within two weeks of receipt of the waste.</b> Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]				



## DANA CONTRACTING

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

16-567

2713

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input checked="" type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
<b>WASTE QUANTITY:</b>	_____ Tons <u>32</u> Cubic Yards   Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully</u> Address: <u>JFK Hanger #7</u> City: <u>JAMAICA</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>N. Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: _____	
Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: Dana Contracting, Inc.	
Receiving Facility Name: <u>Eric</u>	<input type="checkbox"/> Chosen by Transporter
Address: _____ City: <u>Corona</u> State: <u>NY</u> Zip: _____	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>[Signature]</u>	Date: <u>2-6-19</u>
<b>TRANSPORTER:</b> To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name: Dana Contracting, Inc.	
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): <u>Vincent Jackson</u>	Phone: _____ Plate No.: <u>51458 PE</u>
Signature: <u>[Signature]</u>	Date: <u>2-6-19</u>
<b>RECEIVING FACILITY:</b> To be completed by Receiving site   DEC Permit/Reg. No. (if applicable): _____	
Name: <u>Evergreen Recycling of Corona Inc.</u>	Address: _____
City: <u>127-50 Northern Blvd.</u> State: _____ Zip: _____	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: <u>Flushing NY 11368</u> <u>718-205-8038</u>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: _____	Phone: _____
Signature: <u>[Signature]</u>	Date: <u>2/6/19</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



## DANA CONTRACTING

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2716

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input checked="" type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): <u>16,569</u>
WASTE QUANTITY:	_____ Tons <u>32</u> Cubic Yards Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully</u> Address: <u>JFK Hangar #7</u> City: <u>JFK Airport</u> State: <u>NY</u> Zip Code: _____
GENERATOR: Name:	<u>Tully</u> DEC Permit/Reg. No. (if applicable): _____
Address:	<u>11. Blvd</u> City: <u>Flushing</u> State: _____ Zip: _____
Authorized Representative of Generator:	Phone: _____
Transporter Name:	Dana Contracting, Inc.
Receiving Facility Name:	<u>FROC</u> <input type="checkbox"/> Chosen by Transporter
Address:	City: <u>Corona</u> State: _____ Zip: _____
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	Date: <u>2-6-19</u>
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name:	Dana Contracting, Inc.
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print):	<u>Vincent Jackson</u> Phone: _____ Plate No.: <u>SI4581P</u>
Signature:	Date: <u>2-6-19</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name:	Address: _____
City:	State: _____ Zip: _____ Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____	
<u>Evergreen Recycling of Corona Inc.</u> <u>127-50 Northern Blvd.</u> <u>Flushing N.Y. 11368</u> <u>718-205-8038</u>	
Print Name:	Phone: _____
Signature:	Date: <u>2/6/19</u>
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

611

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): Mix			
WASTE QUANTITY:	_____ Tons	32	Cubic Yards	Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <i>Tully Const</i> Address: <i>Kennedy Airport</i> City: <i>Queens</i> State: <i>NY</i> Zip Code: _____			
GENERATOR: Name:	<i>Tully Const</i> DEC Permit/Reg. No. (if applicable): _____ Address: <i>127-50 Northern Blvd</i> City: <i>Flushing</i> State: <i>NY</i> Zip: <i>11368</i>			
Authorized Representative of Generator:	Phone: _____			
Transporter Name:	Dana Contracting, Inc.			
Receiving Facility Name:	<i>Ever Green Recycling Of Corona</i> <input type="checkbox"/> Chosen by Transporter Address: <i>127-50 Northern Blvd</i> City: <i>Flushing</i> State: <i>NY</i> Zip: <i>11368</i>			
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Signature:	<i>Z. Palmer</i> Date: <i>2/7/19</i>			
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <i>Pending 2A-857</i>			
Transporter Company Name:	Dana Contracting, Inc.			
Describe all Discrepancies in type or quantity of waste: _____				
Driver Name (print):	<i>Z. Palmer</i> Phone: _____ Plate No.: <i>94897 PC</i>			
Signature:	<i>Z. Palmer</i> Date: <i>2/7/19</i>			
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____			
Name:	<i>Ever Green Recycling Of Corona</i> Address: <i>127-50 Northern Blvd</i>			
City: <i>Flushing</i> State: <i>NY</i> Zip: <i>11368</i>	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site			
Describe all Discrepancies in type or quantity of waste: _____				
<i>Victor Alba</i> Evergreen Recycling of Corona Inc. <i>127-50 Northern Blvd.</i> <i>Flushing N.Y. 11368</i>				
Print Name:	<i>Victor Alba</i> Phone: <i>718-205-8038</i>			
Signature:	<i>Victor Alba</i> Date: <i>2/7/19</i>			
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]				



