

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

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

149724

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 load, Concrete, blacktop, dirt</u>
WASTE QUANTITY:	_____ Tons <input checked="" type="checkbox"/> <u>16</u> Cubic Yards Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Restani</u> Job #: <u>KG21001136</u> Address: <u>W 190th St & Webb Ave</u> City: <u>Bronx</u> State: <u>NY</u> Zip Code: <u>10468</u>
GENERATOR: Name: <u>Consolidated Edison</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>1601 Bronxville Ave</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10462</u> Authorized Representative of Generator: <u>Restani</u> Phone: <u>7187280870</u> Transporter Name: <u>Franco Masonry Con Inc</u> Receiving Facility Name: <u>New York Recycling</u> <input type="checkbox"/> Chosen by Transporter Address: <u>475 Exterior St</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10451</u> <small>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.</small> Signature: <u>[Signature]</u> Date: <u>8/29/22</u>	
TRANSPORTER: <i>To be completed by Transporter</i> DEC Permit/Registration No.: <u>NC-033</u> Transporter Company Name: <u>Franco Masonry Con Inc</u> Describe all Discrepancies in type or quantity of waste: <u>16 yds</u> Driver Name (print): <u>Witko</u> Phone: <u>7326934516</u> Plate No.: <u>PK 7411</u> Signature: <u>[Signature]</u> Date: <u>8/29/22</u>	
RECEIVING FACILITY: <i>To be completed by Receiving site</i> DEC Permit/Reg. No. (if applicable): _____ Name: <u>NY Recycling</u> Address: <u>475 Exterior St</u> City: <u>Brx</u> State: <u>NY</u> Zip: <u>10451</u> Put [X] for: [] interim processor, or <input checked="" type="checkbox"/> final site Describe all Discrepancies in type or quantity of waste: _____ <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>Roger Trevis</u> Phone: <u>(718) 742 0755</u> Signature: <u>[Signature]</u> Date: <u>08/29/22</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)]	



Part 360 Waste Tracking Document - Construction & Demolition Debris

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

159403

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>asphalt dirt & rock</u>
WASTE QUANTITY:	_____ Tons <u>15</u> Cubic Yards Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Restani</u> <u>XG21020610</u> Address: <u>1300 VIELE AVE</u> City: <u>Bronx</u> State: <u>NY</u> Zip Code: <u>10474</u>
GENERATOR: Name: <u>Con Edison</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>1601 Bronxdale Ave</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10462</u> Authorized Representative of Generator: <u>Restani</u> Phone: <u>718 728 0870</u> Transporter Name: <u>NUFO</u> Receiving Facility Name: <u>New York Recycling, LLC</u> <input type="checkbox"/> Chosen by Transporter Address: <u>475 Exterior St</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10451</u> <small>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.</small> Signature: <u>Rolland</u> Date: <u>8-29-22</u>	
TRANSPORTER: To be completed by Transporter DEC Permit/Registration No.: <u>2A-838</u> Transporter Company Name: <u>NUFO</u> Describe all Discrepancies in type or quantity of waste: <u>15 yds incidental Asphalt</u> Driver Name (print): <u>Phyllis Ruiz</u> Phone: <u>347 576-8336</u> Plate No.: <u>71618-MW</u> Signature: _____ Date: <u>8-29-22</u>	
RECEIVING FACILITY: To be completed by Receiving site DEC Permit/Reg. No. (if applicable): _____ Name: <u>New York Recycling</u> Address: <u>475 Exterior St</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10451</u> Put [X] for: [] interim processor, or [X] final site Describe all Discrepancies in type or quantity of waste: <u>TK# 240391</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>Roger Freitas</u> Phone: <u>(718) 742 0755</u> Signature: _____ Date: <u>08/29/22</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)]	

