1189843z

vanta Indianapolis 20 S. Harding Street dianapolis, IN 46221 one (317) 634-7367

cket: 1189843 Date: 5/27/2021

Time: 13:11:02 - 13:45:10

Customer: 324712i/ARCA 16786 NIAGARA-I Carrier: 59207/SECURE SERVICES SPECIA

Truck: 1337

ruck Type: TT/Transfer Trailer

Profile: 16786/DMS Approval# 16786

Comment: PB13

DG

ross: 33860 lb In Scale 1 Tare: 32140 lb Out Scale 3

Net: 1720 lb

Tons: 0.86

terials & Services

Origin: 8320/Michigan

Material: 100% of MID-TON/Manufacturin

Quantity: 0.86 ton

Rate:

Amount: \$ 0.00

_____ Total Taxes: \$ 0.00
Total Amount: \$ 0.00

ighmaster: DGARDNER

Driver:

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Bill of Lading 00002019

| TO Consignee: COVANTA INC. Street 2320 S. HARDING ST. Destination City/State/Zip INDIANAPOLIS, IN. 46221 Route: FOR PAYMENT, SEND BILL TO Name Company Street City/State/Zip Jackson, MI 49203 Special Instructions: SHIPPERS INSTRUCTIONS ATTN: BRIAN FOSTER City/State/Zip Jackson, MI 49203 Special Instructions: SHIPPERS INSTRUCTIONS ATTN: BRIAN FOSTER City/State/Zip Jackson, MI 49203 Special Instructions: SHIPPERS INSTRUCTIONS ATTN: BRIAN FOSTER City/State/Zip Jackson, MI 49203 Special Instructions: SHIPPERS INSTRUCTIONS ATTN: BRIAN FOSTER City/State/Zip Jackson, MI 49203 Special Instructions: SHIPPERS INSTRUCTIONS ATTN: BRIAN FOSTER City/State/Zip Jackson, MI 49203 Special Instructions: SHIPPERS INSTRUCTIONS ATTN: BRIAN FOSTER CHARGES 50 BAGS If A M PLASTIC BAGS OF FOAM ENGINEERS SPECIAL MARKS & EXCEPTIONS TO: If this shippers is to be delived to be delived to be consigned without recourse on the consigner, the consigner ship signer to the following statement. The carrier shall not make delivery of the shippert of the following statement. The carrier shall not make delivery of the shippert of the following statement. The carrier shall not make delivery of the shippert of the following statement. The carrier shall not make delivery of the shippert of the following statement. The carrier shall not make delivery of the shippert of the following statement. The carrier shall not make delivery of the shippert of the following statement. The carrier shall not make delivery of the shippert of the following statement. The carrier shall not make delivery of the shippert of the following statement. The carrier shall not make delivery of the shippert of the following statement. The carrier shall not make delivery of the shippert of the following shall not make delivery of the shippert of the following shall not make delivery of the shippert of the following shall not make delivery of the shippert of the following shall not make delivery of the shippert of the following shall not make del | • | | | | TRAILER/CA | AR NUMBER | : | | |
|---|---|--|--------------------------|---------------------------------------|----------------------------------|------------------|-----------------|--|--|
| Consignee: COVANTA INC. Street 2320 S. HARDING ST. Destination City/State/Zip INDIANAPOLIS, IN. 46221 Route: FOR PAYMENT, SEND BILL TO Name Company Street City/State/Zip Jackson, MI 49203 Special Instructions: ATIN: BRIAN FOSTER 317-532-6717 Street City/State/Zip NO. SHIPPING UNITS TIME DESCRIPTION OF ARTICLES SPECIAL MARKS & EXCEPTIONS 50 BAGS PLASTIC BAGS OF FOAM 2500 C.O.D. AMOUNT: \$ If this shipment is to be delivered to the consignee without recourse on his final following statement. The carrier shall not make delivery of this shipment without payment of freight and 40 charges. NOTE: Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the progety. The agreed or declared value of the progety in writing the agreed or declared value of the progety in writing the agreed or declared value of the progety in writing the agreed or declared value of the progety. The agreed or declared value of the progety in writing the agreed or declared value of the progety in writing the agreed or declared value of the progety in writing the agreed or declared value of the progety in writing the agreed or declared value of the progety in writing the agreed or declared value of the progety of the progety described above which said carried word carried to the suit agreed to the classes described in a fine of the progety winder the control of the progety of the progety winder the control of the progety of the progety described above which said carried to the relieve of the progety winder the control of the progety of the progety winder | | | | | | | BILL DA | TE: 00-00-13 | |
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| Route: FOR PAYMENT, SEND BILL TO | Destination | | | | Origin | | | | |
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| | Lading 172.201(a)(1) (iii) of Title | 4 9. Code of Federa | al Regulations | s. Also when | shipping hazar | dous materials | s, the shippe | r's certification statement | |
| | | | | | ne Bill of Lading | does apply, u | nless a spec | ciric exception from the | |