DANA CONTRACTING

10-001 JAS

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

612

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input checked="" type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____			
WASTE QUANTITY:	Tons	32	Cubic Yards	Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully Const</u> Address: <u>Kennedy Airport</u> City: <u>Queens</u> State: <u>NY</u> Zip Code: _____			
GENERATOR: Name:	<u>Tully Const</u> DEC Permit/Reg. No. (if applicable): _____			
Address:	<u>127-50 Northern Blvd</u>	City:	<u>Flushing</u>	State: <u>NY</u> Zip: <u>11368</u>
Authorized Representative of Generator:	<u>Mark Tully</u> Phone: _____			
Transporter Name:	Dana Contracting, Inc.			
Receiving Facility Name:	<u>Tully Environmental</u> <input type="checkbox"/> Chosen by Transporter			
Address:	<u>127-20 39th Ave</u>	City:	<u>Flushing</u>	State: <u>NY</u> Zip: <u>11368</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Signature:	<u>M. Tully</u> Date: <u>2/7/19</u>			
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>Pending 2A-857</u>			
Transporter Company Name:	Dana Contracting, Inc.			
Describe all Discrepancies in type or quantity of waste: _____				
Driver Name (print): <u>Ronald S.</u>	Phone: _____ Plate No.: <u>548 17 PC</u>			
Signature:	<u>Ronald S.</u> Date: <u>2/7/19</u>			
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____			
Name: <u>Tully Environmental</u>	Address: <u>127-20 39th Ave</u>			
City: <u>Flushing</u>	State: <u>NY</u>	Zip: <u>11368</u>	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
Describe all Discrepancies in type or quantity of waste: _____				
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Print Name: <u>Renelly Vargas</u>	Phone: _____			
Signature: <u>Renelly Vargas</u>	Date: <u>02-07-19</u>			
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]				



## DANA CONTRACTING

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2667

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
WASTE QUANTITY:	Tons <u>32</u> Cubic Yards <input type="checkbox"/> Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>TULLY CONSTRUCTION</u> Address: <u>BAY BLVD &amp; INCINERATOR RD</u> City: <u>MASSEY</u> State: <u>NY</u> Zip Code: _____
GENERATOR: Name:	<u>TULLY</u> DEC Permit/Reg. No. (if applicable): _____
Address:	<u>127-50 NORTHERN BLU</u> City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>110451</u>
Authorized Representative of Generator:	Phone: _____
Transporter Name:	Dana Contracting, Inc.
Receiving Facility Name:	<u>EROC</u> <input type="checkbox"/> Chosen by Transporter
Address:	<u>127-50 NORTHERN BLU</u> City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>110451</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	<u>Boogee Ballou</u> Date: <u>2-7-19</u>
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name:	Dana Contracting, Inc.
Describe all Discrepancies in type or quantity of waste: <u>my x load</u>	
Driver Name (print):	<u>ARTURO</u> Phone: _____ Plate No.: _____
Signature:	Date: <u>2-7-19</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name:	<u>EROC</u> Address: _____
City:	<u>FLUSHING</u> State: <u>NY</u> Zip: <u>110451</u> Put [X] for: <input type="checkbox"/> interim processor or <input type="checkbox"/> final site
Evergreen Recycling of Corona Inc. 127-50 Northern Blvd. Flushing N.Y. 11368	
718-205-8038	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name:	<u>Michael J. Murray</u> Phone: <u>718-205-8038</u>
Signature:	Date: <u>02/07/2019</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