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

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

149723

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 load, concrete, blacktop, dirt</u>
WASTE QUANTITY:	_____ Tons <u>14</u> Cubic Yards Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Restani</u> <u>X621010517</u> Address: <u>E 219th St</u> & <u>Bronxwood Ave</u> City: <u>Bronx</u> State: <u>NY</u> Zip Code: <u>10469</u>
GENERATOR: Name: <u>Consolidated Edison</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>1601 Bronxwood Ave</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10462</u> Authorized Representative of Generator: <u>Restani</u> Phone: <u>7187280870</u> Transporter Name: <u>Franco Masonry Con Inc</u> Receiving Facility Name: <u>New York Recycling</u> <input type="checkbox"/> Chosen by Transporter Address: <u>475 Exterior St</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10451</u> <small>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.</small> Signature: _____ Date: <u>8/26/22</u>	
TRANSPORTER: To be completed by Transporter DEC Permit/Registration No.: <u>NC-023</u> Transporter Company Name: <u>Franco Masonry Con Inc</u> Describe all Discrepancies in type or quantity of waste: <u>14 yds</u> Driver Name (print): <u>Wilce S</u> Phone: <u>7326934516</u> Plate No.: <u>NK7411</u> Signature: _____ Date: <u>8/26/22</u>	
RECEIVING FACILITY: To be completed by Receiving site DEC Permit/Reg. No. (if applicable): <u>03W87</u> Name: <u>NJR</u> Address: <u>475 Exterior St</u> City: <u>BX</u> State: <u>NY</u> Zip: <u>10451</u> Put [X] for: [] interim processor, or [] final site Describe all Discrepancies in type or quantity of waste: <u>NJR # 24 C367</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>J. Chaudhary</u> Phone: <u>7187420755</u> Signature: _____ Date: <u>8/26/22</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)]	

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

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

149721

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 load, concrete, blacktop</u>		
WASTE QUANTITY:	_____ Tons <u>4</u> Cubic Yards Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>		
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Restani</u> <u>XG 21026443</u> Address: <u>E 198th St</u> <u>3 Jerome Ave</u> City: <u>Bronx</u> State: <u>NY</u> Zip Code: <u>10468</u>		
GENERATOR: Name: <u>Consolidated Edison</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>1601 Broadway Ave</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10462</u> Authorized Representative of Generator: <u>Restani</u> Phone: <u>7187280870</u> Transporter Name: <u>Franco Masonry Con Inc</u> Receiving Facility Name: <u>New York Recycling</u> <input type="checkbox"/> Chosen by Transporter Address: <u>475 Exterior St</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10451</u> <small>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.</small> Signature: _____ Date: <u>8/24/22</u>			
TRANSPORTER: <i>To be completed by Transporter</i> DEC Permit/Registration No.: <u>NC-0231</u> Transporter Company Name: <u>Franco Masonry Con Inc</u> Describe all Discrepancies in type or quantity of waste: <u>4 YARDS</u> Driver Name (print): <u>Nilsen</u> Phone: <u>7326934516</u> Plate No.: <u>NK7411</u> Signature: _____ Date: <u>8/24/22</u>			
RECEIVING FACILITY: <i>To be completed by Receiving site</i> DEC Permit/Reg. No. (if applicable): <u>OBW87</u> Name: <u>N4R</u> Address: <u>475 Exterior St</u> City: <u>BX</u> State: <u>NY</u> Zip: <u>10451</u> Put [X] for: [] interim processor, or [] final site Describe all Discrepancies in type or quantity of waste: <u>N4R #240209</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>J. Galden</u> Phone: <u>7187420755</u> Signature: _____ Date: <u>8/24/22</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)]			

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

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

149720

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 wood, concrete, bricktop</u>		
WASTE QUANTITY:	_____ Tons <u>18</u> Cubic Yards Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>		
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Restani</u> <u>2621026493</u> Address: <u>E 198th St</u> <u>Jerome Ave</u> City: <u>Bronx</u> State: <u>ny</u> Zip Code: <u>10468</u>		
GENERATOR: Name: <u>Consolidated Edison</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>1601 Broadway Ave</u> City: <u>Bronx</u> State: <u>ny</u> Zip: <u>10462</u> Authorized Representative of Generator: <u>Restani</u> Phone: <u>7187280870</u> Transporter Name: <u>FRANK MASONRY CO INC</u> Receiving Facility Name: <u>New York recycling</u> <input type="checkbox"/> Chosen by Transporter Address: <u>475 Exterior St</u> City: <u>Bronx</u> State: <u>ny</u> Zip: <u>10451</u> <small>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.</small> Signature: _____ Date: <u>8/24/22</u>			
TRANSPORTER: <i>To be completed by Transporter</i> DEC Permit/Registration No.: <u>AL-023</u> Transporter Company Name: <u>FRANK MASONRY CO INC</u> Describe all Discrepancies in type or quantity of waste: <u>18 yards</u> Driver Name (print): <u>Wilge S</u> Phone: <u>7326934516</u> Plate No.: <u>NR7411</u> Signature: _____ Date: <u>8/24/22</u>			
RECEIVING FACILITY: <i>To be completed by Receiving site</i> DEC Permit/Reg. No. (if applicable): <u>03W87</u> Name: <u>N4R</u> Address: <u>475 Exterior St</u> City: <u>Bx</u> State: <u>NY</u> Zip: <u>10451</u> Put [X] for: [] interim processor, or [] final site Describe all Discrepancies in type or quantity of waste: <u>N4R # 240191</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>J. Callahan</u> Phone: <u>718 742 0755</u> Signature: _____ Date: <u>8/24/22</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)]			