Pre-Shipment Notification And Non-Hazardous Certificatio

| SHIP FROM/SCHEDU | ULING INFORMATION | | | | |
|--|---|--|--|--|--|
| Delivery Date: 5/26/21 | | Time 11 Ar | Time 11 Am Estimated Tons 2.5 | | |
| Company: ARCA Recycling Inc. | | Address: | Address: | | |
| Contact: Chris Chammas | | | 936 Water Street Jackson Michigan 49203 | | |
| Transporter: | | Cov#: COV15048 | | | |
| WASTE INFORMATI | ON | 克斯特的 | | | |
| Approval # | Waste Description | Quantity | Packaging | | |
| 16786 | Rigid Polyurethane Foam | 50 | 50 lb bags | | |
| BILLING INFORMAT | rion | 77459775,177 | | | |
| Company: ARCA Inc. | | Cov#: COV | Cov#: COV15048_11 | | |
| Address: 2000 Bennett Rd. Ste. 300 | | Purchase Or | Purchase Order: | | |
| Philadelphia, PA 19116 | | Email: | Email: | | |
| Contact: | | Telephone no | Telephone number: | | |
| NON-HAZARDOUS (| CERTIFICATION (SIGNED BY GENE | RATOR'S REPR | ESENTATIVE) | | |
| apolis or destruction b Recovery Act (RCRA) | y incineration are not subject to regulati Regulations, 40 CFR Part 260 et seq., Stat ous waste. Only those materials described | ons as hazardous e and/or Local Re | | | |
| Signature: | Ch | | Date: <u>5 26/2021</u> | | |
| CERTIFICATE OF D | ISPOSAL/DESTRUCTION (SIGNED E | BY COVANTA) | A CONTRACTOR OF THE PROPERTY O | | |
| (Facility check one) | | | | | |
| • | Certificate of Destruction [] | | | | |
| and delivered to the ref accordance with the co for in the Supplementa processed for energy a applicable local, state, | following comments, the listed material has pit and/or feed chute for combustion inditions of the approval to accept said was a Waste Disposal Agreement. The listed more covery at Covanta Bristol Inc. in account and federal regulations. The total weight isted on the scale ticket. The placement of the was witnessed by: | in the unit(s) in stess as provided naterial has been ordance with all t of the material | Company: Covanta Indianapolis Address: 2425 S. Belmont Ave City, State, Zip: Indianapolis IN 46221 Contact Name: Alex DeVilla Email: adavila@covanta.com Telephone: 317-378-8723 | | |
| Witness Signature X | | | Date 5 /27/21 | | |

Sales Order #: _____

For Further assistance please contact your Client Services at 1-800-950-8749

Note: Some information contained in this document may constitute confidential, propietary or trade secret information of the Company named herein, or its parents, subsidiaries or affiliates. Disclosure of such information to third parties without prior notice to and approval by the Company is prohibited.

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