**Department of  
Environmental  
Conservation**

**DANA CONTRACTING**

00104700 001

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2668

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
<b>WASTE QUANTITY:</b>	_____ Tons <u>32</u> Cubic Yards Check box to indicate quantity is estimated: <input type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>TULLY CONSTRUCTION</u> Address: <u>BAY BLVD &amp; INCINERATOR RD</u> City: <u>MASSEA</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>TULLY</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 NORTHERN BLVD</u> City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>110431</u>	
Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: Dana Contracting, Inc.	
Receiving Facility Name: <u>EMOC</u>	<input type="checkbox"/> Chosen by Transporter
Address: <u>127-50 NORTHERN BLVD</u> City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>110431</u>	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>X Recycle Doctor</u>	Date: <u>2-7-19</u>
<b>TRANSPORTER:</b> To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name: Dana Contracting, Inc.	
Describe all Discrepancies in type or quantity of waste: <u>MIX LOAD</u>	
Driver Name (print): <u>PROTOM</u>	Phone: _____ Plate No.: _____
Signature: <u>                                </u>	Date: <u>2-7-19</u>
<b>RECEIVING FACILITY:</b> To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name: <u>EMOC</u>	Address: _____
City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>110431</u>	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____	
<b>Evergreen Recycling of Corona Inc.</b> <u>127-50 Northern Blvd.</u> <u>Flushing, N.Y. 11368</u>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: <u>VICKI S. M.</u>	Phone: <u>718-205-8038</u>
Signature: <u>VICKI S. M.</u>	Date: <u>2/7/19</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



## DANA CONTRACTING

JULY 2018

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2747

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
WASTE QUANTITY:	_____ Tons <u>32</u> Cubic Yards Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>TULLY CONSTRUCTION</u> Address: <u>BAY BLUB &amp; INCINERATOR RD</u> City: <u>MASSA U</u> State: <u>NY</u> Zip Code: _____
GENERATOR: Name:	<u>TULLY</u> DEC Permit/Reg. No. (if applicable): _____
Address:	<u>12750 NORTHERN BLU</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>110451</u>
Authorized Representative of Generator:	Phone: _____
Transporter Name:	<u>Dana Contracting, Inc.</u>
Receiving Facility Name:	<u>EMOC</u> <input type="checkbox"/> Chosen by Transporter
Address:	<u>127-50 NORTHERN BLU</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>110451</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	<u>Michael J. Mull</u> Date: <u>2-7-14</u>
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name:	<u>Dana Contracting, Inc.</u>
Describe all Discrepancies in type or quantity of waste: <u>Mix Load</u>	
Driver Name (print):	<u>David J. Mull</u> Phone: _____ Plate No.: _____
Signature:	<u>Michael J. Mull</u> Date: <u>2-7-14</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name:	<u>EMOC</u> Address: _____
City:	<u>Flushing</u> State: <u>NY</u> Zip: <u>110451</u> Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site <u>Evergreen Recycling of Corona Inc.</u>
Describe all Discrepancies in type or quantity of waste:	<u>127-50 Northern Blvd.</u> <u>Flushing N.Y. 11368</u>
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name:	<u>Michael J. Mull</u> Phone: <u>718-205-8038</u>
Signature:	<u>Michael J. Mull</u> Date: <u>02/07/2019</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