Part 360 Waste Tracking Document - Construction & Demolition Debris

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

159404

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 checked="" type="checkbox"/> Construction Waste <input type="checkbox"/> Demolition Waste <input type="checkbox"/> Other (specify): <u>Incidental Asphalt</u>
WASTE QUANTITY:	_____ Tons <u>3</u> _____ Cubic Yards Check box to indicate quantity is estimated: <input type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: _____ Address: <u>Proth & Wadsworth</u> City: <u>Brooklyn</u> State: <u>NY</u> Zip Code: <u>10468</u>
GENERATOR: Name: <u>Con Edison</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>1601 Bronxdale Ave</u> City: <u>Brnx</u> State: <u>NY</u> Zip: <u>10462</u> Authorized Representative of Generator: <u>Restani</u> Phone: <u>7187280870</u> Transporter Name: <u>Auth</u> Receiving Facility Name: <u>New York Recycling</u> <input type="checkbox"/> Chosen by Transporter Address: <u>475 Exterior St</u> City: <u>Brnx</u> State: <u>NY</u> Zip: <u>10451</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>[Signature]</u> Date: <u>8-24-22</u>	
TRANSPORTER: To be completed by Transporter Transporter Company Name: <u>Auth</u> DEC Permit/Registration No.: <u>2A-838</u> Describe all Discrepancies in type or quantity of waste: _____ Driver Name (print): <u>Lois R</u> Phone: <u>347 576-0336</u> Plate No.: <u>7161870</u> Signature: <u>[Signature]</u> Date: <u>8-24-22</u>	
RECEIVING FACILITY: To be completed by Receiving site Name: <u>NYR</u> DEC Permit/Reg. No. (if applicable): <u>C3W87</u> Address: <u>475 Exterior St</u> City: <u>Bx</u> State: <u>NY</u> Zip: <u>10451</u> Put [X] for: [] interim processor, or [] final site Describe all Discrepancies in type or quantity of waste: <u>TK #240206</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>J. Chaudhary</u> Phone: <u>718 742 0755</u> Signature: <u>[Signature]</u> Date: <u>8/24/22</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)]	

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

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

149719

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 load, concrete, blocktop, dirt</u>
WASTE QUANTITY:	_____ Tons <u>8</u> Cubic Yards Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Restani</u> <u>XG 2101.1255</u> Address: <u>E 219th St</u> <u>Bronxwood Ave</u> City: <u>Bronx</u> State: <u>NY</u> Zip Code: <u>10469</u>
GENERATOR: Name: <u>Consolidated Edison</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>1001 Broadway Ave</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10462</u> Authorized Representative of Generator: <u>Restani</u> Phone: <u>7187280870</u> Transporter Name: <u>Franco Masonry Co Inc</u> Receiving Facility Name: <u>New York Recycling</u> <input type="checkbox"/> Chosen by Transporter Address: <u>475 Exterior St</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10451</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>[Signature]</u> Date: <u>8/23/22</u>	
TRANSPORTER: To be completed by Transporter DEC Permit/Registration No.: <u>RL-0231</u> Transporter Company Name: <u>Franco Masonry Co Inc</u> Describe all Discrepancies in type or quantity of waste: <u>8 yds</u> Driver Name (print): <u>W. Geis</u> Phone: <u>7326934516</u> Plate No.: <u>NK 7411</u> Signature: <u>[Signature]</u> Date: <u>8/23/22</u>	
RECEIVING FACILITY: To be completed by Receiving site DEC Permit/Reg. No. (if applicable): <u>OBW87</u> Name: <u>N4R</u> Address: <u>475 Exterior St</u> City: <u>BX</u> State: <u>NY</u> Zip: <u>10451</u> Put [X] for: [] interim processor, or [] final site Describe all Discrepancies in type or quantity of waste: <u>N4R #240139</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>J. Chaudhary</u> Phone: <u>7187420755</u> Signature: <u>[Signature]</u> Date: <u>8/23/22</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)]