**Department of  
Environmental  
Conservation**

# DANA CONTRACTING

10-27

## Part 360 Series Waste Tracking Document - Construction & Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2261

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
<b>WASTE QUANTITY:</b>	_____ Tons <u>32</u> Cubic Yards <input type="checkbox"/> Check box to indicate quantity is estimated: <input type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully Const.</u> Address: <u>JFK. Airport</u> City: <u>Queens</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully Const</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-58 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u> Authorized Representative of Generator: <u>X</u> Phone: _____	
Transporter Name: <u>Dana Contracting, Inc.</u> Receiving Facility Name: <u>ENR C</u> <input type="checkbox"/> Chosen by Transporter Address: <u>127-58 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>	
<p>I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.</p>	
Signature: <u>M. Wilson</u>	Date: <u>2-7-19</u>
<b>TRANSPORTER:</b> To be completed by Transporter   DEC Permit/Registration No.: <u>2A-857</u> Transporter Company Name: <u>Dana Contracting, Inc.</u>	
Describe all Discrepancies in type or quantity of waste: <u>Mix Concrete, Dry Asphalt</u>	
Driver Name (print): <u>Wilson Andre</u>	Phone: _____
Signature: <u>W. Andre</u>	Plate No.: <u>6991PC</u> Date: <u>2-7-19</u>
<b>RECEIVING FACILITY:</b> To be completed by Receiving site   DEC Permit/Reg. No. (if applicable): _____	
Name: _____ Address: _____ City: _____ State: _____ Zip: _____ Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
Describe all Discrepancies in type or quantity of waste: _____	
<u>Evergreen Recycling of Corona Inc.</u> <u>127-50 Northern Blvd.</u> <u>Flushing N.Y. 11368</u> <u>718-205-8038</u>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: <u>Vickie A. Brown</u>	Phone: _____
Signature: <u>Vickie A. Brown</u>	Date: <u>2/7/19</u>
<p>The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]</p>	



## DANA CONTRACTING

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

16-5604 JFK

2262

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
WASTE QUANTITY:	_____ Tons <u>32</u> Cubic Yards <input type="checkbox"/> Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully Const.</u> Address: <u>JFK Air port</u> City: <u>Queens</u> State: <u>NY</u> Zip Code: <u>11368</u>
GENERATOR: Name:	<u>Tully Const.</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>427-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>
Authorized Representative of Generator:	<u>A</u> Phone: _____
Transporter Name:	<u>Dana Contracting, Inc.</u>
Receiving Facility Name:	<input type="checkbox"/> Chosen by Transporter
Address:	City: _____ State: _____ Zip: _____
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	Date: <u>2-7-19</u>
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>
Transporter Company Name:	<u>Dana Contracting, Inc.</u>
Describe all Discrepancies in type or quantity of waste: <u>Waste, 599514</u>	
Driver Name (print): <u>Wilson ABRAH</u>	Phone: _____ Plate No.: <u>69919PC</u>
Signature: <u>W. A.</u>	Date: <u>2-7-19</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name:	Address: _____
City: _____ State: _____ Zip: _____	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: <u>Reneilly Vargas</u>	Phone: _____
Signature: <u>Reneilly Vargas</u>	Date: <u>02-07-19</u>
The completed tracking document for all waste types must be returned to the Generator within two weeks of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



## DANA CONTRACTING

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

16-569

2533

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): Asphalt
WASTE QUANTITY:	30 Tons      Cubic Yards <input type="checkbox"/> Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: JFK Gate #7 Address: Jamaica City: Jamaica      State: NY      Zip Code: _____
GENERATOR: Name:	Tully      DEC Permit/Reg. No. (if applicable): _____
Address:	N Blvd      City: Flushing      State: NY      Zip: _____
Authorized Representative of Generator:	Phone: _____
Transporter Name:	Dana Contracting, Inc.
Receiving Facility Name:	EROC <input type="checkbox"/> Chosen by Transporter
Address:	Corona      City: Corona      State: NY      Zip: _____
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature:	Date: 2-07-19
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: 2A-857
Transporter Company Name:	Dana Contracting, Inc.
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): Jhamal Mitchell	Phone: _____
Signature: Jhamal Mitchell	Date: 2-07-19
Plate No.: 51457 PC	
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name:	Address: _____
City:	State: _____ Zip: _____
Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site	
Describe all Discrepancies in type or quantity of waste: _____	
Evergreen Recycling of Corona Inc.	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: Vicki A. Lee	Phone: 718 205 8038
Signature: Vicki A. Lee	Date: 2-07-19
107-50 Northern Blvd. Flushing N.Y. 11368	
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



**Department of  
Environmental  
Conservation**

**DANA CONTRACTING**

714001

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

971

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input checked="" type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
<b>WASTE QUANTITY:</b>	Tons <u>3Q</u> Cubic Yards _____ Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully</u> Address: <u>JFK Hangar #7</u> City: <u>Jamaica</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>N. Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: _____	
Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: <u>Dana Contracting, Inc.</u>	
Receiving Facility Name: <u>Eroc</u>	<input type="checkbox"/> Chosen by Transporter
Address: _____ City: <u>Corona</u> State: <u>NY</u> Zip: _____	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>Vincent Jackson</u>	Date: <u>2-7-19</u>
<b>TRANSPORTER:</b> To be completed by Transporter	DEC Permit/Registration No.: <u>Pending 2A-857</u>
Transporter Company Name: <u>Dana Contracting, Inc.</u>	
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): <u>Vincent Jackson</u>	Phone: _____ Plate No.: <u>51458 PC</u>
Signature: <u>Vincent Jackson</u>	Date: <u>2-7-19</u>
<b>RECEIVING FACILITY:</b> To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name: _____	Address: _____
City: _____ State: _____ Zip: _____	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____	
<b>Evergreen Recycling of Corona Inc.</b> <b>127-50 Northern Blvd.</b> <b>Flushing, N.Y. 11368</b>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	Print Name: <u>Vicki Alba</u> Phone: <u>718-205-8038</u>
Signature: <u>Vicki Alba</u>	Date: <u>2/7/19</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



**Department of  
Environmental  
Conservation**

DANA CONTRACTING TRUCK #105 JOB #16-564

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

616

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): <u>MIX</u>
<b>WASTE QUANTITY:</b>	Tons <u>32</u> Cubic Yards   Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>Tully</u> Address: <u>JFK Hanger #7</u> City: <u>Queens</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u> Authorized Representative of Generator: _____ Phone: _____ Transporter Name: Dana Contracting, Inc.	
Receiving Facility Name: <u>Evergreen Recycling of Corona</u> <input type="checkbox"/> Chosen by Transporter Address: <u>127-50 Northern Blvd</u> City: <u>Flushing</u> State: <u>NY</u> Zip: <u>11368</u>	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>Tully</u>	Date: <u>2/7/19</u>
<b>TRANSPORTER:</b> To be completed by Transporter Transporter Company Name: Dana Contracting, Inc.	DEC Permit/Registration No.: <u>Pending 2A-857</u>
Describe all Discrepancies in type or quantity of waste: _____	
Driver Name (print): <u>Robinson Morillo</u>	Phone: <u>917-501-6530</u> Plate No.: <u>51464PC</u>
Signature: <u>Erz</u>	Date: <u>2/7/19</u>
<b>RECEIVING FACILITY:</b> To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____
Name: _____	Address: _____
City: _____	State: _____ Zip: _____ Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: <u>Vicente Alba</u>	Phone: <u>718-205-8038</u>
Signature: <u>Vicente Alba</u>	Date: <u>2/7/19</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



Department of  
Environmental  
Conservation

Part 360 Series Waste Tracking Document - Construction & Demolition Debris  
This form may be used to satisfy the tracking document requirements of  
both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

617

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input checked="" type="checkbox"/> Other (specify): <u>Garbage.</u>				
WASTE QUANTITY:	_____ Tons <u>32</u>		Cubic Yards	Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>	
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Tully</u> Address: <u>JFK Hangar #7</u> City: <u>Queen</u> State: <u>NY</u> Zip Code: <u>11368</u> .				
GENERATOR: Name:	<u>Tully</u> DEC Permit/Reg. No. (if applicable): _____				
Address:	<u>127-50 Northern Blvd</u>		City: <u>Flushing</u>	State: <u>NY</u>	Zip: <u>11368</u>
Authorized Representative of Generator:	Phone: _____				
Transporter Name:	<u>Dana Contracting, Inc.</u>				
Receiving Facility Name:	<u>Tully Environmental Inc</u> <input type="checkbox"/> Chosen by Transporter				
Address:	<u>127-50 Northern Blvd</u>		City: <u>Flushing</u>	State: <u>NY</u>	Zip: <u>11368</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.					
Signature: <u>R. Palos</u>	Date: <u>2/7/19</u>				
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>Pending 2A-857</u>				
Transporter Company Name:	<u>Dana Contracting, Inc.</u>				
Describe all Discrepancies in type or quantity of waste: _____					
Driver Name (print): <u>Robinson Morillo</u>	Phone: <u>917-501-6530</u> Plate No.: <u>51464PC</u>				
Signature: <u>RLM</u>	Date: <u>2/7/19</u>				
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____				
Name: _____	Address: _____				
City: _____	State: _____	Zip: _____	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site		
Describe all Discrepancies in type or quantity of waste: _____					
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.					
Print Name: <u>Randy Varago</u>	Phone: _____				
Signature: <u>Randy Varago</u>	Date: <u>02-07-19</u>				
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]					