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

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

149718

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 load, concrete, blocktop, dirt</u>		
WASTE QUANTITY:	_____ Tons <u>46</u> Cubic Yards Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>		
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Nestani</u> <u>XG21011255</u> Address: <u>E 219th St & Bronxwood Ave</u> City: <u>Bronx</u> State: <u>NY</u> Zip Code: <u>10469</u>		
GENERATOR: Name: <u>Consolidated Edison</u> DEC Permit/Reg. No. (if applicable): _____	Address: <u>1001 Biondale Ave</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10462</u> Authorized Representative of Generator: <u>Nestani</u> Phone: <u>718 728 0870</u> Transporter Name: <u>Franco Masonry Co Inc</u> Receiving Facility Name: <u>New York Recycling</u> <input type="checkbox"/> Chosen by Transporter Address: <u>475 Exterior St</u> City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10461</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>[Signature]</u>		Date: <u>8/22/22</u>	
TRANSPORTER: To be completed by Transporter		DEC Permit/Registration No.: <u>NC 023</u>	
Transporter Company Name: <u>Franco Masonry Co Inc</u>		Describe all Discrepancies in type or quantity of waste: <u>6 yards</u>	
Driver Name (print): <u>Wilge S</u>		Phone: <u>732 693 4516</u> Plate No.: <u>DK 7411</u>	
Signature: <u>[Signature]</u>		Date: <u>8/22/22</u>	
RECEIVING FACILITY: To be completed by Receiving site		DEC Permit/Reg. No. (if applicable): <u>03W87</u>	
Name: <u>NYR</u>		Address: <u>475 Exterior St</u>	
City: <u>Bronx</u> State: <u>NY</u> Zip: <u>10461</u>		Put [X] for: [] interim processor, or [] final site	
Describe all Discrepancies in type or quantity of waste: _____		<u>TK # 240063</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>Nicholas Coppola</u>		Phone: <u>718-742-0755</u>	
Signature: <u>[Signature]</u>		Date: <u>8/22/22</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)]			

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

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

149716

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 load, concrete, shrapnel</u>
WASTE QUANTITY:	_____ Tons <u>x 14</u> Cubic Yards Check box to indicate quantity is estimated: <input checked="" type="checkbox"/>
LOCATION WHERE WASTE WAS PICKED UP:	Source Name: <u>Restani</u> <u>XG21019741</u> Address: <u>E 187th St</u> <u>BRX</u> City: <u>BRX</u> State: <u>NY</u> Zip Code: <u>10458</u>
GENERATOR: Name: <u>Consolidated Edison</u> DEC Permit/Reg. No. (if applicable): _____ Address: <u>1601 Broadway Ave</u> City: <u>BRX</u> State: <u>NY</u> Zip: <u>10462</u> Authorized Representative of Generator: <u>Restani</u> Phone: <u>718 7280870</u> Transporter Name: <u>Franco Masonry Con Inc</u> Receiving Facility Name: <u>New York Recycling</u> <input type="checkbox"/> Chosen by Transporter Address: <u>475 Exterior St</u> City: <u>BRX</u> State: <u>NY</u> Zip: <u>10451</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>[Signature]</u> Date: <u>8/19/22</u>	
TRANSPORTER: To be completed by Transporter DEC Permit/Registration No.: <u>AL-063</u> Transporter Company Name: <u>Franco Masonry Con Inc</u> Describe all Discrepancies in type or quantity of waste: <u>x 14 yards</u>	
Driver Name (print): <u>Nilge</u> Phone: <u>732-693-4516</u> Plate No.: <u>NK57411</u> Signature: <u>[Signature]</u> Date: <u>8/19/22</u>	
RECEIVING FACILITY: To be completed by Receiving site DEC Permit/Reg. No. (if applicable): <u>03W187</u> Name: <u>NY Recycling</u> Address: <u>475 Exterior St</u> City: <u>BRX</u> State: <u>NY</u> Zip: <u>10451</u> Put [X] for: [] interim processor, or [] final site Describe all Discrepancies in type or quantity of waste: <u>TK# 239944</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>[Signature]</u> Phone: <u>718-742-0755</u> Signature: <u>[Signature]</u> Date: <u>8/19/22</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)]	