**Department of  
Environmental  
Conservation**

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2721

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
<b>WASTE QUANTITY:</b>	Tons <u>32</u> Cubic Yards   Check box to indicate quantity is estimated: <input type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>TULLY CONSTRUCTION</u> Address: <u>BAY BLU &amp; INCISERTOR RD</u> City: <u>NASSAU</u> State: <u>NY</u> Zip Code: _____
<b>GENERATOR:</b> Name: <u>Tully</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 NORTHERN BLU</u> City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>110431</u> Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: <u>Dana Contracting, Inc.</u> Receiving Facility Name: <u>EMC</u> <input type="checkbox"/> Chosen by Transporter Address: <u>127-50 NORTHERN BLU</u> City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>110431</u>	
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>K. Begga Rose</u>	Date: <u>02-8-14</u>
<b>TRANSPORTER:</b> To be completed by Transporter Transporter Company Name: <u>Dana Contracting, Inc.</u>	DEC Permit/Registration No.: <u>2A-857</u>
Describe all Discrepancies in type or quantity of waste: <u>mix load</u>	
Driver Name (print): <u>KRTV W</u>	Phone: _____ Plate No.: _____
Signature: <u>_____</u>	Date: <u>2-8-14</u>
<b>RECEIVING FACILITY:</b> To be completed by Receiving site   DEC Permit/Reg. No. (if applicable): _____	
Name: <u>EMC</u>	Address: _____
City: <u>FLUSHING</u>	State: <u>NY</u> Zip: <u>110431</u> Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: <u>Evergreen Recycling of Corona Inc. 127-50 Northern Blvd. Flushing N.Y. 11368</u>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: <u>Victor Albay</u>	Phone: <u>718-205-8038</u>
Signature: <u>VIC ALBAY</u>	Date: <u>2-8-14</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks of receipt of the waste</u> . Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	



## DANA CONTRACTING

JULY 10-007

Department of  
Environmental  
Conservation

## Part 360 Series Waste Tracking Document - Construction &amp; Demolition Debris

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&amp;D Debris

2722

TYPE OF C&D DEBRIS:	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____			
WASTE QUANTITY:	_____ Tons	32	Cubic Yards	Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>TULLY CONSTRUCTION</u> Address: <u>BAY BLU &amp; LINCOLN RD</u> City: <u>KASSON</u> State: <u>NY</u> Zip Code: _____			
GENERATOR: Name:	<u>TULLY</u> DEC Permit/Reg. No. (if applicable): _____			
Address:	<u>127-56 NORTHOW BLW</u>		City: <u>FLUSHING</u>	State: <u>NY</u> Zip: <u>1104151</u>
Authorized Representative of Generator:	Phone: _____			
Transporter Name:	Dana Contracting, Inc.			
Receiving Facility Name:	<u>EMC</u> <input type="checkbox"/> Chosen by Transporter			
Address:	<u>127-50 NORTHOW BLW</u>		City: <u>FLUSHING</u>	State: <u>NY</u> Zip: <u>1104151</u>
I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.				
Signature:	<u>Kelli G. Blake</u>		Date: <u>2-8-14</u>	
TRANSPORTER: To be completed by Transporter	DEC Permit/Registration No.: <u>2A-857</u>			
Transporter Company Name:	Dana Contracting, Inc.			
Describe all Discrepancies in type or quantity of waste: _____				
Driver Name (print):	<u>Arthur</u>		Phone:	Plate No.:
Signature:	<u> </u>		Date:	<u>2-8-14</u>
RECEIVING FACILITY: To be completed by Receiving site	DEC Permit/Reg. No. (if applicable): _____			
Name:	<u>EMC</u> Address: _____			
City:	<u>FLUSHING</u>	State: <u>NY</u>	Zip: <u>1104151</u>	Put [X] for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site
Describe all Discrepancies in type or quantity of waste: _____ <b>Evergreen Recycling of Corona Inc.</b> <u>127-50 Northern Blvd.</u> <u>Flushing N.Y. 11368</u> <u>718-205-8038</u>				
<small>I certify, under penalty of law, that the information contained herein is true and accurate.          I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.</small>				
Print Name:	<u>Vicki Alba</u> Phone: _____			
Signature:	<u>Vicki Alba</u> Date: <u>2/8/14</u>			
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. <small>[ref: 6 NYCRR 364-5.1(b)(5)]</small>				



**Department of  
Environmental  
Conservation**

**Part 360 Series Waste Tracking Document - Construction & Demolition Debris**

This form may be used to satisfy the tracking document requirements of both section 361-5.6 and section 364-5.1 for the transport of C&D Debris

2723

<b>TYPE OF C&amp;D DEBRIS:</b>	<input type="checkbox"/> Limited-Use Fill <input type="checkbox"/> Restricted-Use Fill <input type="checkbox"/> Contaminated Fill <input type="checkbox"/> Fill Material - Unknown <input type="checkbox"/> General Fill <input type="checkbox"/> Residue <input type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): _____
<b>WASTE QUANTITY:</b>	_____ Tons <u>32</u> Cubic Yards <u>Tully Job #18.589</u> Check box to indicate quantity is estimated: <input type="checkbox"/>
<b>LOCATION WHERE WASTE WAS PICKED UP:</b>	Source Name: <u>TULLY CONSTRUCTION</u> Address: <u>BAYBLUX INCINERATOR RD</u> City: <u>MASSEA</u> State: <u>NY</u> Zip Code: _____
GENERATOR: Name: <u>TULLY</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>127-50 NORTHERN BLV</u> City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>110431</u> Authorized Representative of Generator: _____ Phone: _____	
Transporter Name: <u>Dana Contracting, Inc.</u> Receiving Facility Name: <u>ENOC</u> <input type="checkbox"/> Chosen by Transporter Address: <u>127-50 NORTHERN BLV</u> City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>110431</u> I have completed this tracking document describing the waste and identifying the transporter and receiving facility. I certify, under penalty of law, that the information provided in this waste tracking document has been prepared under my direction and supervision and further certify that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Signature: <u>K. Biggsie Poste</u> Date: <u>2-8-19</u>	
TRANSPORTER: To be completed by Transporter Transporter Company Name: <u>Dana Contracting, Inc.</u>	DEC Permit/Registration No.: <u>2A-857</u>
Describe all Discrepancies in type or quantity of waste: <u>mix w/ soil</u>	
Driver Name (print): <u>Dirtnu</u>	Phone: _____ Plate No.: _____ Signature: _____ Date: <u>2-8-19</u>
RECEIVING FACILITY: To be completed by Receiving site   DEC Permit/Reg. No. (if applicable): _____ Name: <u>ENOC</u> Address: _____ City: <u>FLUSHING</u> State: <u>NY</u> Zip: <u>110431</u> But (X) for: <input type="checkbox"/> interim processor, or <input type="checkbox"/> final site Evergreen Recycling of Corona Inc. Describe all Discrepancies in type or quantity of waste: <u>127-50 Northern Blvd.</u> <u>Flushing N.Y. 11368</u>	
I certify, under penalty of law, that the information contained herein is true and accurate. I am aware that any false statement made on this document is punishable pursuant to Section 210.45 of the Penal Law.	
Print Name: <u>Michael J. Munoz</u>	Phone: <u>718-205-8038</u> Signature: <u>Michael J. Munoz</u> Date: <u>02/08/2019</u>
The completed tracking document for all waste types must be returned to the Generator <u>within two weeks</u> of receipt of the waste. Statewide for restricted-use fill, limited-use fill and contaminated fill, and for all waste types, except residue, generated in the City of New York, a copy of the completed tracking document must also be provided to NYS DEC within 15 days of waste delivery to the receiving facility. [ref: 6 NYCRR 364-5.1(b)(5)]	